VA NURSING ACADEMIC PARTNERSHIPS  
REQUEST FOR PROPOSALS

1. PURPOSE

a. Request for Proposals: The Office of Academic Affiliations (OAA), in collaboration with the Office of Nursing Services (ONS), solicits proposals for the Department of Veterans Affairs Nursing Academic Partnerships (VANAP) program, to foster the development of closer relationships between VA facilities and schools of nursing (SON) with baccalaureate degree programs. This program provides the financial and consultative resources to enable substantive change in VA/nursing school relationships and promote innovation in nursing education and practice. VA facilities and affiliated nursing schools committed to enhancing academic partnerships are invited to submit proposals to participate in this program. It is a requirement of this RFP that sites develop and implement a Post-Baccalaureate Nurse Residency (PBNR) program for accreditation.

Sites selected for VANAP will be expected to implement a PBNR residency, which will require the development and implementation of a Veteran-centric residency curriculum and program evaluation consistent with Commission on Collegiate Nursing Education (CCNE) accreditation standards.

All PBNR programs must be accredited by the CCNE or receive accreditation within 2 years of residency implementation. Facilities may use the first year of VANAP to develop a curriculum and evaluation methodology per CCNE standards. The residency will be implemented at the start of the 2nd year of VANAP. VANAP funding will cease for any sites that fail to obtain CCNE accreditation within 2 years of the start of the residency.

VANAP will leverage academic and clinical resources to increase student enrollment, enhance VA VANAP faculty competencies and professional scholarship, revise academic curriculum to include Veteran specific health problems, develop interprofessional education, develop Veteran-centric practice and education initiatives, and increase the recruitment and retention of VA nurses. Sites selected for VANAP will be required to develop and implement a Veteran-centric PBNR curriculum and program evaluation and successfully obtain CCNE accreditation. The majority of clinical training in this program will occur within the VA healthcare system.

This program announcement provides information, policies, and application procedures for VA facilities and schools of nursing regarding the VA Nursing Academic Partnerships program.

b. Eligibility to Apply: All VA facilities (with the exception of current VA Nursing Academic Partnerships and facilities funded as part of the VANA pilot from 2007 to 2012) that have an established affiliation agreement with one or more schools of nursing accredited through the Commission on Collegiate Nursing Education (CCNE) or Accreditation Commission for Education in Nursing (ACEN) may apply.

Successful applicants will demonstrate strong executive and programmatic leadership support and a documented record of innovation in education and clinical practice. Demonstrated leadership in strategic planning 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 this program announcement and must provide evidence of existing academic collaboration. Applicants should focus their
proposals on baccalaureate nursing education, with four-year traditional programs strongly preferred. However, accelerated programs are also eligible and encouraged to apply.

Accelerated programs will need to identify methods used to enable VA faculty to fully participate in the given academic role considering the academic calendar compression inherent to accelerated programs. VA faculty is expected to fully perform didactic, simulation, and clinical teaching as well as participate in the achievement of VANAP objectives.

The same VANAP objectives, goals, and outcomes are required of both traditional and accelerated programs. The required increase in student enrollment must be in the educational program identified as the VANAP program.

A letter of intent to submit a proposal must be submitted by February 27, and a full proposal must be submitted by April 10, 2015. (See Attachments 1 and 2 for submission instructions.) The letter of intent must demonstrate an ongoing institutional commitment and support for VANAP and the PBNR.

c. Expected Annual Funding: Up to four VA Nursing Academic Partnerships will be selected for implementation in academic year (AY) 2015-2016. Selected sites will receive a comprehensive funding package designed to enable robust implementation of an academic partnership that will bring value to Veterans, students, faculty, and staff.

Faculty funding for the first year of the partnership will include five full-time FTEEs as well as two part-time (0.50 FTEE) program directors, one each for the VA facility and the SON. In the second through fourth years of the partnership, up to 10 full-time faculty FTEEs as well as the two part-time program directors will be funded. In the fifth year (AY 2019-2020) of the partnership, faculty funding levels will revert to the first-year rate of five full time FTEEs and two part time program directors. Each faculty member and program director must commit at least 50% time to VANAP activities.

Partnerships will receive central funding for these five years, subject to VA appropriations and the ability of sites to initiate, execute, and meet program goals and objectives. Sites that fail to obtain CCNE accreditation within 2 years of the start of the PBNR will not be funded for subsequent years. Successful sites will be expected to maintain the partnership beyond the five-year period of central funding. (See Section 4b(5) for local funding expectations.)

2. BACKGROUND

The new VANAP program builds upon the extraordinary relationships and dynamic innovations fostered by the Veterans Affairs Nursing Academy (VANA). VANA was established in 2007 as a five-year pilot program to address the VA and national nursing shortages at the critical bottlenecks of faculty availability and clinical training site capacity.

The pool of qualified preceptors was increased by using clinically experienced and academically prepared VA nurses to expand SON faculty. Funding was provided for partnering nursing schools to hire faculty and for VA facilities to provide release time and backfill positions for VA faculty. VA facilities provided expanded access to clinical training sites; in return, the partnering nursing schools agreed to increase baccalaureate student enrollment. In sum, VANA provided the platform, structure, and resources for the expansion of undergraduate nursing education with a focus on improving the health of our Veterans.

The VANA pilot promoted programs that enhanced the professional development of VA
nurses, fostered innovation in nursing education and practice, facilitated recruitment of new graduate nurses to VA, introduced the Post-Baccalaureate Nurse Residency to VA and reduced the turnover of nurses at VANA training sites. Closer integration of education with practice resulted in numerous Veteran-centric innovations and initiatives. Internal and external assessments demonstrated strong positive learning and professional development outcomes and a favorable return on investment. These assessments also identified the characteristics of successful partnerships which have been incorporated into the new VANAP program.

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) that provides guidance and standards for accreditation of PBNR programs through the CCNE Residency Accreditation Committee. Standards may be accessed at http://www.aacn.nche.edu/Accreditation/pdf/resstandards08.pdf, and procedures for preparing and applying for accreditation are available at http://www.aacn.nche.edu/Accreditation/pdf/ProceduresResidency.pdf.

3. PARTNERSHIP GOALS AND OBJECTIVES

The VANAP program is designed to enable stronger, mutually beneficial relationships between nursing schools and VA facilities by: (a) increasing student enrollment and clinical training capacity; (b) enhancing VA VANAP faculty competencies and professional scholarship; (c) promoting innovation in education; (d) revising academic curriculum to include Veteran specific health problems; (e) developing interprofessional education; (f) developing Veteran-centric practice and education initiatives; (g) increasing the recruitment and retention of VA nurses; and (h) developing and implementing a PBNR and obtaining CCNE accreditation for PBNR residency by the second year. Sites selected for VANAP will be required to develop and implement a Veteran-centric nurse residency curriculum and program evaluation and successfully obtain CCNE accreditation.

The nature of the PBNR program, populations served, training experiences provided, and qualifications and skills of faculty and registered professional nursing staff must be appropriate to the VA mission and meet CCNE standards. A teaching partnership between the VA facility and a School/College of Nursing is required. Clinical settings must provide a range of experiences in the application of nursing science and practice, provide exposure to patients of varying backgrounds and cultures, and foster graduated responsibility in carrying out professional functions.

4. PARTNERSHIP EXPECTATIONS

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

(1) The VA Facility and SON will:

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

(b) Work collaboratively to develop, implement, and evaluate innovative
approaches to education and nursing practice at the VA and the SON.

c) Collaboratively select qualified VA nurses to participate in this program and assist them in assuming faculty roles and responsibilities.

d) Collaboratively select qualified SON faculty to participate in this program.

e) Jointly develop and implement Veteran-centric educational and practice initiatives.

(f) Demonstrate the ability to provide quality residency training. The PBNR program must be accredited by CCNE or become accredited by CCNE within 2 years of its start. The application for approval as a VA training site must include a realistic plan and timetable to obtain CCNE accreditation.

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

(h) 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 2 years of initiation of the residency program.

(i) Jointly develop a sustainability plan, inclusive of faculty resources and operating funding, for the sixth and future years of the program.

(2) The VA Facility will:

(a) Provide VA paid or Intergovernmental Personnel Mobility Act (IPA) appointments to SON faculty who participate in VA nursing education, practice, or administrative activities.

(b) Provide release time for VA faculty to participate in partnership activities at both the VA and the SON.

(c) Support VA-based faculty participation in SON committees.

(d) Develop and implement a robust recruitment program for VANAP graduates and promote hiring of graduates who meet VA employment criteria.

(e) Fund the VA program director and selected VA faculty to attend an initial planning meeting and follow-up implementation and evaluation meetings organized by national VANAP leadership throughout the program.

(3) The School of Nursing will:

(a) Provide faculty appointments to VA nurses who participate in academic activities at the VA and SON.

(b) Provide release time for SON faculty to participate in partnership activities at both the SON and the VA and the development of PBNR curriculum.

(c) Support SON faculty participation in VA nursing committees and practice initiatives.

(d) Incorporate Veteran-centric concepts into the curriculum to ensure that nurses are prepared to address the health needs of military service members, Veterans, and their families.
(e) Fund the SON program director and selected faculty to attend an initial planning meeting and follow-up implementation and evaluation meetings organized by national VANAP leadership throughout the program.

(f) 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 on PBNR and CCNE accreditation.

b. General Attributes: In developing the proposal, applicants should pay particular attention to the following attributes of successful partnerships.

(1) Transformative Potential: Innovative models of nursing education are the building blocks of the future nursing workforce. Address the role of the 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.

(2) 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 has been developed by the partners as a joint enterprise, and describe the process for shared decision-making moving forward. Address how SON faculty will be integrated into VA organizational structure and culture and how VA faculty will be integrated into SON organizational structure and culture.

(3) Partnership Governance: Successful partnerships require strong internal and external support. Provide a plan that describes program management, oversight, strategic planning, communication within and external to VANAP stakeholders, conflict management, joint decision-making, and recruitment and retention plans. 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 a program advisory committee, explaining how it will advance the major goals and objectives of this initiative.

(4) Local Support: VA and SON leadership must have a demonstrated commitment to VANAP, endorse the application 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 activities; and (3) the availability of human resource and fiscal support services to facilitate IPA logistics, to hire faculty, and to manage funds and quarterly reports for the program.

(5) Program Sustainability: This initiative is part of an ambitious plan to expand 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 five-year period of central funding. A detailed MOU is not required at this time; however, specific commitments to maintain the program with local funding must be part of the proposal.
c. **Specific Requirements:** In developing the proposal, applicants must address the following specific requirements of the program.

1. **Program Directors:**
   
   (a) Each partnership must have two designated program directors, one for the VA facility and one for the SON. Each program director will receive central funding at the 0.5 FTEE level for five years (AY 2015-16 through AY 2019-20).
   
   (b) Both program directors must be willing and able to develop and maintain collaborative partnerships with academic and clinical leaders, facilitate development and implementation of the identified education and practice innovations, support faculty and staff development, participate in hiring and evaluating faculty, lead program evaluation activities, and complete an annual report of the accomplishments of the program.
   
   (c) The VA nurse executive and SON dean will approve the program directors and ensure that they are freed up from other responsibilities so that they have at least 50% time devoted to VANAP activities.
   
   (d) The SON dean shall ensure that the VA program director receives a faculty appointment commensurate with qualifications and responsibilities.
   
   (e) Program Directors shall have at minimum a Master’s Degree in Nursing with a Doctorate preferred. Additionally, they shall also have 3–5 years of experience in program management, management, and academia.
   
   (f) It is an expectation that the developed PBNR residency curriculum is posted on the OAA SharePoint site.

2. **Faculty:**

   (a) The number of VANAP faculty is dependent on the year of the program. Funding for the first year (AY 2015-16) of the partnership will include five FTEEs, exclusive of the program directors. Funding for three FTEEs will be available to the VA, and funding for two FTEEs will be available to the SON. In the second through fourth years of the partnership, up to 10 FTEEs (inclusive of the program directors) will be funded. Funding for up to six FTEEs will be available to the VA, and funding for up to 4 FTEE will be available to the SON. In the fifth year (AY 2019-20) of the partnership, faculty funding levels will revert to that of the first year. Funding is reserved for participating faculty and program directors only; the SON dean and the VA nurse executive cannot be funded through this initiative.

   (b) Faculty will participate in a variety of educational activities at the VA and the SON, including didactic instruction, simulation exercises, clinical precepting, performance improvement and evidence-based practice learning experiences, and participation in academic planning, review, and operational committees.

   (c) Faculty will be jointly selected by the VA and SON program directors and must be approved by VA and SON leadership, as appropriate. Appointment of faculty will be consistent with the standards for employment at the respective partner facilities.

   (d) The VA nurse executive and SON dean must ensure that all faculty members are freed up from other responsibilities so that they have at least 50% time devoted to VANAP activities.
(e) The SON dean will ensure that VA nurses receive faculty appointments commensurate with their qualifications and responsibilities and that VA faculty participate fully in the academic life of the school. This will include opportunities to enhance faculty core competencies, including educational and research skills. The SON’s professional development opportunities will be made fully available. Each VA faculty member will be assigned a SON mentor, with a focus on individual needs assessment, consultation as issues arise, and opportunities for scholarly collaboration.

(f) VA and SON faculty are responsible for developing an innovative PBNR curriculum that reflects the needs and current standards identified by CCNE.

(g) Faculty will be assigned to provide indirect and direct clinical supervision for residents in the PBNR program.

(3) Student Enrollment and VA Training Cohort:

(a) Faculty funding is linked to required increases in student enrollment in the baccalaureate nursing program and the number of students participating in VA clinical education opportunities (representing annual cohorts of VANAP students).

(b) Central funding is contingent on the SON increasing its baccalaureate enrollment by 20 students over the baseline in the first and fifth years of the program and by 40 students in the intervening years as described in the below table. Failure to reach these targets will result in proportionate reductions in funding.

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<thead>
<tr>
<th></th>
<th>AY 15/16</th>
<th>AY 16/17</th>
<th>AY 17/18</th>
<th>AY 18/19</th>
<th>AY 19/20</th>
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<tbody>
<tr>
<td>VA Faculty FTEEs</td>
<td>3</td>
<td>6</td>
<td>6</td>
<td>6</td>
<td>3</td>
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<tr>
<td>SON Faculty FTEEs</td>
<td>2</td>
<td>4</td>
<td>4</td>
<td>4</td>
<td>2</td>
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<tr>
<td>Total Faculty FTEEs</td>
<td>5</td>
<td>10</td>
<td>10</td>
<td>10</td>
<td>5</td>
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<tr>
<td>Program Directors</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
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<td>(0.5 each at VA and SON)</td>
<td>1</td>
<td>1</td>
<td>1</td>
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<tr>
<td>Student Enrollment Increase (over AY 14/15 baseline)</td>
<td>20</td>
<td>40</td>
<td>40</td>
<td>40</td>
<td>20</td>
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<tr>
<td>Residency enrollment increases</td>
<td>0</td>
<td>6</td>
<td>6</td>
<td>6-10</td>
<td>6-10</td>
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(c) Each annual cohort of VANAP students is expected to receive the majority of their clinical education in new or enhanced programs at the VA facility.

(d) For evaluation and reporting purposes, VANAP students must be tracked as a discrete cohort for the duration of their BSN program and for five years following graduation.

(e) Upon award of CCNE accreditation and with availability of central funding, approved sites may increase their residency positions from six to ten.

(f) Nursing schools are encouraged to allow separating military Servicemembers to receive credit or course waivers for nursing-focused clinical skills learned in military settings. Each proposal should speak to current practice and plans to facilitate Veterans and Servicemembers receiving appropriate academic credit for military education and experience.
(4) Innovations in Nursing Education and Practice: Nursing education and clinical practice innovations are expected components of the partnership and should be implemented collaboratively. The proposal should identify initial plans for achieving this objective. Such innovations might include:

(a) New settings for clinical experiences, especially settings that promote military cultural competence and evidence-based care.
(b) Student experiences that demonstrate continuity of care across clinical settings.
(c) Enhancing Veteran-centric mental health education throughout the curriculum.
(d) Interprofessional collaborative learning opportunities.
(e) Practice initiatives aligned with VHA and facility objectives or identified facility needs.
(f) Quality of care, patient safety and performance improvement initiatives.
(g) New models of clinical education, such as dedicated education units.
(h) Development of continuum of recruitment and retention initiatives. Examples include the alignment of the VALOR program, Post-Baccalaureate Nurse Residency programs for new VANAP graduates and Mental Health Nurse Practitioner (MH NP) residencies.
(i) Leveraging academic relationships through successful application for other OAA funded nursing initiatives such as the Mental Health Nurse Practitioner Graduate Education program, Mental Health Nurse Practitioner Residency, and/or Psychiatric Post-Baccalaureate Nurse Residency.

(5) Recruitment and Retention of VA Nurses: The national VANAP program is designed to enhance nurse recruitment and retention. VA facilities are required to:

(a) Develop and implement a recruitment and retention plan for VANAP graduates and give priority to hiring qualified graduates.
(b) Collaborate with the VA nurse recruiter network to facilitate job placement within the VA system for any graduate not hired by the participating facility.
(c) Consider VANAP nursing students for participation in the VA Learning Opportunities Residency (VALOR).
(d) Develop, implement, and successfully receive CCNE accreditation for the PBNR program.

5. PARTNERSHIP POLICIES

a. Appointment and Compensation of SON Faculty: SON faculty will either be appointed to the VA part-time and paid directly by VA or remain wholly on the school’s payroll with the school reimbursed for salary and benefits through an IPA agreement. Other potential forms of faculty reimbursement must be approved in advance by the VANAP National Program Director.

(1) SON Faculty Appointed to and Paid by the VA: SON faculty appointed to VA part-time will receive salary and benefits based on VA national qualification standards and local VA facility salary scales prorated by FTEE designation. VANAP faculty must meet all requirements for appointment to VA, including U.S. citizenship. Using this payment option, SON faculty:
(a) Will be paid directly by VA. Funds will not be paid to the school for this purpose.

(b) May become part-time VA employees and continue as part-time school employees. VA funding may not be used to supplement a full-time salary from the school or to increase individually determined SON salaries. However, it is recognized that differences in VA and SON salary rates may lead to changes in total remuneration.

(c) Will be eligible for prorated VA benefits such as annual and sick leave and participation in the Federal Employees Health Benefits Program, Federal Employees Retirement System, and the Thrift Savings Plan, as determined by Federal regulations for part-time employees.

(2) **SON Faculty Paid through an IPA Agreement between the VA Facility and the SON:** The school will be reimbursed by the VA for services provided by designated faculty while at VA facilities or providing services for VA. Reimbursement will be for the usual salary and fringe benefits as reported by the SON and VA program directors. Using this payment option, SON faculty:

(a) Will be processed for appointment at the VA facility according to the policies and procedures for “without-compensation” employees.

(b) Will not receive additional salary based on their assignment to the VANAP program.

(c) Will receive benefits according to SON policies.

(d) Are not entitled to VA employee benefits other than those provided to “without-compensation” employees.

(e) Are required to maintain appropriate registration, licensure, and certification and must provide this documentation to the VA facility upon request.

**b. Appointment of VA Nurses as SON Faculty:** VA nurses will be appointed as nursing school faculty in accordance with the usual practices of the school. It may be necessary for an individual to obtain a license to practice in the state where the school is located.

**c. Annual Reporting:** A standardized, web-based annual report will be used to monitor site compliance with program requirements and detail major accomplishments of the partnership.

**d. Site Visits:** Site visits will be conducted at the discretion of the VANAP National Program Director. They will be consultative in nature and designed to facilitate success as well as to evaluate adherence to overall VANAP objectives and the predetermined objectives of the specific partnership proposal.

**e. Early Termination:** Program directors are expected to communicate frequently and freely with local leadership about any issues that may impede partnership success. Program directors and local leadership are strongly encouraged to seek early assistance from the VANAP National Program Director as well. It is the joint responsibility of the VA facility director and SON dean/director to notify the VANAP National Program Director of significant unresolved issues. If informal consultation fails to resolve the problem(s), the partnership will be notified in writing by the VANAP National Program Director that a corrective action plan is required. If corrective efforts are not fully successful within a stipulated period of time, participation in the program will be terminated.

**f. Research:** VANAP is an educational initiative, and evaluation activities are intended to
support ongoing program improvement. Such activities are normally exempted from human subject research oversight requirements, but only the Institutional Review Board (IRB) has the authority to make that determination. We anticipate that the initiative will also generate ideas and opportunities for publication of observational data and hypothesis-driven research. Interested investigators are encouraged to contact the VANAP National Program Director for further information and to explore opportunities for collaboration. Research projects will be subject to IRB review and must be funded through alternate channels.

g. **Liability Protection:** When providing services at a VA facility in accordance with this program, SON faculty and students will be protected from personal liability under the *Federal Employees Liability Reform and Tort Compensation Act*, 28 U.S.C. 2679(b)-(d). VA faculty will similarly be protected while at the VA facility or the school.

### 6. PROGRAM EVALUATION

Evaluation of the VANAP program will be implemented at both the local partnership level and the national level. Each partnership must develop an evaluation plan to assess education, clinical practice, and program achievements. The annual report will inform the success of these activities as well as any barriers to completion. Performance metrics will also be identified in the plan as applicable. The following list contains examples of potential evaluation activities and is not intended to be either comprehensive or prescriptive.

#### a. Education

1. How were educational innovations identified and developed? What has been the impact on curriculum content, process, and outcomes? What is the likelihood that curriculum changes will be retained?
2. Were Veteran-centric topics or courses introduced that enhance military cultural competence, and how were they received by students, faculty, and Veterans?
3. Identify use of simulation in the VANAP and PBNR programs. Report the Veteran-centric simulations developed as well as the inclusion of complex co-morbidities and female Veteran problems. How is military cultural competence taught and evaluated? What lessons were learned by faculty relative to concept and method of teaching and evaluation?
4. What structural changes to the curriculum were tested? Examples might include embedding SON faculty on VA nursing units or the creation of VA-based designated education units.
5. Has student performance on standardized tests, including tests of clinical skills, improved? Identify the baseline scores prior to VANAP and PBNR and all expected improvements.
6. Collection of demographic data (PBNR Demographic Data Instrument) for all PBNR participants?
7. Evaluation of resident-specific outcomes and overall PBNR program outcomes.

#### b. Clinical Practice

1. Has VANAP and PBNR fostered improvements in nursing practice and patient care? How were clinical practice innovations identified and implemented? What has been
the impact on existing clinical care practices? Examples might include quality improvement projects or evidence-based practice projects (care of veterans with PTSD, traumatic brain injury, military sexual trauma, homeless, mentally ill, prevention of falls, reduced nosocomial infection rates, etc.), improvements in discharge planning, and reductions in length of stay.

(2) Were improvements in nursing practice and patient care associated with reductions in the cost of care?

(3) Has VANAP and PBNR promoted interprofessional learning opportunities to enhance communication and collaboration among healthcare disciplines? How has this impacted patient safety?

c. Program

(1) Were students satisfied with the VA clinical learning environment? What were the strengths and weaknesses identified and their suggestions for improvement? How does the VA compare to other clinical training sites used by the SON?

(2) Were faculty satisfied with their roles and responsibilities in the program? Were they oriented or prepared for these new roles and responsibilities, and was this effective? What were their suggestions for improvement?

(3) Do faculty view involvement in VANAP as an important career development opportunity? Are faculty planning to seek additional professional development opportunities and advanced degrees?

(4) What are the VANAP and PBNR faculty retention and turnover rates, and what factors influence these rates?

(5) What are the students’ career plans? How many have been recruited to the VA (locally and nationally) for PBNR residencies? What factors determine recruitment and retention?

7. REVIEW PROCESS

a. Review Committee: An ad hoc review committee designated by the Chief Academic Affiliations Officer will assess the merits of proposals. Reviewers will have demonstrated expertise and leadership in health professions education and clinical practice.

b. Incomplete Proposals: Incomplete proposals (i.e., those with missing or incomplete elements) will not be considered by the review panel.

c. Key Selection Factors: The determining selection factors will be the level of commitment of VA facility and SON leadership (including willingness to maintain the program following cessation of central funding) and the strength of proposed innovations in nursing education and practice.

d. Scoring Criteria: Proposals will be scored according to the following criteria.
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<tr>
<th>Criteria</th>
<th>Points</th>
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<tr>
<td>Demonstrates commitment and ability of the VA facility and SON leadership to support a culture of excellence in nursing education and practice, implement and maintain VANAP, and meets all the requirements of the RFP. Letters of support demonstrate understanding of the purpose of VANAP. Letters of support include authorization as appropriate for faculty release time, facilities support accreditation of PBNR program, space and commitment of resources to support sustainability.</td>
<td>10</td>
</tr>
<tr>
<td>Demonstrates commitment and ability of the SON to increase enrollment by the required number of students in the baccalaureate degree program and recruit a qualified program director and faculty.</td>
<td>10</td>
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<tr>
<td>Governance plan demonstrates understanding of the intent of VANAP and delineates the structural and process elements supporting vibrant management and strategic vision. Communication, conflict management, strategic planning and joint decision-making are core elements of the governance plan with clear pathways to enable collaborative leadership and practice. Strength of the VANAP communication, operations and strategic plan, including the roles of the dean, nurse executive, and program directors.</td>
<td>20</td>
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<tr>
<td>Strength of the professional development plan for VANAP VA faculty. Ability of VA faculty professional development plan to meet core educational competencies for faculty as well as enhance professional scholarship and publications. Presence of individual faculty needs assessment methodology and subsequent custom plan to achieve identified competency.</td>
<td>10</td>
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<tr>
<td>Strength of the recruitment and retention plan for VANAP. This plan identifies alignment with current VA recruitment resources, includes methods to actively recruit Veterans, and includes a strategy to assure recruitment slots are held for VANAP graduates. Recruiter outreach to other VA facilities and development of a plan to assure communication of available VA positions within the state and the nation are required.</td>
<td>10</td>
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<tr>
<td>Strength of plan for proposed innovations in nursing education and clinical practice. Innovations should consider curricular revision specific to common Veteran healthcare problems and military culture. Practice innovations should enable professional interactions as well as evidence based initiatives.</td>
<td>20</td>
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<tr>
<td>Strength of interprofessional education plan with emphasis on both curriculum and experiential interprofessional learning opportunities.</td>
<td>10</td>
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<tr>
<td>Strength of the local evaluation plan, its alignment with VANAP core objectives, the ability to develop cost avoidance and revenue enhancement estimations towards VANAP core objectives, and commitment to producing annual evaluation reports and participating in national evaluation activities.</td>
<td>10</td>
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<td><strong>TOTAL</strong></td>
<td><strong>100</strong></td>
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Additional Considerations:

1. Up to an additional 20 points can be awarded to proposals which adequately demonstrate one or more of the following:
a. Presence of an academic credit progression for relevant military experience.
b. Enhanced Veteran-centric mental health education throughout the curriculum.
c. Presence of an existing and accredited PBNR.
d. Current VANAP proposals include PBNR with specialty in psychiatry.

8. SCHEDULE

- **February 19, 2015**: Request for proposals distributed to VISNs, VA facilities, schools of nursing and other professional organizations
- **February 27, 2015**: Letter of intent due to Office of Academic Affiliations (see instructions in Attachment 1)
- **April 10, 2015**: Proposals due to Office of Academic Affiliations by 11:59PM Eastern Time (see instructions in Attachment 2)
- **May 6, 2015**: Applicants notified of selection/non-selection
- **July 1, 2015**: Program implementation and funding begins
- **October, 2015**: First annual report due to the Office of Academic Affiliations

9. CONTACTS (for further information or questions)

- Mary Dougherty, PhD, MBA, RN, VANAP National Program Director in the Office of Academic Affiliations, at (202) 461-9498 or mary.dougherty@va.gov
- Johnnie Guttery, MSN, RN, VANAP National Clinical Director in the Office of Academic Affiliations, at (202) 461-1482 or johnnie.guttery@va.gov
- David Bernett, Office of Academic Affiliations Support Center Specialist, for any technical questions or problems, at (803) 647-5806 or david.bernett@va.gov
ATTACHMENT 1

LETTER OF INTENT INSTRUCTIONS

1. **Letters of intent are due no later than 11:59pm Eastern Time on February 27 and must be uploaded to the following:** [http://vaww.oaa.med.va.gov/rfp_general/default.aspx?PID=32](http://vaww.oaa.med.va.gov/rfp_general/default.aspx?PID=32)
   
   a. Letters should be addressed to the Chief Academic Affiliations Officer (10A2D).

2. **Letters should be signed by the VA facility director and contain the following information.** (It is understood that some of this information might evolve or change with the development of a full proposal.)
   
   a. Statement of intent to submit an application
   b. Name of VA facility and SON comprising the proposed partnership
   c. Name, credentials, and contact information for the VA and SON points of contact responsible for development of the proposal
   d. Facility’s commitment to support and commit VA resources required for CCNE accreditation of PBNR program.
   e. VA and SON agree to fund expenses for the PBNR program and obtain accreditation by CCNE within 2 years of initiation of the residency program. Accreditation application must be submitted to CCNE within the first year of the residency.
ATTACHMENT 2

PROPOSAL INSTRUCTIONS

1. FORMAT AND SUBMISSION
   a. **Font Size and Margins:** Font size must be 10-point or larger and margins must be one inch on all sides, excluding headers and footers.

   b. **Page Limits:**
      1. The core narrative (section 2e, below) must not exceed 20 pages. The information identifying the VA and SON, the transmittal letter, and the abstract are **not included in the core narrative page limit.**
      2. The letters of support and any supplemental materials must not exceed 10 pages.
      4. You must initially register for access by clicking on the REGISTER link at the bottom of the page.
      5. After registration, you will be able to login with your created password. After login you will be ready to begin your upload(s).
      6. Documents required for upload are the **transmittal letter**, the **table of contents**, the **abstract**, the **core narrative**, the **letters of support and supplemental materials**.
      7. Documents can be uploaded as one or more **PDF files. Please name your file(s) appropriately. The application will not change your file names.**

2. ORGANIZATION
   a. **Identifying Information:** Identifying information will be entered directly into the online database.
      1. **VA Facility**
         a. Name of facility
         b. City and state
         c. Director’s name and e-mail address
         d. Nurse executive’s name, title, e-mail address and phone number
         e. Proposed program director’s name, current position, telephone number, fax number, e-mail address, and percent of time assigned to this role
      2. **School of Nursing**
         a. Name of college or school of nursing
         b. City and state
         c. Dean/director’s name, title, e-mail address, and phone number
         d. Proposed program director’s name, current position, telephone number, fax number, e-mail address, and percent of time assigned to this role
         e. Name of university (if applicable)
b. **Transmittal Letter:** The transmittal letter must be signed by the VA facility director and shall include:

(1) A statement of the VA facility commitment to the program and that a similar commitment has been received from the SON dean/director,

(2) A description of contributions of the proposed partnership to the care of Veterans and to nursing education and practice,

(3) An agreement to provide release time for the VA program director and VA faculty,

(4) An agreement to pay SON faculty as described in the staffing plan in the proposal,

(5) An agreement to fund travel and registration for the VA program director and selected VA faculty to attend an initial planning meeting and follow-up implementation and evaluation meetings organized by the VANAP National Program Office on an annual basis,

(6) An agreement, within budgetary limitations, to pay for travel and registration for regional or national conferences at which the local VA program director or VA faculty have seen selected to give oral or poster presentations about VANAP activities,

(7) An agreement to develop a robust recruitment and retention program for VANAP graduates,

(8) An agreement to support the IT needs of the program,

(9) Facility’s agreement to pay CCNE accreditation fees (new applicant fee, $7500; site visit fee, $5250; and annual fee, $5000).

(10) An agreement to maintain the VANAP partnership after the cessation of central funding.

c. **Abstract:** The Abstract should describe the proposed partnership, must not exceed two pages, and should include:

(1) A brief history of relationship between VA facility and SON,

(2) A description of the proposed program, including governance and operations,

(3) The roles and responsibilities of VA and SON faculty,

(4) The SON faculty development opportunities for VA faculty,

(5) The proposed educational and clinical practice innovations,

(6) Determine the proposed PBNR accreditation plan.

(7) A description of the evaluation plan.

d. **Table of Contents:** Prepare a table of contents that identifies the major components and starting page numbers of the core narrative (section 2e), letters of support, and supplemental materials (section 2f).

e. **Core Narrative:** The core narrative must not exceed 20 single-spaced pages and should be numbered sequentially starting with page number 1. Proposals exceeding the page limitation will not be reviewed. The core narrative should include:

(1) **Background Information**

   (a) VA Facility:

   i. Clinical and education activities.

   ii. Nature of the relationship with the SON partner.
iii. Nursing vacancy and turnover rates and ability to backfill positions if current nurses are reassigned as VANAP faculty.

iv. Identify how the VA facility would benefit from a PBNR.

v. Describe role of VANAP SON and VA in obtaining successful accreditation of PBNR. Provide current accreditation status or accreditation plan and specific timeline for receiving accreditation from CCNE.

(b) School of Nursing:

i. Education programs, faculty, student enrollment, graduations.

ii. Accreditation status.

iii. Current clinical training programs at VA facility.

iv. Current inclusion of VA staff in academic activities such as precepting, teaching, and serving on SON committees.

v. Description of any advanced standing programs for students with military experience.

(2) Proposed Partnership

(a) Reasons for applying for the VANAP program, including expected outcomes and the transformative potential of the partnership for nursing education and practice.

(b) Governance:

i. Description of key governance elements, including mechanisms for shared decision-making and conflict resolution, plans for regular communication and meetings and how the overall governance structure will enhance the development of a common core faculty.

ii. Visual depiction of governance structure, such as a standard organizational chart, identifying key reporting relationships.

(c) VA and SON Program Directors:

i. Names, current positions, educational preparation (degree, university, date, specialty) and description of clinical, educational, and administrative experience that justify program director role.

ii. Percent FTEE devoted to this program (required minimum is 50%)

(d) VA and SON Faculty:

i. Selection method(s), including required qualifications.

ii. Roles and responsibilities in the program and anticipated percent of time each faculty member will devote to the program.

iii. If known, the names, positions, educational preparation (degree, university, date, and specialty) and clinical and educational experience.

iv. Percent FTEE that each will devote to this program (minimum required is 50%).

v. Faculty development plan for newly appointed VA faculty.

vi. Identify the roles and responsibilities of the VA and SON faculty in VANAP and PBNR programs and estimate amount of time faculty will devote to the program.

(e) VANAP Student Cohort:
i. Baccalaureate degree expansion plan (numbers must justify VA support of SON faculty).

ii. Selection method(s) for the VANAP cohort.

iii. Level and number of students involved in new or enhanced educational opportunities at VA and SON on an annual basis.

(f) Local Evaluation Plan:

i. Plan methodology to determine effective achievement of VANAP objectives.

f. Letters of Support: Letters of Support must not exceed 10 pages and should continue the page numbering started with the core narrative.

(1) VISN Director: Describe the importance of the program to the VISN and the Veterans Health Administration. Comment on how the VISN will be involved in governance of the program and the support it will provide. Include a specific commitment to maintain the program beyond the five-year period of central funding. Describe importance of VANAP and PBNR include specific plan to maintain the VANAP program beyond the five years of funding. Provide the CCNE standards required for the CCNE accreditation application. Commitment to include financial resources needed in maintaining the program and accreditation of PBNR beyond the five-year period of central funding.

(2) VA Facility Director: Describe the unique contributions the partnership can make to the care of Veterans and how facility leadership will be involved in governance of the program. Include a specific commitment to maintain the program beyond the five-year period of central funding.

(3) VA Nurse Executive: Describe the anticipated impact of the partnership on the care of Veterans, nursing education, and the nursing workforce locally and nationally. Discuss program governance and how VANAP students and faculty will be integrated into the specific nursing units involved in the partnership. Provide assurance that the VA program director and faculty will be released from their usual duties while participating in the program.

(4) Dean/Director of the School of Nursing: Describe the SON’s commitment to the partnership and the anticipated impact of the partnership on the care of Veterans, nursing education, and the nursing workforce locally and nationally. Discuss how SON leadership will be involved in the governance of the program. Provide assurance that the SON will expand the baccalaureate nursing program to meet the requirements of the RFP and that the VANAP cohort of students will receive the majority of their clinical education in a new or enhanced curriculum at the VA facility. Facilitate and support Veteran-centric curriculum and practice and education revisions, and provide examples of such to the VANAP SharePoint site. Also provide assurance that the SON program director and faculty will be released from their usual duties while participating in the program, that faculty appointments will be provided to qualified VA nurses participating in the program, and that SON professional development programs will be made available to VA faculty. Include a specific commitment to maintain the program beyond the five-year period of central funding. Provide veteran centric program curriculum.
(5) **Program Directors at VA Facility and SON:** Describe how you will be involved in the governance of the program and your specific roles and responsibilities. Provide assurance that you have been provided release time and resources to assume operational oversight of the program.

(6) **VA Designated Education Officer:** Provide your support for the VANAP program and describe how the program will enhance health professional education at the VA facility and nationally.

(7) Other letters as desired and within 10 page limit.

(8) Supplemental materials as desired and within 10 page limit.

g. **Funding Request:** Funding to support faculty positions in AY 2015-16 will be entered into a funding request spreadsheet.

(1) **VA and SON Program Directors (0.5 FTEE each):** Average annual salary and benefits for each program director

(2) **VA Faculty (total three FTEE):** Average annual salary and benefits per FTEE

(3) **SON Faculty (total two FTEE):** Average annual salary and benefits per FTEE

(4) **PBNR Residents (total 6-10):** Stipend per FTEE