VA NURSING ACADEMIC PARTNERSHIPS IN GRADUATE EDUCATION
PSYCHIATRIC-MENTAL HEALTH NURSE PRACTITIONER EDUCATION
ACUTE CARE NURSE PRACTITIONER EDUCATION
ADULT-GERONTOLOGY NURSE PRACTITIONER EDUCATION

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: Veterans Affairs Nursing Academic Partnerships in Graduate Education (VANAP-GE) program, to foster the development of closer relationships between VA facilities and schools of nursing (SON) with graduate advanced practice Psychiatric-Mental Health Nurse Practitioner (PMHNP), Adult-Gerontology Nurse Practitioner (AGNP), and Acute Care Nurse Practitioner (ACNP) degree programs. This program provides the financial and consultative resources to enable substantive change in VA/nursing school relationships and promotes innovation in nursing education and practice. VA facilities and affiliated nursing schools committed to enhancing academic partnerships that include the development, implementation and evaluation of a PMHNP, AGNP, or ACNP post-graduate residency are invited to submit proposals to participate in this program. This initiative will leverage academic and clinical resources to increase student enrollment by 6 to 12 students over baseline; enhance VA faculty competencies and professional scholarship; promote innovation in clinical education; revise academic curriculum to include Veteran specific mental health, primary care, or acute care problems; develop interprofessional education; develop Veteran-centric mental health, primary, or acute care practice and education initiatives; and increase the recruitment and retention of VA PMHNPs, AGNP, and ACNPs. Sites selected for this initiative will be expected to implement a postgraduate PMHNP, AGNP, or ACNP residency which will require the development and implementation of a Veteran-centric residency curriculum, resident competency assessment, program evaluation, and draft residency accreditation standards. All clinical training in the residency program will be expected to occur within the VA healthcare system. NP students will be strongly encouraged to apply for VA NP residency positions upon graduation.

This program announcement provides information, policies and application procedures for VA facilities and schools of nursing regarding the VANAP-GE program for Psychiatric-Mental Health, Adult-Gerontology, and Acute Care Nurse Practitioner Education.

b. Eligibility to Apply: All VA facilities that have an established affiliation agreement with one or more schools of nursing accredited through the Commission on Collegiate Nursing Education (CCNE) or the Accreditation Commission for Education in Nursing (ACEN) are eligible to apply. The partnering school of nursing must have a CCNE accredited Psychiatric Mental Health, Acute Care, or Adult-Gerontology Nurse Practitioner Program. Interprofessional learning is best served if the residency includes other professions such as Medicine, Psychology, Pharmacy, etc. It is expected that the NP program will work collaboratively with Medical and other health professions residency programs consistent with the NP specialty to assure an Interprofessional focus for both experiential and
didactic learning opportunities. Successful sites 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 provide evidence of existing academic collaboration. Applicants should focus their proposals on graduate psychiatric-mental health nurse practitioner, adult-gerontology nurse practitioner, or acute care nurse practitioner programs and a commitment to developing the PMHNP, AGNP or ACNP residency.

A letter of intent to submit a proposal must be submitted by February 27, 2015 and a full proposal must be submitted by April 10, 2015 (see Attachments 1 and 2 for submission instructions).

c. **Expected Annual Funding:** VANAP-GE 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 (AY 15-16) of the partnership will include three 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 five full-time faculty FTEEs as well as the two part-time program directors will be funded. In the fifth year (AY19-20) of the partnership, faculty funding levels will revert to the first-year rate of three full-time FTEEs and two part-time program directors. **Each faculty member and program director must commit at least 50% time (0.5 FTEE) to VANAP-GE activities. Program Directors will be expected to assume teaching (direct or indirect NP student supervision) as well as program administrative responsibilities.**

Partnerships will receive central funding for five years, subject to VA appropriations and the ability of sites to initiate, execute, and meet program goals and objectives. **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 VANAP-GE 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 collaborating nursing schools to hire faculty and for VA 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 a 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, 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 VANA program 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 VANAP-GE program.

Additional VA nursing academic partnerships have been implemented based on the success of the VANA pilot program including funding for 18 new VA Nursing Academic Partnerships (VANAP), Post-Baccalaureate Nurse Residency programs, and Psychiatric-Mental Health Nurse Practitioner Residency programs. The VANAP-GE educational programs described in this RFP support expanding graduate and post-graduate NP specialty education.

3. PARTNERSHIP GOALS AND OBJECTIVES

The VANAP-GE program is designed to enable stronger, mutually beneficial relationships between nursing schools and VA facilities by: (a) expanding faculty and professional development; (b) increasing PMHNP, AGNP, or ACNP student enrollment and clinical training capacity; (c) enhancing recruitment and retention of VA PMHNP, AGNP or ACNP residents and PMHNPs, AGNPs, and/or ACNPs; (d) providing opportunities for education and practice innovations aligned with veteran care; (e) developing and implementing a post-graduate PMHNP, AGNP, or ACNP residency; and (f) developing interprofessional psychiatric-mental health, adult-gerontology, or acute care education.

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-GE 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) Work collaboratively to develop and implement a VANAP-GE SON faculty NP practice program within the partnering VA facility by the second year of the program.

(d) Work collaboratively to develop the structure, curriculum, and evaluation plan for the PMHNP, AGNP, or ACNP residency; and contribute to the development of nurse practitioner residency accreditation standards.

(e) Sites selected for development of AGNP and ACNP residencies will work collaboratively with other OAA funded residencies to develop a national standardized resident competency assessment for their specific residency program using the PMHNP resident competency assessment as a framework for this instrument. PMHNP residency programs will be expected to use the existing national standardized PMHNP resident competency assessment instrument.

(f) Work collaboratively to implement and evaluate the post-graduate PMHNP, AGNP, or ACNP residency program.

(g) Collaboratively select qualified VA nurse practitioners to participate in this
program and assist them in assuming faculty roles and responsibilities.

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

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

(j) Jointly develop a sustainability plan, inclusive of faculty resources and operating funding, for the sixth and future years of the program. The sustainability plan will include proposed mechanisms to support ongoing work to meet VANAP GE RFP objectives including, but not limited to, faculty support for graduate NP education programs, NP residency programs, and SON faculty practice at the VA (e.g., MOU defining VA FTEE commitments for SON faculty practice at the VA).

(k) Share curriculum innovations and/or practice and education initiatives on the VANAP SharePoint site.

(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) Commit to hiring SON faculty for part-time VA NP clinical practice based on area of expertise/certifications by the second year of VANAP GE funding.

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

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

(e) Develop and implement a robust recruitment program for VANAP-GE residents; and promote selection of PMHNP/AGNP/ACNP graduates for the NP residency; and for hiring these residents after completion of the residency program.

(f) Fund the VA program director and selected VA faculty to attend the annual VANAP Conference 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) Lead the development of a proposed PMHNP, AGNP, or ACNP residency curriculum and identify a SON faculty member with expertise in curriculum development who will be responsible for meeting this RFP requirement. See Innovations in Education and Practice section of the RFP for a description of the curriculum plan required within the core narrative of the VANAP-GE proposal.

(c) Incorporate Veteran-centric concepts into the residency curriculum to ensure that NPs are prepared to address the health needs of military service members, Veterans, and their families.

(d) Identify VANAP-GE NP faculty committed to faculty practice and the development of a part-time NP practice at the VA within the faculty member’s area of expertise/certification by the second year of VANAP-GE funding.

(e) Provide release time for SON faculty to participate in partnership activities at both
(f) Support SON faculty participation in VA nursing committees and practice initiatives.

(g) Fund the SON program director and selected faculty to attend the annual VANAP Conference and follow-up implementation and evaluation meetings organized by national VANAP leadership throughout the program.

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 PMHNP, AGNP, or ACNP 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 the VA organizational structure and culture and how VA faculty will be integrated into the SON organizational structure and culture. Address how program leaders will collaborate with interprofessional colleagues for the development of interprofessional graduate and residency education and integration of NP residents into existing didactic and experiential learning programs offered for physician and other health professional residents.

(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-GE 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-GE PMHNP, AGNP, or ACNP education, 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% (0.5 FTEE) release time to participate in VANAP-GE activities; (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; and (4) commit to hire SON faculty for part-time NP practice within the VA facility based on the faculty member’s area of expertise/certification by the second year of VANAP-GE funding.

(5) Program Sustainability: This initiative is part of an ambitious plan to expand VA-nursing academic partnerships for PMHNP, AGNP, and ACNP education 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, including the PMHNP, AGNP, or ACNP residency, 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. There will be one program director for the VA facility and one program director for the SON. Each program director will receive central funding at the 0.5 FTEE level for five years. Program directors must be certified as psychiatric-mental health, adult-gerontological, or acute care NPs.

(b) Both program directors must be willing and able to develop and maintain collaborative partnerships with academic and clinical leaders and facilitate development and implementation of the identified education and practice innovations including development and implementation of the PMHNP, AGNP, or ACNP residency program. In addition, they will support faculty and NP preceptor development, participate in hiring and evaluating faculty, lead program evaluation activities, and complete an annual report of the accomplishments of the program. Program directors will also be expected to assume teaching responsibilities (including direct or indirect PMHNP, AGNP, or ACNP resident supervision).

(c) The VA nurse executive and SON dean will approve the program directors and ensure that they are freed from other responsibilities such that they have at least the minimum required time devoted to VANAP-GE activities.

(d) The SON dean will ensure that the VA program director receives a faculty appointment commensurate with qualifications and responsibilities.

(e) Program Directors will have at minimum a Master’s Degree in Psychiatric-Mental Health, Adult-Gerontological, or Acute Care Nursing Practice with a Doctorate preferred. Additionally, the Program Directors will also have nursing education expertise and proficiency collaborating with academic or clinical practice partners. For VA PDs with limited academic education experience, there must be a commitment from the SON to provide educational opportunities and mentoring for the VA program director to develop competencies in curriculum development and program evaluation.

(2) Faculty:

(a) The number of VANAP-GE faculty is dependent on the year of the program. Funding for the first year (AY 15-16) will include three FTEEs, exclusive of the program directors. Funding for one FTEE 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 five FTEEs (exclusive of the program directors) will be funded. Funding for up to two FTEEs will be available to the VA and funding for up to three FTEEs will be available to the SON. In the fifth year (AY 19-20) of the partnership, faculty funding levels will revert to that of the first year. The SON dean and the VA nurse executive cannot be funded through this initiative.

(b) VANAP-GE faculty will participate in a variety of educational activities at the
VA and the SON including didactic instruction, simulation exercises, clinical precepting, evidence-based practice learning experiences, and participation in the development and implementation of the PMHNP, AGNP, or ACNP residency. This includes development of curriculum, competency assessments for residents, and program evaluation. NP preceptors are considered as clinical faculty for NP students and residents. Therefore, faculty development activities for NP preceptors must be included in the educational activities developed by the partnership.

(c) Faculty will be certified as psychiatric-mental health, adult-gerontological, or acute care nurse practitioners, 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 from other responsibilities so that they have at least 0.5 FTEE devoted to VANAP-GE 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. Faculty development will include opportunities to enhance core competencies expected in the comprehensive faculty role. The SON’s professional development opportunities will be made fully available to VA faculty. Each VA faculty member will be assigned a SON mentor with a focus on individual needs assessment who will generate a plan to meet identified needs and provide consultation as issues arise and opportunities for scholarly collaboration.

(3) Student Enrollment and VA Training Cohort:

(a) Faculty funding is linked to required increases in student enrollment in the PMHNP, AGNP, or ACNP graduate program and residency.

(b) Central funding is contingent on the SON increasing its NP program enrollment by 6 students over the AY 2014-2015 baseline in the first and fifth years of the program and by 12 students in the intervening years (see table below). A minimum of 4 and a maximum of 6 PMHNP, AGNP, or ACNP residents will be appointed starting in the second AY year. Failure to reach these targets will result in proportionate reductions in funding.

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PMHNP, AGNP or ACNP 0 4-6 4-6 4-6 4-6
Residents

(c) Each annual cohort of VANAP-GE PMHNP, AGNP, or ACNP students is expected to receive all of their NP stipend funded clinical education in new or enhanced programs at the VA facility. Any rotation external to VA must be reviewed with OAA prior to implementation.

(d) VA facilities are encouraged to apply to OAA for NP clinical trainee positions that will provide stipends for NP students in the PMHNP, AGNP, or ACNP VANAP-GE program.

(e) For evaluation and reporting purposes, VANAP-GE PMHNP, AGNP, and ACNP students must be tracked as a discrete cohort for the duration of their nurse practitioner program and for five years following graduation.

(f) Nursing schools are encouraged to allow separating military service members to receive credit or course waivers for education received in military settings.

(4) Innovations in Nursing Education and Practice:

(a) Nursing education and clinical practice innovations are expected components of the partnership and will be implemented collaboratively.

(b) Development of a PMHNP, AGNP, or ACNP residency is required for this initiative. The SON and VA VANAP-GE faculty will lead residency curriculum development, assessment of competencies based on the residency curriculum, and participate in the development of proposed residency program accreditation standards. Standardized national AGNP and/or ACNP competency assessments, developed in collaboration with other OAA funded residency program, must be submitted to OAA within 6 months of receipt of VANAP GE funding.

(c) A plan and time line for development of the proposed PMHNP, AGNP, or ACNP curriculum must be included in the core narrative as part of the description of clinical and educational activities provided at the VA facility. A residency curriculum plan must include didactic and experiential learning components. The proposal must identify SON faculty with expertise in curriculum development who will be responsible for meeting this RFP requirement.

(d) A detailed residency curriculum plan with learning objectives, Veteran-centric content, didactic and experiential learning activities, and methods for attainment of learning objectives must be submitted to OAA within 10 months of receipt of VANAP GE funding.

(e) Additional innovations might include:

i. New settings for NP clinical experiences, especially settings that promote military cultural competence and evidence-based care.

ii. Enhancing Veteran-centric care education throughout the didactic curriculum, and by developing Veteran-centric experiential learning activities using standardized patients, case studies, and/or simulation.

iii. Interprofessional collaborative learning opportunities with students and residents from other professions within the defined area of practice (e.g., mental health, primary, or acute care).
iv. Practice initiatives aligned with VHA and facility objectives or identified facility needs including access to care, quality of care, patient safety, performance improvement or system redesign initiatives.

(5) Recruitment and Retention of VA Nurses: The national VANAP-GE NP programs are designed to enhance NP recruitment and retention with goal of increasing access to care for Veterans. VA facilities are required to:

(a) Develop and implement a recruitment and retention plan for VANAP-GE 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 PMHNP, AGNP, or ACNP graduate not hired by the participating facility.

(c) Consider adding NP positions within the VA facility to enable hiring of program graduates to facilitate the VA goal of increasing access to care.

(d) Consider VANAP-GE PMHNP or ACNP cohort students for participation in the VA Office of Academic Affiliation clinical trainee stipend support programs.

(e) Develop a continuum of recruitment and retention initiatives. Consider new NP graduates who participated in the PMHNP, AGNP, or ACNP VANAP-GE for OAA funded PMHNP, AGNP, or ACNP residency programs.

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. Development of PMHNP, AGNP, or ACNP clinical practice opportunities for SON faculty within the VA is an expectation of the VANAP-GE program.

(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-GE 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. Hiring SON NP faculty for part-time VA NP practice is required by the second year of the VANAP-GE program.

(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-GE 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-GE program objectives, the predetermined objectives of the specific partnership proposal, and to assure appropriate fiscal stewardship of federal resources.

e. Early Termination: Program directors are expected to communicate frequently and freely with local leadership about any issues that may impede partnership success.

(1) 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 VANAP-GE program 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, participation in the program will be terminated.

(2) Program directors will be expected to submit a resident competency assessment, curriculum, and program evaluations to OAA by the required deadlines. Programs that fail to comply with program requirements within the stipulated time frames will be subject to early termination.

f. Research: VANAP-GE 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-GE program will be implemented at both the local partnership level and the national level. The national program evaluation includes completion of online resident competency assessments at baseline 3, 6, and 12 months for each resident; resident completion of the OAA Learners’ Perceptions Survey; and other national program evaluation metrics as requested. Each partnership must also 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? How is military cultural competence taught and evaluated? What lessons were learned by faculty relative to concept and method of teaching and evaluation?

3. Identify use of simulation in the VANAP-GE program. Report the Veteran-centric simulations developed as well as the inclusion of complex co-morbidities common in the Veteran population.

4. What structural changes to the curriculum were tested? Examples might include embedding SON faculty in VA outpatient clinics, inpatient areas, or the creation of VA-based clinical education opportunities in non-traditional settings (e.g. telehealth, post-acute care follow up clinics, homeless/mental health outreach programs).

5. Has student performance on standardized tests, including tests of clinical skills, improved? Identify the baseline scores prior to VANAP-GE PMHNP program and all expected improvements.

**b. Clinical Practice**

1. Has the VANAP-GE program fostered improvements in clinical practice and patient care? How were clinical practices innovations identified and implemented? What has been the impact on existing clinical care practices? Examples might include Veteran-centric quality improvement or evidence-based practice projects, improvements in discharge planning, and reductions in hospital admissions or length of stay.

2. Were improvements in clinical practice and patient care associated with reductions in the cost of care?

3. Has the VANAP-GE program promoted interprofessional learning opportunities to
enhance communication and collaboration among healthcare disciplines? How has this impacted patient safety and quality of care?

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-GE as an important career development opportunity? Are faculty planning to seek additional professional development opportunities and advanced degrees?

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

(5) What are the students’ career plans? How many NP graduates have been recruited to the VA (locally and nationally) for PMHNP, AGNP, or ACNP residencies and/or PMHNP, AGNP, or ACNP positions? 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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<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 the VANAP-GE program; and meet all the requirements of the RFP including development and implementation of a PMHNP, AGNP, or ACNP Residency.</td>
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<td>-Letters of support demonstrate understanding of the purpose of VANAP-GE.</td>
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<td>-Letters of support include authorization to develop SON PMHNP, AGNP, or ACNP faculty clinical practice as care providers at the VA.</td>
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<td>-Letters of support from the DEO and Physician Residency Program Directors of the pertinent Medical leadership (Psychiatry for PMHNP program; Medicine and/or Critical Care for Adult and Critical Care NP programs; Geriatrics for Gerontology) outlining inclusion of NP residents in didactic and experiential learning activities with residents in their programs.</td>
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<td>-Letters of support include authorization as appropriate for faculty release time, space and commitment of resources to support sustainability.</td>
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-Demonstrates commitment and ability of the SON to increase enrollment by the required number of students in the psychiatric-mental health NP or acute care NP degree program and residency.

-Demonstrates commitment and ability of the SON to recruit a qualified program director and faculty.

-Demonstrates commitment and ability of the VA to recruit new graduate NPs into the residency program.

-Demonstrates commitment and ability of the VA to recruit a qualified program director and faculty.

-Demonstrate understanding of the intent of VANAP-GE partnership and residency program and delineates the structural and process elements that support a vibrant management and strategic vision.

-Demonstrate includes core elements of communication, conflict management, strategic planning and joint decision making with clear pathways identified to enable collaborative leadership and practice.

-Role of the Dean, Nurse Executive and Program Directors in program implementation and evaluation is described.

-Strength of the faculty practice program plan that includes identification of VA FTEE commitment and mechanism to be used which describes the FTEE allocated for faculty practice (e.g., MOU).

-Strength of the professional development plan for VANAP-GE VA faculty including NP preceptors.

-Strength of plan in meeting core educational competencies needs for faculty as well as enhancing professional scholarship and publications.

-Presence of a faculty needs assessment methodology and subsequent individualized plan for faculty to achieve identified competencies.

-Strength of the recruitment and retention plan for VANAP-GE graduates. This plan identifies alignment with current VA recruitment resources, includes methods to actively recruit Veterans, and includes a strategy to assure NP positions are held for VANAP-GE graduates and residents.

-Development of a plan that demonstrates recruiter outreach to other VA facilities and assures communication of available VA positions within the state and the nation is required.

-Strength of the plan for proposed innovations in nursing education and clinical practice. Innovations should consider curricular revisions specific to common Veteran health problems and military culture. Practice innovations should enable interprofessional interactions as well as evidence-based initiatives.

-A plan for development and implementation of the residency is present that includes a development of the residency curriculum, NP competency assessment, and participation in proposed accreditation standards development.

-Strength of the PMHNP, AGNP or ACNP residency curriculum outline included in the core narrative.

-Commitment to submit a full NP residency curriculum within the time frame specified in this RFP.

-Willingness to work collaboratively with other VANAP GE residency programs to modify VA PMHNP competency in partnership with OAA to assure standard competency for all NP programs.

-Strength of the collaboration with medicine, psychiatry, and other post-graduate health professional residency programs and the commitment to include NP residents in didactic and experiential learning opportunities offered by these programs.
- Strength of interprofessional education plan with emphasis on both curriculum and experiential interprofessional learning opportunities.
- Strength of the plan to work with post-graduate residency leaders from other disciplines for development of didactic and experiential interprofessional education activities.

- Strength of the local evaluation plan, its alignment with VANAP-GE graduate and post-graduate education (residency) core objectives, and a commitment to produce annual evaluation reports.
- A commitment to submit a national program evaluation each year.

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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 OAA (see instructions in Attachment 1)

April 10, 2015  Proposals due to OAA by 11:59PM Eastern Time (see instructions in Attachment 2)

May 8, 2015  Applicants notified of selection/non-selection

July 1, 2015  Program implementation and funding begins

October 15, 2016  First annual report due to the Office of Academic Affiliations

January 1, 2016  AGNP and/or ACNP Standardized Competency due to the Office of Academic Affiliations

May 1, 2016  PMHNP, AGNP, and/or ACNP Residency Curriculum 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 Program Manager 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

   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
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.
   
c. Submission: Documents will be submitted through http://vaww.oaa.med.va.gov/rfp_general/default.aspx?PID=33
      (1) You must initially register for access by clicking on the REGISTER link at the bottom of the page.
      (2) After registration, you will be able to login with your created password. After login you will be ready to begin your upload(s).
      (3) Documents required for upload are the transmittal letter, the table of contents, the abstract, the core narrative, the letters of support, and any supplemental material.
      (4) 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 with the SON to authorized implementation of a NP faculty
practice program (e.g., FTEE allocation for SON NP faculty to provide care for Veterans at the VA) in VA Psychiatric-Mental Health, Adult-Gerontology, or Acute Care,

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

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

(7) 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 been selected to give oral or poster presentations about VANAP-GE activities,

(8) An agreement to develop a robust recruitment and retention program for VANAP-GE PMHNP, AGNP, or ACNP graduates,

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

(10) An agreement to maintain the VANAP-GE 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 including a summary of the proposed NP residency curriculum, and

(6) A description of 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 including the proposed NP residency curriculum outline

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-GE faculty

(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-GE 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 0.5 FTEE (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

(e) VANAP-GE Student Cohort:
   i. PMHNP student expansion plan (numbers must justify VA support of SON faculty)
   ii. Selection method(s) for the VANAP-GE PMHNP, AGNP, or ACNP students
   iii. Level and number of students involved in new or enhanced educational opportunities at VA and SON on an annual basis

(f) VANAP-GE NP Resident Cohort:
   i. PMHNP, AGNP, or ACNP resident recruitment plan
   ii. Selection method(s) for VANAP-GE PMHNP, AGNP, or ACNP residents
   iii. Number of residents requested (4-6 residents starting in year two of funding)

(g) Local Evaluation Plan:
   i. Plan methodology to determine effective achievement of VANAP-GE program and residency 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 and the implementation of faculty practice program with SON.
(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 and implementation of faculty practice program with SON.

(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-GE students and faculty will be integrated into the specific clinical settings 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. Include specific commitment to faculty practice with SON.

(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, PMHNP, AGNP, or ACNP 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 graduate level PMHNP, AGNP, or ACNP program to meet the requirements of the RFP and that with the exception of services not provided in the VA, VANAP-GE NP students will receive all of their clinical education in a new or enhanced curriculum at the VA facility. 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 and faculty practice with VA.

(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-GE program and describe how the program will enhance health professional education at the VA facility and nationally.

(7) Physician (Medicine, Psychiatry, Gerontology, and/or Critical Care) Residency Program Directors: Provide your support for the VANAP GE program and describe how the program will enhance interprofessional health professional education at the VA facility. Include a statement of how NP residents will be integrated into didactic and experiential learning activities already provided for residents in your program, and your support for collaboration in the development of additional interprofessional learning opportunities.

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

(9) Supplemental materials as desired and within the 10 page limit.
g. **Funding Request**: Funding to support faculty positions in AY 15-16 will be submitted on a funding request spreadsheet to include:

1. **VA and SON Program Directors (0.5 FTEE each)**: Average annual salary and benefits for each program director
2. **VA Faculty (total 1 FTEE)**: Average annual salary and benefits per FTEE
3. **SON Faculty (total 2 FTEE)**: Average annual salary and benefits per FTEE
4. **PMHNP Trainee Allocations (Total of 6 OAA Funded NP Trainees)**: Average stipend and benefits