MANAGEMENT OF ADVANCED FELLOWSHIP PROGRAMS

1. SUMMARY OF MAJOR CHANGES: Major changes are as follows:

   a. Defines the majority of Advanced Fellowship Programs (AFPs) as non-accredited training programs (paragraph 2.d.).

   b. Expands the role for the Advanced Fellowship Coordinating Center (AFCC) Director (AFCCD) in recruitment of Advanced Fellows (AFs) (paragraph 2.e.).

   c. Establishes a requirement of 0.2 FTE paid full-time equivalent commitment for Department of Veterans Affairs (VA) medical facility AFP Directors (see paragraph 2.m.).

   d. Describes additional requirements regarding staffing, eligibility and AF salary and benefits payments (see paragraph 3).

   e. Adds a link to standard operating procedures for AFP operations (see paragraph 4).

   f. Establishes the requirement of an AFCC for all AFPs (paragraph 5).


3. POLICY OWNER: The Office of Academic Affiliations (14AA) is responsible for the content of this directive. Questions may be referred to the Director of Advanced Fellowships at: OAAAdvancedFellowships@va.gov.


5. RECERTIFICATION: This Veterans Health Administration (VHA) directive is scheduled for recertification on or before the last working day of November, 2028. This
VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

6. IMPLEMENTATION SCHEDULE: This directive is effective two years after publication.

BY DIRECTION OF THE OFFICE OF THE UNDER SECRETARY FOR HEALTH:

/s/ Carolyn M. Clancy, MD
Assistant Under Secretary for Health for Discovery, Education and Affiliate Networks

NOTE: All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.

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MANAGEMENT OF ADVANCED FELLOWSHIP PROGRAMS

1. POLICY

It is Veterans Health Administration (VHA) policy that the Office of Academic Affiliations (OAA) and Department of Veterans Affairs (VA) medical facilities manage Advanced Fellowship Programs (AFPs) to enhance both the quality of and access to care for Veterans within the VA health care system and to assist in providing an adequate supply of health care professionals who meet emerging VA needs.


2. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for ensuring overall VHA compliance with this directive.

b. **Assistant Under Secretary for Health for Discovery, Education and Affiliate Networks.** The Assistant Under Secretary for Health for Discovery, Education and Affiliate Networks is responsible for supporting OAA with implementation and oversight of this directive.

c. **Assistant Under Secretary for Health for Operations.** The Assistant Under Secretary for Health for Operations is responsible for:

   1. Communicating the contents of this directive to each of the Veterans Integrated Services Networks (VISNs).

   2. Assisting VISN Directors in resolving implementation and compliance challenges in all VA medical facilities within that VISN.

   3. Providing oversight of VISNs to ensure compliance with this directive.

d. **Chief Academic Affiliations Officer.** The Chief Academic Affiliations Officer (CAAO) is responsible for:

   1. Providing oversight for VISN and VA medical facility compliance with this directive and the management of all AFPs in VA through multiple mechanisms, and ensuring corrective action is taken when non-compliance is identified. **NOTE:** This includes but is not limited to conducting site visits and approving waivers to requirements of this directive, as specified by VHA Notice 2023-02, Waivers to VHA National Policy, dated March 29, 2023.

   2. Approving and signing all affiliation agreements for AFPs requiring disbursement agreements. **NOTE:** For more information, see VHA Directive 1400.05, Disbursement Agreements for Health Professions Trainees Appointed Under 38 U.S.C § 7406, dated June 2, 2021.
(3) Determining the appropriate size and occupational mix of the VA national AFP portfolio.

(4) Overseeing the financial administration of AFPs, including budgeting, funding and reconciliation processes.

(5) Ensuring that OAA-issued Requests for Proposals (RFPs) are sent to VISNs, Advanced Fellowship Coordinating Centers (AFCCs) (as appropriate) and VA medical facilities for specific health professions education (HPE) programming with sufficient time for them to review and for the VA medical facility Designated Education Officer (DEO) to submit a completed RFP back to OAA.

(6) Approving new AFPs or AFCCs.

(7) Reviewing each AFP’s annual report submitted by the AFCC Director (AFCCD).

(8) Approving requests from AFCCDs for extensions of Advanced Fellows (AF) training time.

(9) Halting the recruitment into any AFP for cause.

(10) Closing an AFP for cause, including termination of accreditable AFPs that do not achieve accreditation within 5 years of eligibility and transitioning programs that achieve accreditation to the appropriate section within OAA. **NOTE:** The majority of AFPs are non-accredited training programs. For additional information about AFP program operations, see paragraph 4.

(11) Closing an AFCC as appropriate, in consultation with the respective national program office.

(12) Approving educational detail requests from VA medical facilities.


(14) Approving any variation to the VA medical facility AFP Director (AFPD) minimum time spent on AFP administration (for minimum time requirements, see paragraph 2.m.).

(15) Designating clinically focused AFPs that are not subject to the 25% upper limit on VHA clinical activity time.

(16) Reviewing and approving nominees proposed by the VISN Director for the VISN Academic Officer.

e. **Advanced Fellowship Coordinating Center Director.** **NOTE:** For additional information about AFCCs, see paragraph 5. The AFCCD is responsible for:
(1) Establishing a memorandum of Understanding (MOU) with OAA that describes the responsibilities of the individual parties.

(2) Assisting VA medical facility AFPDs in applying for accreditation for their AFP, as appropriate. **NOTE:** The majority of AFPs are non-accredited training programs. For additional information about AFP program operations, see paragraph 4.

(3) Using RFP criteria to recruit AFs in collaboration with VA medical facility AFPDs. See accompanying standard operating procedures (SOPs) general guidance on AFCC operations, available at: https://dvagov.sharepoint.com/sites/vhaoahub/SitePages/OAA%20Policy%20Documents%20and%20Supplementary%20Materials.aspx. **NOTE:** This is an internal VA website that is not available to the public.

(4) Collaborating with OAA on selection of new sites in response to RFPs.

(5) Overseeing and communicating with all AFPs under their purview and administering national AFP operations.

(6) Designing and implementing AFP curriculum, in collaboration with AFPDs.

(7) Developing national SOPs on major AFP processes and procedures.

(8) Evaluating the AFP at minimum on an annual basis and collaborating with the DEO and AFPD to complete and submit the AFP’s annual report to the CAAO for review.

(9) Submitting AF training time extension requests received from the VA medical facility AFPD to the CAAO.

(10) Coordinating with the VA medical facility DEO and the VA medical facility AFPD in the management of AFPs.

(11) Communicating with VA medical facility AFPD and CAAO on any AF resignations.

f. **Veterans Integrated Services Network Director.** The VISN Director is responsible for:

(1) Ensuring that all VA medical facilities within the VISN comply with this directive and informing leadership when barriers to compliance are identified.

(2) Ensuring necessary funding and staffing are available to support AFPs.

(3) Obtaining concurrence from the CAAO in appointing the VISN Academic Officers.
g. Veterans Integrated Services Network Academic Officer. The VISN Academic Officer is the designated education leader at the VISN level and is responsible for:

(1) Assisting the VISN Director to ensure that the VISN’s educational needs and obligations are considered as they relate to AFPs.

(2) Assisting the VISN Director and DEOs in overseeing AFPs within the VISN, including implementation of this directive and sharing best practices.

(3) Serving as an advocate for AFP funding and staffing for VA medical facilities within the VISN.

(4) Collaborating with the VISN Integrity and Compliance Officer to oversee enterprise AFP risks, including but not limited to disbursement processes, AF supervision, needs and excess reporting and conflicts of interest.

(5) Ensuring the accuracy and timeliness of information and data submitted by VA medical facilities within the VISN to OAA.

h. Human Resources Officer. The Human Resources Officer is responsible for:

(1) Ensuring human resources requirements are met with respect to AF onboarding, including AFs having a valid appointment prior to training in VA.

(2) Signing the AF appointment letter.

(3) Ensuring that if AFs participate in New Employee Orientation, they only participate in those parts necessary for AF personnel actions (e.g., Oath of Office ceremony and explanation of AF benefits).

i. VA Medical Facility Director. The VA medical facility Director is responsible for:

(1) Ensuring overall VA medical facility compliance with this directive and appropriate corrective action is taken if non-compliance is identified.

(2) Allocating adequate funding and staffing for the AFP function at the VA medical facility per the OAA Staffing Guidelines and benchmarks.

(3) Communicating with the VA medical facility Chief of Staff (CoS) regarding resolution of AFP programmatic (e.g., accreditation, policy noncompliance) and individual AF (e.g., performance deficiencies) issues.

(4) Approving AFP participation in degree-conferring activities and attesting that such activities meet the criteria of 5 U.S.C. § 4107. NOTE: For procedures regarding approval of degree-conferring activities, see the SOP for this directive available at: https://dvagov.sharepoint.com/sites/vhaoahub/SitePages/OAA%20Policy%20Documents%20and%20Supplementary%20Materials.aspx. This is an internal VA website that is not available to the public.
(5) Approving the Trainee Qualifications and Credentials Verification Letter (TQCVL) to attest that each AF in the VA-sponsored AFP has the appropriate qualifications and credentials to participate in the VA-sponsored AFP. **NOTE:** For additional information, refer to the VHA OAA TQCVL Guide at: https://dvagov.sharepoint.com/sites/VHAOAA/public/Shared%20Documents/Forms/AllItems.aspx. This is an internal VA website not available to the public.

(6) Approving acceptance of gifts and donation to VA in general support of a VA medical facility’s HPE portfolio (as opposed to an individual HPE Program). **NOTE:** For more information, see VHA Directive 1400.03.

(7) Notifying the VISN Director and VISN Academic Officer of significant AFP programmatic issues, such as accreditation difficulties, areas of serious noncompliance with policy or loss of key staff, faculty or VA medical facilities.

j. **VA Medical Facility Chief of Staff.** The VA medical facility CoS is responsible for:

(1) Establishing, maintaining, evaluating and providing oversight of AFPs, directly and through the DEO.

(2) Establishing and implementing VA medical facility procedures to comply with this directive.

(3) Communicating with the DEO regarding resolution of AFP programmatic (e.g., accreditation, policy noncompliance) and individual AF (e.g., performance deficiencies) issues and escalating unresolved issues to the VA medical facility Director.

(4) Ensuring that health professions educators (e.g., supervising practitioners) and educational administrators (e.g., DEO and AFPD) have sufficient protected administrative time as outlined in paragraph 3.a.

(5) Managing conflicts of interest for AFP roles, such as the DEO, AFPDs and supervising practitioners; additional guidance is available at: https://dvagov.sharepoint.com/sites/VHAOAA/public/SitePages/Conflict-of-Interest.aspx. **NOTE:** This is an internal VA website not available to the public.

(6) Collaborating with the DEO to determine the appropriate size and occupational mix of the AFP program for the VA medical facility.

(7) Collaborating with the VA medical facility Associate Director for Patient Care Services (ADPCS) for oversight of AFPs under ADPCS purview.

k. **VA Medical Facility Associate Director for Patient Care Services.** The VA medical facility ADPCS is responsible for:

(1) Collaborating with the VA medical facility CoS and consulting with the DEO to oversee and optimize training programs under ADPCS purview.
(2) Collaborating with the VA medical facility DEO to ensure patient care services such as nursing and associated health services support the VA medical facility's educational mission.

I. VA Medical Facility Designated Education Officer. **NOTE:** At some VA medical facilities, this position is titled the VA medical facility Associate CoS for Education. The DEO is a senior VA medical facility leader who must have protected non-clinical time to perform the duties of the VA medical facility DEO. OAA approves the appointment of the DEO (see paragraph 2.d.13 above). See VHA Directive 1400.03 for further information on DEO qualifications. The VA medical facility DEO is responsible for:

(1) Overseeing and managing all AFs, AFPs and AFP affiliations at the VA medical facility.

(2) Managing the enterprise risks in the AFP domain including but not limited to AF supervision, disbursement and needs and excess reporting.

(3) Coordinating with the VA medical facility Director and the VA medical facility AFPD to resolve non-compliance with this directive when identified.

(4) Collaborating with the AFCCD on completion and submission of AF reports, including the AFP's annual report.

(5) Collaborating with the AFCCD on nomination activities.

(6) Overseeing AF appointment, onboarding, provisioning into VA computer systems including the Electronic Health Record (with remote access, if appropriate), tracking (including Educational Activity Records in the case of AFs under disbursement agreements) and offboarding.

(7) Collaborating with the VA medical facility Chief Fiscal Officer (CFO) to manage the financial administration of AFPs, including stipend and disbursement processes.

(8) Collaborating with the AFPD on resolving identified AFP programmatic (e.g., accreditation or policy noncompliance) and individual AF (e.g., performance deficiencies) issues and escalating unresolved issues and significant issues to the VA medical facility CoS.

(9) Notifying the VISN Academic Officer and OAA of any significant AFP programmatic issues, including accreditation difficulties, or loss of key staff, faculty or facilities.

(10) Notifying the VISN Academic Officer and OAA of any significant AF-related issues, including grievances and adverse actions against AF, including dismissal.

(11) Ensuring the VA medical facility AFPD develops procedures on AF performance management, adverse actions and grievances.
(12) In collaboration with the AFPD, overseeing AF disciplinary and other adverse actions.

(13) Obtaining VA medical facility Director approval for participation in degree-conferring activities.

(14) Coordinating with the AFCCD and VA medical facility AFPD in the management of AFPs.

(15) Submitting completed RFPs to the CAAO for review.

(16) Submitting educational detail requests to CAAO for approval.

m. **VA Medical Facility Chief Fiscal Officer.** The VA medical facility CFO is responsible for:

1. Collaborating with the VA medical facility DEO to ensure fiscal processes for AF programs are created, monitored and conducted for the accurate and timely payment of AF stipends and disbursement invoices.

2. Ensuring special purpose funding from OAA is received, properly assigned and utilized.

3. Ensuring and following appropriate processes for the estimation, reconciliation, certification and payment of disbursement invoices.

4. Monitoring AFP expenditures, at a minimum quarterly, and returning excess funds to OAA or requesting additional funds from OAA as necessary.

n. **VA Medical Facility Advanced Fellowship Program Director.** NOTE: The VA medical facility AFPD is a VA-paid, OAA-approved and appointed position responsible for coordinating and administering one of the AFPs. For small programs (programs with fewer than four fellows), the AFPD must have a minimum 0.2 full time equivalent (FTE) VA-paid appointment, with a minimum of 0.1 FTE protected time for AFP administration. For all other programs, the AFPD must have a minimum of 0.5 FTE VA-paid appointment, with a minimum of 0.2 FTE protected time for AFP administration and may utilize co-directors of the AFP to meet these minimum requirements. Co-directors of the AFP are not allowed to split the minimum protected time requirements in small programs. Any variance from these minimums must be approved by the CAAO. If the AFP goes to a disbursement model, a VA-paid Site Director (minimum 1/8th FTE protected time) must be appointed in lieu of an AFPD to oversee VA activities. The AFPD (or Site Director as applicable) is responsible for:

1. Managing the AFP in compliance with this directive and all 1400 series directives and taking appropriate corrective action if non-compliance is identified.

2. Applying for initial accreditation of the AFP, as appropriate, within 5 years of program initiation. NOTE: The majority of AFPs are non-accredited training programs.
For additional AFP program requirements, see the following SOP:
https://dvagov.sharepoint.com/sites/vhaoahub/SitePages/OAA%20Policy%20Documents%20and%20Supplementary%20Materials.aspx. This is an internal VA website that is not available to the public.

(3) Coordinating with the VA medical facility DEO and AFCCD in the management of the AFP.

(4) Collaborating with the AFCCD in the creation of national curriculum and implementation of local curriculum aligned to it.

(5) Arranging for AF schedules, didactics, curricular activities, educational details and required VHA clinical activity for clinical AFs and required healthcare improvement activities for non-clinical AFs.

(6) Ensuring that all AFs participate in an AF-specific orientation to VA policies and procedures.

(7) Ensuring that AFs meet their assigned responsibilities in the AFP.

(8) Creating appropriate program procedures and processes and distributing them to and reviewing them with AFs, to include performance management, remediation, adverse actions and grievances.

(9) Using RFP criteria to nominate, recruit and select AFs in collaboration with the AFCCD.

(10) Validating and attesting that each AF in the AFP has the appropriate qualifications and credentials through a signed Trainee Qualifications and Credentials Verification Letter (TQCVL).

(11) Ensuring all research and quality improvement activities conducted by AFs are centered on VA’s mission.

(12) Ensuring that all of the following are true prior to AFP participation in degree-conferring activities: AFP participation in degree-conferring activities has been approved by the VA medical facility Director, is part of OAA-approved curriculum and off-site participation requires no more than 20% of AF’s total time in fellowship.

(13) Assisting AFs with learning about VA grant and employment opportunities.

(14) Evaluating AFs, faculty and the AFP at a minimum annually, or more frequently per accreditation requirements.

(15) Ensuring AFs receive feedback on performance.

(16) Identifying and reporting AFP programmatic (e.g., accreditation or policy noncompliance) and individual AF (e.g., performance deficiencies) issues to the VA
medical facility DEO and the appropriate chief of section or service and attempt to resolve the issues.

(17) Submitting requests for extension of AF training time to the AFCCD.

(18) Submitting requests for educational details to the DEO.

(19) Notifying the AFCCD and CAAO of any AF resignations.

(20) Communicating regularly with AFs regarding any complaints or issues with the AFP.

o. **VA Medical Facility Advanced Fellow.** The VA medical facility AF is responsible for:

(1) Participating in all required onboarding, provisioning and orientation procedures (see paragraph 7 for training requirements).

(2) Adhering to AFP and VA-specific policies and procedures.

(3) Participating in required curricular activities of the AFP, such as educational activities and required VHA clinical and non-clinical activities.

(4) Communicating regularly with supervisors and the VA medical facility AFPD regarding any complaints or issues with the AFP.

(5) Ensuring that any research and quality improvement activities conducted by the AF are centered on VA’s mission.

(6) For VA-paid AFs, spending 100% of their duty time at VA unless on an authorized educational detail or specified as part of the OAA-approved curriculum.

(7) For clinical AFs, spending a minimum of 20% and no more than 25% of their time on VHA clinical activities unless in a clinically focused AFP as designated by CAAO, and the remainder on the AFP’s curricular activities.

(8) For non-clinical AFs, spending a minimum of 20% and no more than 25% of their time engaged in projects or activities relevant to healthcare improvement and the remainder of their time on the AFP’s curricular activities. **NOTE: Non-clinical AFs must not participate in clinical activities.**

### 3. ADDITIONAL REQUIREMENTS

a. Health professions educators (e.g., supervising practitioners) and educational administrators (e.g., DEO and AFPD) must have protected teaching and administrative time commensurate with their program size and responsibilities to ensure that the program complies with this policy and VHA Directive 1065(1), Productivity and Staffing Guidance for Specialty Provider Group Practice, dated December 22, 2020.
b. VA must ensure that all AFs matriculating into VA-sponsored programs have appropriate credentials and qualifications.

c. AF salary and benefits must be paid for using only OAA centralized special purpose funds; therefore, VA medical facilities must not pay for AFs out of general purpose funds.

d. Educational details must be a benefit to the care of Veterans and must be delineated in the program accreditation standards or an OAA-approved national curriculum. Educational details are subject to the 1/6 rule maximum time away from VA unless the Without Compensation (WOC) exchange program is utilized. **NOTE:** Rotations or experiences at other VA medical facilities are not considered educational details and do not fall under the 1/6 rule maximum.

   (1) For disbursement AFs, educational details are not considered VA rotations and these AFs are not considered VA employees. Educational details are solely a mechanism for VA to pay its proportionate share of the clinical experience. For these AFs, educational details must also be supervised by a federal employee as part of their federal duties (if Federal Tort Claims Act (FTCA) coverage is desired), proportionally shared with the affiliate and not available at the VA, the sponsoring institution or any other institution affiliated with the sponsor. Educational details for disbursement AFs are not eligible for the WOC exchange program.

   (2) For VA-paid AFs, educational details are considered VA rotations; as paid VA AFs, they are covered by the FTCA. Educational details for these AFs do not require supervision from a Federal employee. Educational details for VA-paid AFs are eligible for the WOC exchange program.

4. ADVANCED FELLOWSHIP PROGRAM OPERATIONS

For general guidance on AFP operations, see the accompanying SOP for this directive, available at: https://dvagov.sharepoint.com/sites/vhaoaahub/SitePages/OAA%20Policy%20Documents%20and%20Supplementary%20Materials.aspx. **NOTE:** This is an internal VA website that is not available to the public.

5. ADVANCED FELLOWSHIP COORDINATING CENTERS

a. AFCCs provide important subject matter expertise and standardization to AFPs which are unaccredited training programs; while national program offices provide crucial national perspectives and input into strategic direction of AFPs to meet the needs of Veterans.

b. All AFPs must have an AFCC. For AFPs without an AFCC, the corresponding national program office must submit a waiver request to OAA.

c. All AFCCs must have an MOU with OAA that describes the responsibilities of the individual parties.
d. AFCCs are responsible for the development and dissemination of national curriculum, provision of national instruction, administration of national AFP operations, implementation of program evaluation and meeting program reporting requirements. AFCCs serve as a liaison between AFPs and OAA.

e. AFCCs may be funded by program offices, participating field VA medical facilities or OAA. **NOTE:** See the following SOP for procedures regarding AFCC establishment, maintenance and termination: [https://dvagov.sharepoint.com/sites/vhaoaahub/SitePages/OAA%20Policy%20Documents%20and%20Supplementary%20Materials.aspx](https://dvagov.sharepoint.com/sites/vhaoaahub/SitePages/OAA%20Policy%20Documents%20and%20Supplementary%20Materials.aspx). This is an internal VA website that is not available to the public.

6. TRAINING

The following training is **required** for AFs:

a. VHA Mandatory Training for Trainees, Talent Management System (TMS) # VA 3185966, as part of initial onboarding.

b. VHA Mandatory Training for Trainees Refresher, TMS # VA 3192008, once a year thereafter.

7. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive must be managed per the National Archives and Records Administration (NARA) approved records schedules found in VA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Officer.

8. BACKGROUND

a. AFPs provide a pathway to employment for specifically trained professionals responsive to the health care needs of Veterans and the workforce needs of VA. AFPs are discretionary HPE programs; OAA approves the initiation, maintenance and termination of AFPs and funds the AFs in these programs.

b. In 2023, OAA and VHA Workforce and Management consulting standardized the organizational structure, position descriptions and the staffing of the HPE Office. The organizational structure, staffing benchmarks and other related information can be found on the OAA HPE Office Staffing SharePoint, available at: [https://dvagov.sharepoint.com/sites/vhaoaahub/SitePages/OAAStaffingGuidelines.aspx](https://dvagov.sharepoint.com/sites/vhaoaahub/SitePages/OAAStaffingGuidelines.aspx). **NOTE:** This is an internal VA website not available to the public.

9. DEFINITIONS

a. **Accreditation.** Accreditation is a status of public recognition granted to an educational institution or program that meets established standards and requirements.
b. **Advanced Fellow.** An AF is a physician, dentist, nurse, associated health professional or scientist approved for participation in AFPs. AFs are considered health professions trainees, even though they may have completed an accredited clinical training program, meet the qualification standards for the occupation and may have clinical privileges as a licensed independent practitioner. AFPs supply a pipeline of specifically trained professionals responsive to the health care needs of Veterans.

c. **Advanced Fellowship Program.** An AFP is an HPE program that provides either innovative clinical or research training, or high-priority VA health system competencies such as patient safety, quality improvement or educational leadership.

d. **Advanced Fellowship Coordinating Center.** An AFCC is an OAA-approved entity responsible for curriculum development and coordination across all AFPs.

e. **Adverse Action.** An adverse action is a formal administrative action taken to correct an AF’s on-the-job conduct or performance. An adverse action may result in disciplinary action up to and including dismissal based upon the seriousness of conduct or performance problems. VA has no jurisdiction over adverse actions taken by an academic affiliate. However, VA may choose to terminate an AF’s VA assignment or VA appointment based on the AF’s conduct or performance, or the affiliate’s dismissal of the AF from their AFP.

f. **Clinical Advanced Fellow.** A clinical AF is a physician, dentist, nurse or associated health professional approved for participation in AFPs. AFs who are in a clinical profession are clinical AFs, regardless of the focus of their AFP. For example, a dentist participating in a Health Services Research and Development fellowship is a clinical AF. Clinical AFs are required to spend no less than 20% and no more than 25% time in VHA clinical activity, unless they are in a clinically-focused AFP, as designated by the CAAO. **NOTE:** For AFs with a Registered Nurse clinical degree and a research-related doctorate degree, system improvement activities such as quality improvement, root cause analysis and peer review, as well as healthcare improvement projects described for non-clinical AFs below may satisfy the clinical activity requirement so long as they are focused on VA and are VA-based.

g. **Clinical Activity.** Clinical activity includes direct patient encounters and review of diagnostic studies, follow-up calls, family and caregiver counseling and support and consultation with colleagues regarding the care of a specific patient. As applicable, clinical activity also includes supervision of health professions trainee clinical care.

h. **Educational Activities.** Educational activities refer to all educational training activities in which AFs participate under appropriate supervision to meet educational goals or academic curriculum requirements. Educational activities include clinical training, scholarly projects (research and non-research), clinical simulations, attendance at relevant committee meetings (e.g., quality improvement or pharmacy committees), approved educational details, approved academic coursework and didactics. **NOTE:** AFs may conduct research scholarly activity as part of their HPE program at a VA medical facility. An HPT may not serve as a principal investigator but may serve as a
co- or sub-investigator. The research must be supervised by a VA investigator and approved by the VA Research and Development Committee. HPTs may conduct non-research scholarly activity such as quality improvement or quality assurance as part of their HPE program at a VA medical facility. The activity must be overseen by a VA supervisor and approved in accordance with the local VA medical facility practices.

i. **Educational Detail.** An educational detail is a VA-authorized and paid clinical training experience at an alternative approved site (e.g., another Federal site or another U.S. institution). There are different requirements for educational details for VA-paid AFs and for disbursement-paid AFs.

j. **Licensure.** Licensure is a legal right that is granted by a government agency in compliance with a statutory or regulatory authority governing an occupation, as evidenced by a license, registration or certification issued by a State, territory, commonwealth or the District of Columbia.

k. **Licensed Independent Practitioner.** A licensed independent practitioner (LIP) is an individual permitted by law, license and the VA medical facility through its medical staff bylaws to provide patient care services independently, without supervision or direction, in accordance with privileges granted by the VA medical facility. **NOTE:** Per VHA Directive 1100.20, Credentialing of Health Care Providers, dated September 15, 2021, LIPs are required to be recredentialed every 2 years. Clinical Pharmacy Specialists, Physician Assistants and Certified Registered Nurse Anesthetists (who are not privileged) are required to be credentialed and recredentialed in the same manner as LIPs even though they are not LIPs.

l. **Needs and Excess Report.** The Needs and Excess Report is a mechanism for reconciliation of OAA’s AFP funds. This quarterly report delineates the VA medical facility’s need for additional, or its return of excess, HPE funds.

m. **Non-Clinical Advanced Fellow.** A non-clinical AF is either a scientist who is not a health professional or a health professional who does not meet the qualification standards for their profession and is enrolled in an AFP. Non-clinical AFs are required to spend no less than 20% and no more than 25% time engaged in projects or activities relevant to VA healthcare improvement. Such projects are selected by AFPDs in consultation with AFCCs as needed. Required Healthcare Improvement projects must meet the following guidelines: embed the AF within the VA medical facility’s system improvement or VA operational activities, expose fellows to key VA operational leadership and provide value to the VA medical facility’s clinical operations.

n. **Trainee Qualifications and Credentials Verification Letter.** A TQCVL is a letter required for all AFs having training experiences at VA (either affiliate- or VA-sponsored programs) and attests that each AF has appropriate qualifications and credentials.

o. **VA Nonprofit Research and Education Corporations.** VA nonprofit research and education corporations (NPCs) are separate state-authorized corporate entities that exist to facilitate VA research and education. Policy for NPCs is found in VHA
10. REFERENCES


h. VHA Notice 2023-02, Waivers to VHA National Policy, dated March 29, 2023.

i. VHA Directive 1400.07 SOP.
https://dvagov.sharepoint.com/sites/vhaoahub/SitePages/OAA%20Policy%20Documents%20and%20Supplementary%20Materials.aspx. **NOTE:** This is an internal VA website that is not available to the public.

j. VHA OAA TQCVL Guide at:
https://dvagov.sharepoint.com/sites/VHAOAA/public/Shared%20Documents/Forms/AllItems.aspx. **NOTE:** This is an internal VA website not available to the public.

k. OAA Conflicts of Interest.
https://dvagov.sharepoint.com/sites/VHAOAA/public/SitePages/Conflict-of-Interest.aspx. **NOTE:** This is an internal VA website not available to the public.

l. OAA HPE Office Staffing SharePoint.
https://dvagov.sharepoint.com/sites/vhaoahub/SitePages/OAAStaffingGuidelines.aspx. **NOTE:** This is an internal VA website not available to the public.