

## EDUCATIONAL RELATIONSHIPS

**1. REASON FOR ISSUE:** This Veterans Health Administration (VHA) directive provides standards for the establishment, maintenance and improvement of medical, dental, nursing and associated health educational programs in Department of Veterans Affairs (VA) medical facilities. **NOTE:** *This directive only applies to educational programs for Health Professions Trainees. It does not apply to educational programs for staff personnel.*

**2. SUMMARY OF MAJOR CHANGES:** This directive:

a. Revises the definitions of accreditation, disbursement agreement, sponsoring institution; adds definitions for academic affiliate, Health Professions Trainee, sponsoring institution Program Director and educational Program Letter of Agreement; and removes the definitions for Associate Chief of Staff for Education, accrediting agency, affiliation, affiliation agreement and Designated Education Officer (DEO) (see paragraph 3).

b. Revises responsibilities of the Chief Officer, Office of Academic Affiliations; VA medical facility Director; VA medical facility Chief of Staff; Associate Chief of Staff for Education/DEO; and VA Site Director and adds roles and responsibilities for the Under Secretary for Health; Assistant Under Secretary for Health for Discovery, Education and Affiliate Networks; Assistant Under Secretary for Health for Operations; Associate Director for Patient Care Services; and the Sponsoring Institution Program Director.

c. Revises the following paragraphs: Affiliation Agreements (paragraph 6) and Establishing Academic Educational Relationships (paragraph 7).

d. Revises language in paragraph 9 describing the Affiliation Partnership Council workgroups to comply with the Federal Advisory Committee Act (5 U.S.C. App. 2), the new VHA oversight structure and the United States Government Accountability Office Report, VA RESEARCH: Opportunities Exist to Strengthen Partnerships and Guide Decision-Making with Nonprofits and Academic Affiliates (GAO-20-570).

e. Relocates information regarding maintenance of educational relationships to new Appendix A.

f. Relocates information regarding academic calendar reports and forms to new Appendix B.

**3. RELATED ISSUES:** VHA Directive 1400, Office of Academic Affiliations, dated November 9, 2018; VHA Directive 1400.01, Supervision of Physician, Dental, Optometry, Chiropractic, and Podiatry Residents, dated November 7, 2019, dated November 7, 2019; VHA Directive 1400.05, Disbursement Agreements for Health

Professions Trainees Appointed Under 38 U.S.C. 7406, dated June 2, 2021; VHA Handbook 1400.04, Supervision of Associated Health Trainees, dated March 19, 2015; VHA Handbook 1400.07, Education of Advanced Fellows, dated February 26, 2016; VHA Handbook 1400.08, Education of Associated Health Professions, dated February 26, 2016; VHA Directive 1400.09(1), Education of Physicians and Dentists, dated September 9, 2016; VHA Directive 1400.10, Health Care Resources Contracting: Educational Cost Contracts, dated May 20, 2020; VHA Handbook 1400.11, Extended Educational Leave, dated April 1, 2016.

**4. RESPONSIBLE OFFICE:** The Office of Academic Affiliations (OAA) (14AA) is responsible for the content of this directive. Questions may be referred to 202-461-9490 or the OAA Action Group at [VHA14AAOAAAction@va.gov](mailto:VHA14AAOAAAction@va.gov).

**5. RECISSIONS:** VHA Handbook 1400.03, Veterans Health Administration Educational Relationships, dated February 16, 2016, is rescinded.

**6. RECERTIFICATION:** This VHA directive is scheduled for recertification on or before the last working day of February 2027. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

**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.

**DISTRIBUTION:** Emailed to the VHA Publications Distribution List on March 1, 2022.

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## EDUCATIONAL RELATIONSHIPS

### 1. PURPOSE

This Veterans Health Administration (VHA) directive provides standards for the establishment, maintenance and improvement of medical, dental, nursing and associated health educational programs within Department of Veterans Affairs (VA) medical facilities and the educational relationships required to maintain them. These programs may be undergraduate, graduate and post-graduate curricula in medicine, dentistry, nursing and associated health disciplines. This directive also pertains to VA medical facilities responsible for Health Professions Trainees (HPTs) in VA-sponsored educational programs. **AUTHORITY:** 38 U.S.C. §§ 7301(b), 7302.

### 2. BACKGROUND

a. As one of its four statutory missions, VA conducts education and training programs for HPTs to enhance the quality of care provided for Veterans. In partnership with academic affiliates, VA serves as the Nation's largest provider of advanced clinical training in medical, nursing and associated health professions. VA's academic partnerships provide a unique opportunity for HPTs to train and learn in a varied and intellectually stimulating clinical environment. These partnerships serve a mutual benefit for VA and the academic affiliates while both fostering excellence in health professions education (HPE) and providing health care services for Veterans. VHA oversees and manages HPE occurring in VA medical facilities. The support for HPE programs at VA medical facilities is based on the premise that the best health care is provided in an environment in which a spirit of inquiry and investigation exists in combination with teaching and learning. VHA strongly promotes a policy of cooperation and professional engagement with educational institutions to ensure both VA medical facilities and their academic affiliates meet their goals of high-quality patient care and education.

b. Academic partnerships are designed to provide clinical training opportunities for HPTs. Since their inception, these valuable partnerships continue to improve health care for Veterans, enhance the nationwide supply of health professionals, assist in recruitment and retention of staff at VA medical facilities and create clinical learning environments enhanced by clinical research and scholarship. Accordingly, it is to the advantage of Veterans, VA and the Nation, for VA to obtain and foster multiple and diverse affiliate partnerships at each VA medical facility to achieve this goal.

c. The affiliation between VA medical facilities and the academic institution is at its essence an educational relationship but may also include other relationship components such as research, the sharing of health care resources including staffing as authorized under 38 U.S.C. § 8153, and the delivery of care to Veterans in the community.

### 3. DEFINITIONS

a. **Academic Affiliate.** An academic affiliate is an educational institution that has a relationship for the purpose of education with a VA medical facility; this relationship is documented by a formal educational affiliation agreement in conformance with VA requirements. An academic affiliate can receive VA HPTs (for VA-sponsored programs) or can send HPTs to VA (for affiliate-sponsored programs). The program sponsor, whether VA or the academic affiliate, has responsibility for adhering to and implementing the accreditation requirements of the program. The term “sponsoring institution” is the preferred term defined by the Accreditation Council for Graduate Medical Education (ACGME) and used mainly to designate the institutional program sponsor of Graduate Medical Education (GME) programs. VA medical facilities and the affiliated training programs have a shared responsibility for the educational enterprise. An affiliation may only exist through an executed affiliation agreement between the academic affiliate and the VA medical facility. Other activities such as research and clinical care may also be shared, but these relationships are governed by other agreements. Standard templates for affiliation agreements, approved by VA Office of General Counsel (OGC), must be used and may be found at <https://dvagov.sharepoint.com/sites/VHAOAA/public/SitePages/Affiliation-Agreements.aspx>. **NOTE:** *This is an internal VA website that is not available to the public.*

b. **Academic Institution.** For purposes of this directive, an academic (educational) institution is an organization with the primary purpose of providing educational programs for HPTs and issuing degrees, certificates or diplomas (e.g., college, university, medical school, dental school, nursing school and residency programs).

c. **Accreditation.** Accreditation is a status of public recognition that an accrediting agency grants to an educational institution or program that meets the agency’s established standards and requirements. An accrediting agency is an external educational association of regional or national scope that assesses educational programs according to the agency’s specific standards and criteria. **NOTE:** *Each HPT program is accredited by an accrediting agency unless the requirement is waived by the Office of Academic Affiliations (OAA).*

d. **Affiliation Partnership Council.** An Affiliation Partnership Council (APC) is an advisory body formed by the VA medical facility and its academic affiliates to assist in the management and coordination of the relationships between a VA medical facility and its academic affiliates. APCs fall under the governance of the National Academic Affiliations Council (NAAC) and are defined as workgroups under the NAAC Affiliation Partnership Subcommittee. These workgroups have defined operating requirements under the Federal Advisory Committee Act (FACA) (5 U.S.C. App. 2). **NOTE:** *For additional information about FACA, see <https://www.gsa.gov/cdnstatic/FACA-Statute-2013.pdf>.*

e. **Designated Institutional Official for Graduate Medical Education.** The Designated Institutional Official (DIO) is an individual employed by the academic affiliate

sponsoring the residency program (also known as the sponsoring institution) who has the institutional authority for the oversight and administration of training in discipline-specific programs. The ACGME requires that each institution sponsoring ACGME-accredited programs have an individual appointed as the DIO. **NOTE:** *A VA medical facility that sponsors ACGME-accredited programs independently must have a DIO, although the responsibilities and functions overlap with those described for the Designated Education Officer (DEO) (see paragraph 5.i.) and may be represented by the same individual.*

f. **Disbursement Agreement.** A disbursement agreement is a payroll mechanism, and not a contract, through which VA allows a “disbursing agent” other than VA to administer salary and fringe benefit payments as an agent on behalf of VA for HPTs performing educational activities while assigned to a VA medical facility. The disbursement agreement mechanism allows VA to reimburse the HPT’s employer for their incurred costs; HPTs are appointed as “without compensation” during their VA rotations. VA reimburses the disbursing agent for the proportionate share of HPT salaries and benefits in accordance with their time performing VA activities.

g. **Educational Programs.** An educational program is a program that provides formal education and training in a health care profession or occupation. It includes accreditation where applicable, a standard curriculum, qualified instructors and supervisors, a system to provide supervision of HPTs, a process for monitoring HPT competency development, and a process to provide feedback to HPTs. It may be clinical or non-clinical and includes medical and dental programs, associated health education programs, nursing programs, and non-clinical programs in some health-related disciplines (i.e., biomedical engineering, health information technology). Educational programs may be sponsored by an affiliate or by a VA medical facility.

h. **Educational Program Letter of Agreement.** An educational Program Letter of Agreement (PLA) is a document executed between VA and a specific educational program after an affiliation agreement has been executed. **NOTE:** *See paragraph 6.c. for characteristics and requirements of PLAs.*

i. **Health Professions Trainee.** An HPT is an individual appointed under 38 U.S.C. §§ 7405 or 7406 who is participating in clinical or research training under supervision to satisfy program or degree requirements. HPT is a general term to describe undergraduate, graduate and post-graduate students, interns, residents, chief residents, fellows, VA advanced fellows and pre- and post-doctoral fellows who spend all or part of their training experiences at VA medical facilities. Some HPTs may be in non-clinical training fields but train in patient areas or use VA patient records or data in their training.

j. **Sponsoring Institution.** A sponsoring institution is an entity (VA or academic affiliate) that assumes the ultimate financial and academic responsibility for a program of health care education consistent with accrediting body requirements. A sponsoring institution is the entity in whose name education programs are accredited. This term is primarily used for GME programs. **NOTE:** *Unless VA is the sponsoring institution, the sponsoring institution and VA must have an affiliation agreement to permit clinical*

training at VA.

k. **Sponsoring Institution Program Director.** The Sponsoring Institution Program Director is an individual based at the sponsoring institution who oversees all facets of a specific education and training program across all affiliated sites, including VA. This individual also ensures that the program complies with standards and policies of the respective accrediting and certifying bodies, and oversees program operations and logistics, educational objectives and curriculum development, evaluation methodologies and mechanics and relationships with accrediting agencies and certifying bodies.

**NOTE:** *In most cases, the Program Director is a non-VA employee, paid by the academic affiliate and based at the academic affiliate; in cases where the VA is the sponsoring institution, the Program Director is employed and paid by VA, and based at the VA medical facility.*

#### 4. POLICY

It is VHA policy that VA medical facilities establish, maintain and strengthen relationships with educational institutions consistent with the statutory mission in 38 U.S.C. § 7302 in order to educate and train health professionals to enhance the quality of VA health care provided to Veterans.

#### 5. 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 to resolve implementation and compliance challenges in all VA medical facilities within that VISN.

(3) Providing oversight of VISNs to ensure compliance with this directive and its effectiveness.

d. **Chief Officer, Office of Academic Affiliations.** The Chief Officer, OAA is responsible for:

(1) Providing national oversight of HPTs, training programs and academic affiliations, and the standards, policies and guidance for conducting such relationships.

(2) Signing all affiliation agreements for undergraduate medical education and GME, as well as any affiliations requiring disbursement agreements. **NOTE:** For further information regarding affiliation agreements, see paragraph 6.

(3) Forwarding any changes to the legal text of an affiliation agreement, received from the DEO, to the national OGC point of contact. **NOTE:** For further information regarding affiliation agreements see paragraph 6.

(4) Reviewing and approving nominees proposed by the VA medical facility Director for the VA medical facility DEO role.

(5) Ensuring compliance with this directive through appropriate monitoring activities.

(6) Delegating responsibility for approving policy and procedures waiver requests.

(7) Ensuring that requests to VA medical facilities for report completions, or responses to Requests for Proposals are sent out in a timely manner with sufficient time for completion and ensuring that allocation decisions by OAA are made in a timely manner as outlined in Appendix B.

e. **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) Overseeing the training programs of the VA medical facilities within the VISN, including educational planning and decision-making, and making necessary educational resources available to the respective VA medical facilities.

(3) Signing certain affiliation agreements for VA medical facilities within the VISN as the required VHA signatory for such agreements. **NOTE:** For nursing and associated health education affiliation agreements, this function can be delegated to VA medical facility Directors.

(4) Signing all affiliation agreements for undergraduate medical education and GME, and any affiliation agreements requiring disbursement agreements and forwarding to OAA for signature by the Chief Officer, OAA.

f. **Veterans Integrated Services Network Academic Affiliations Officer.** The VISN Academic Affiliations Officer is responsible for:

(1) Assisting the VISN Director in ensuring that educational needs and obligations are considered.

(2) Providing guidance for VISN educational relationships.

(3) Assisting individual VA medical facilities in negotiating specific affiliation



agreements.

(4) Fostering beneficial relationships with individual VA medical facilities and their affiliated academic institutions.

(5) Helping VISNs to accomplish and comply with VHA-wide education policies. **NOTE:** For more information see VHA Directive 1400, Office of Academic Affiliations, dated November 9, 2018; VHA Directive 1400.01, Supervision of Physician, Dental, Optometry, Chiropractic, and Podiatry Residents, dated November 7, 2019; VHA Directive 1400.05, Disbursement Agreements for Health Professions Trainees Appointed Under 38 U.S.C. 7406, dated June 2, 2021; VHA Handbook 1400.04, Supervision of Associated Health Trainees, dated March 19, 2015; VHA Handbook 1400.07, Education of Advanced Fellows, dated February 26, 2016; VHA Handbook 1400.08, Education of Associated Health Professions, dated February 26, 2016; VHA Directive 1400.09(1), Education of Physicians and Dentists, dated September 9, 2016; VHA Directive 1400.10, Health Care Resources Contracting: Educational Cost Contracts, dated May 20, 2020; and VHA Handbook 1400.11, Extended Educational Leave, dated April 1, 2016.

(6) Overseeing results of disbursement process reviews, in collaboration with the VISN Integrity and Compliance Officer.

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

(1) Establishing local procedures to fulfill the requirements of this directive and the applicable accrediting and certifying body requirements.

(2) Providing oversight to ensure the VA medical facility maintains compliance with this directive.

(3) Obtaining concurrence from the Chief Officer, OAA and appointing the VA medical facility DEO.

(4) Signing affiliation agreements for nursing and associated health disciplines; signing undergraduate medical education and GME agreements and any agreements associated with disbursement agreements and forwarding to the VISN Director, and ultimately to the Chief Officer, OAA.

(5) Acting as a member of the APC and attending meetings as a representative of the VA medical facility leadership to discuss VA medical facility educational issues.

(6) Ensuring completion of allocation process reports by the DEO. **NOTE:** See Appendix B for additional information regarding allocation process reports.

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

(1) Establishing, maintaining, evaluating and providing oversight, directly and

through the DEO, for the quality of the health professions training programs at the VA medical facility and the quality of care provided by supervising practitioners and HPTs.

**NOTE:** *The VA medical facility CoS supervises the VA medical facility DEO and in instances where a DEO may not be available, may also serve as the DEO.*

(2) Collaborating with the VA medical facility Associate Director for Patient Care Services (ADPCS) for oversight of clinical training programs under VA medical facility ADPCS responsibility.

(3) Inviting VA attendees to APC meetings.

i. **VA Medical Facility Associate Chief of Staff for Education or the Designated Education Officer.** The DEO, also frequently known as the Associate Chief of Staff for Education, is a senior VA medical facility leader who must have protected non-clinical time to perform the duties of the DEO role. The amount of protected time is proportional to the number of HPTs that the office oversees. The DEO must have a doctoral degree in a health profession. If there are more than 20 GME positions at the VA medical facility, OAA recommends that the DEO position be filled by a physician. Non-physician doctoral-prepared candidates (e.g., dentist, optometrist, podiatrist) may be submitted to the Chief Officer, OAA for approval if sufficient GME expertise and experience is documented. The DEO position requires experience with graduate and undergraduate training programs. **NOTE:** *A national search is recommended to fill a DEO vacancy if no qualified local candidate is available. The nominee must receive approval from the Chief Officer, OAA. The nomination package must include the nominee's credentials, curriculum vitae and letter of recommendation from the VA medical facility Director. Documentation of experience with administration of GME and other HPT programs must be included in the nomination package.* The VA medical facility DEO is responsible for:

(1) Overseeing and managing all HPTs, training programs and affiliations at the VA medical facility.

(2) Promoting a variety of affiliate relationships across multiple professions and within the same profession. Promoting and ensuring equity in the VA medical facility's relationship with all educational affiliates. For further information regarding the development of new academic affiliations see paragraph 7.

(3) Verifying that affiliation agreements use only approved and unaltered OGC and OAA templates before the required VA signatures are applied. Any changes to the text of the affiliation agreement template must be submitted to the Chief Officer, OAA. Changes to the legal text of these agreements must be forwarded by the Chief Officer, OAA to the national OGC point of contact. **NOTE:** *For further information regarding affiliation agreements see paragraph 6.*

(4) For affiliate sponsored programs, coordinating with the affiliate DIO, sponsoring institution (academic affiliate) Program Directors and VA Site Directors to ensure that program accreditation requirements are met and that all VHA educational policies and procedures are followed (see Note in paragraph 5.f.(5)).

(5) For VA-sponsored programs, coordinating with the VA medical facility Sponsoring Institution Program Director and applicable VA service chief to ensure that program accreditation requirements are met and that all VHA educational policies and procedures are followed (see Note in paragraph 5.f.(5)).

(6) Reviewing the status of a training program periodically to ensure criteria for maintenance of an affiliation are met. **NOTE:** *For further information regarding the maintenance of educational relationships and criteria, see Appendix A. These criteria are only a guide; other criteria for maintaining educational relationships may also be used.*

(7) Collaborating with the VA medical facility ADPCS and other associated health leadership to ensure patient care services such as nursing and other associated health services support the VA medical facility's educational mission and HPTs, and that training programs of all disciplines are supported.

(8) Coordinating, overseeing and attending all APC meetings; ensuring all APC meetings meet the requirements of FACA for workgroups. **NOTE:** *See paragraph 9 for more information regarding APC.*

(9) Recommending a Responsible Federal Official (RFO) for APC to the VA medical facility Director.

(10) Completing all OAA required reports, such as requested allocations, match reports and financial reports. **NOTE:** *See Appendix B for more information regarding OAA required reports.*

j. **Responsible Federal Official.** The RFO is a VA employee appointed by the VA medical facility Director. The VA medical facility DEO, Administrative Officer or any VA employee deemed appropriate may act as the RFO. The RFO is responsible for managing all APC meetings, taking attendance, creating summary notes and meeting all reporting requirements as stated in paragraph 9. **NOTE:** *This position is usually performed as a collateral duty.*

k. **VA Medical Facility Associate Director for Patient Care Services.** The VA medical facility ADPCS is a member of the APC as required by 38 U.S.C. § 7313. 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 VA medical facility ADPCS responsibility.

(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.

l. **Sponsoring Institution Program Director.** **NOTE:** *In most cases, the Program Director is a non-VA employee, paid by the academic affiliate and based at the academic affiliate; in cases where the VA is the sponsoring institution, the*

*Program Director is employed and paid by VA, and based at the VA medical facility. In rare cases, the academic affiliate owns the program and contracts with VA to employ the Program Director. In Psychology, the Program Director is often called the Training Director. The Sponsoring Institution Program Director who is employed by VA is responsible for:*

- (1) Overseeing all facets of a specific education and training program across all affiliated sites.
- (2) Ensuring that the program complies with standards and policies of the respective accrediting and certifying bodies.
- (3) Overseeing program operations and logistics, educational objectives and curriculum development, evaluation methodologies and mechanics and relationships with accrediting agencies and certifying bodies.
- (4) Collaborating with the VA medical facility DEO and the Site Directors to ensure that all VA educational policies and procedures are followed (see Note in paragraph 5.f.(5)).
- (5) For VA sponsored programs, coordinating with the VA medical facility DEO and applicable VA service chief to ensure that program accreditation requirements are met and that all VHA educational policies and procedures are followed (see Note in paragraph 5.f.(5)).
- (6) Tracking HPT attendance and managing HPT schedules at the VA medical facility, if not prohibited by Conflict-of-Interest Standards and after consultation with the OGC Ethics Specialty Team. **NOTE:** For additional information see VHA Directive 1400.05.

m. **VA Site Director.** The VA Site Director oversees and manages the part of an affiliate's training program that takes place at a VA medical facility. The VA Site Director is a VA medical facility clinician who is in the same profession and specialty as the program for which they are a site director and is responsible for:

- (1) Ensuring curricular and accreditation requirements are met and monitoring HPTs and their supervisors for compliance with VA and accrediting body policies and requirements.
- (2) Coordinating with the VA medical facility DEO and Sponsoring Institution Program Director as appropriate to ensure that program accreditation requirements are met and that all VA policies and procedures are followed.
- (3) If not prohibited by conflict-of-interest standards and after consultation with the OGC Ethics Specialty Team, tracking HPT attendance and managing HPT schedules at the VA medical facility. **NOTE:** For additional information see VHA Directive 1400.05.
- (4) Serving as a clinical supervisor or preceptor for HPTs for a portion of the time.

**NOTE:** For additional information see VHA Directive 1400.05.

(5) Attending APC meetings, as appropriate.

n. **VA Medical Facility Supervising Practitioner.** The VA medical facility supervising practitioner (preceptor) is responsible for:

(1) Supervising HPTs. **NOTE:** *The supervising practitioner, with certain exceptions, must be of the same discipline, profession and specialty as the HPT.*

(2) Taking responsibility for the care of the patient, both longitudinally and for each patient encounter.

(3) Using formal or informal didactics to convey information to HPTs.

(4) Providing both formative and summative evaluations of HPTs to the Sponsoring Institution Program Director as required by program and accreditation standards.

o. **Health Professions Trainee.** HPTs are responsible for:

(1) Participating in all required onboarding and orientation procedures to familiarize themselves with relevant VA regulations and policy.

(2) Completing the required Talent Management System (TMS) Mandatory Training for Trainees (MTT) course and the annual refresher in subsequent years and complying with all policies described therein. **NOTE:** *For additional information see VHA Directive 1052, Appropriate and Effective Use of VHA Employee Mandatory and Required Training, dated June 29, 2018.*

(3) Adhering to professional and program specific standards for each occupation as well as VA regulations and applicable laws during VA educational rotations.

(4) Periodically evaluating their VA medical facility supervising practitioners and the portion of their training program within VA, through the annual Trainee Satisfaction Survey (TSS) and other mechanisms.

## 6. AFFILIATION AGREEMENTS

a. **General.** An affiliation agreement must be in place before HPTs in affiliate-sponsored educational programs receive clinical training at VA medical facilities and before HPTs in VA-sponsored educational programs receive training at non-VA medical facilities. An affiliation agreement is the required first step of any affiliation relationship between VA and the affiliated educational institution or program; it delineates the roles and responsibilities of the educational relationship. Affiliated institutions may be academic institutions or other types of institutions where health care is provided, such as community hospitals, clinics, State agencies, military treatment facilities or Federally Qualified Health Care Centers. Occasionally, affiliates are not health care institutions due to the requirement of the program for non-health care related curricular objectives.

b. **Legality.** An affiliation agreement must conform to the language of one of the approved affiliation agreement templates. The appropriate form to be used is dictated by the types of HPTs and accrediting body and whether HPTs are being sent to VA or being sent from VA. Affiliation agreement templates are maintained on the OAA website at <https://dvagov.sharepoint.com/sites/VHAOAA/public/SitePages/Affiliation-Agreements.aspx>. **NOTE:** *This is an internal VA website that is not available to the public.* Affiliation agreements must be used without amendment; OGC Personnel Law Group and OAA must approve any wording changes in the text of these agreements. Requests for changes to the text of the authorized affiliation agreement must be submitted to OAA. If there are changes to the legal terms of agreement, OAA will forward the affiliation agreement to the national OGC point of contact. Appropriate VA and affiliated institution officials must sign each affiliation agreement. All affiliation agreements for undergraduate and graduate medical relationships, and all relationships utilizing disbursement agreements must be signed at the VA medical facility, VISN and OAA levels. Affiliation agreements are valid for up to 10 years. No amendments, changes or appendices are permitted to be added to an affiliation agreement, nor may other affiliate agreements may be signed instead of or in addition to an authorized OGC-approved agreement.

c. **Program Letter of Agreement.** The PLA describes specific terms of the agreement such as naming faculty, educational objectives, rotation sites and periods, and policies and procedures for HPT education. For certain accrediting bodies (e.g., ACGME), a PLA is required between the program and its rotation sites. If required by an accrediting body, the PLA must conform to the standards of that accrediting body. Before a PLA can be executed, an affiliation agreement between VA and the sponsoring institution must be in place. The PLA may not substitute for an affiliation agreement or a disbursement agreement. PLAs may not conflict with, add to, or amend the terms of an affiliation agreement. PLAs may not address liability between the parties and may not cover financial arrangements or payments between the parties or for/from HPTs, such as those covered in a disbursement agreement. PLAs are local agreements; neither OAA nor OGC need to approve a PLA if the agreement conforms to the standards of the accrediting body and does not contain terms noted above.

## 7. ESTABLISHING ACADEMIC EDUCATIONAL RELATIONSHIPS

a. **Overview.** Educating future health care providers is a statutory mission of VA. By affiliating with educational institutions, VA plays a leading role in patient care, health education and research. VA ensures sufficient patient care opportunities, educational infrastructure and preceptors to accommodate HPTs. In programs with affiliate sponsors, the educational institution accepts primary responsibility for the education programs conducted with VA while VA retains full responsibility for the care of VA patients and administration of VA medical facilities and operations. The relationship between a VA medical facility and its academic affiliates is equal among affiliates and VA prohibits preferential treatment of one affiliate over another in carrying out this and other educational directives. VA encourages active diversification and maximizing of affiliate partnerships. Affiliation templates detail other areas of separate and shared responsibilities.

b. **Establishment of a New Affiliation.** DEOs are encouraged to promote and develop new academic affiliations. Requests from academic institutions for affiliations should be considered if the affiliation will result in potential benefits to Veterans and VA. To develop an affiliation, an academic program director or institutional official contacts the VA medical facility DEO. The DEO, service-level staff and VA medical facility leadership (if appropriate) review the potential benefits of the new educational program for the VA medical facility, including the delivery of health care to Veterans and the infrastructure needs of the proposal. The impact on already existing affiliates by the addition of a new affiliate partner should only be considered if this impact will directly adversely affect Veteran care or VA's educational mission. Necessary adjustments in VA medical facility resources must be made to accommodate the new affiliation (e.g., redistribute student rotation slots to be equitably shared). The affiliate, the relevant clinical service and education leadership develop the scope, purpose, and number of HPTs for the proposed VA educational experience. The VA medical facility Director grants approval for the affiliation by signing the new affiliation agreement. An affiliation is not finalized until all required signatures are obtained; see paragraph 6.b. and related responsibilities.

c. **Proposed Affiliations for Trainee Research.** The requirements for authorizing HPT participation in VA medical facility research are delineated in VHA Directive 1200.02(1), Research Business Operations, dated March 10, 2017. VA medical facilities are prohibited from forming affiliations solely for the purpose of allowing trainees to participate in VA medical facility research (see paragraph 10). Trainees from unaffiliated academic institutions in the community are not to be permitted to conduct projects in VA medical facilities or be given a without compensation appointment for the sole purpose of conducting their research.

d. **Proposal for a New Clinical Training Program or Affiliation.** The proposal for a new clinical training program or affiliation consists of the following:

(1) An infrastructure assessment is required to ensure adequate training capacity for the new program. An infrastructure assessment consists of the following: ***NOTE: In considering these factors, the VA medical facility must consider the equitable distribution of resources between current and new affiliates and not deny a new affiliation solely because available resources are fully utilized by current affiliates.***

(a) Impact on existing clinical and training programs, if applicable.

(b) Appropriate numbers and types of patients for the learning objectives of the program.

(c) Access to educational resources from the VA medical facility and VISN.

(d) Adequate space for requirements of the program, including exam rooms, training and conference space, team rooms and space for study and scholarly activities.

(e) Adequate equipment and supplies to meet educational needs.

(f) Qualified supervising practitioners of the appropriate discipline with dedicated teaching time.

(g) Administrative, clerical and fiscal personnel to support the program.

(h) Appropriateness and availability of stipends for HPTs.

(i) Benefits to Veterans, including improved access, quality and timely delivery of care.

(2) The results of the proposal for a new affiliation must be approved by and have agreement from the DEO, appropriate clinical leadership, VA medical facility leadership and as appropriate, the VISN.

(3) All necessary signatories complete the affiliation agreement and, if appropriate, educational program letters of agreement.

e. **Conditions to Program Approval.** The following are required for approval:

(1) The accreditation status of the proposed program should be verified. VA expects that all programs affiliated with VA have a national accrediting body and have full accreditation granted by these bodies. If programs are new, VA expects them to be progressing satisfactorily towards accreditation. In the case of a newly organized program, a VA medical facility may establish an affiliation agreement on a provisional basis and accept HPTs, provided there is documented evidence that the program is pursuing accreditation at an acceptable pace. If the program fails to make progress toward accreditation, the affiliation must be terminated. Some HPE programs may become affiliated programs in the absence of accreditation for reasons where an accreditation cannot be practically obtained. For all programs having less than full accreditation, a waiver must be granted from OAA to advance the affiliation. **NOTE:** *VA medical facilities will not be approved to affiliate with programs if the graduates do not meet VA qualification standards for the profession or are not otherwise eligible for employment.*

(2) For programs involving the training of physicians and dentists, with the exception of VA Advanced Fellowship programs and Chief Resident positions, VA medical facilities may only affiliate with programs accredited by either the Liaison Committee on Medical Education for allopathic medical students and the Commission on Osteopathic College Accreditation for osteopathic medical students; for GME, programs must be accredited by ACGME; for dental students and residents, programs must be accredited by the American Dental Association, Council on Dental Education, Commission on Dental Accreditation. Programs that do not already possess national accreditation are not granted waivers. Exceptions to the national accreditation requirement for other than medical and dental undergraduate and graduate education may be approved by the Chief Officer, OAA or their designee only upon receipt of a waiver request from the VA medical facility. The VA medical facility Director must request this waiver through OAA's Oversight & Compliance Division.



(3) On occasion, associated health or nursing educational programs are not accredited or fully accredited at the time an affiliation agreement is being contemplated. If a program is not accredited or not fully accredited, the local VA medical facility must apply for a waiver of this standard from OAA through the waiver process. A waiver must be fully justified. Unaccredited programs must still have defined competency standards, curricula, evaluation methods and outcome measurements. Waivers to the accreditation requirement for affiliation are most often approved because:

(a) There is no nationally recognized accreditation body for the discipline. This exception only applies to occupations or professions other than physicians or dentists. The use of regional accrediting bodies, or for occupations where such regional accreditation bodies do not exist, requires a waiver to the requirement for a national accrediting body, or

(b) The program is approved by the appropriate State board (e.g., nursing), or

(c) The program is working towards full accreditation but does not yet have a full accreditation status.

f. **Following Approval of Proposal.** Once a proposal has been approved:

(1) A disbursement agreement is executed, if applicable.

(2) The program may begin receiving HPTs after the necessary arrangements have been completed and all required documents have been executed/signed.

(3) The VA medical facility appoints the VA Site Director.

(4) The VA medical facility through the VA medical facility DEO and VA Site Director monitors the execution of the program closely in the first year to ensure it maintains value for VA.

(5) The VA medical facility DEO and program site director monitor HPT evaluations using the annual national TSS data, supplemented by more frequent local surveys or learner feedback as appropriate.

## **8. ACCEPTANCE OF PAYMENTS, GIFTS OR DONATIONS IN SUPPORT OF HEALTH PROFESSIONS TRAINEE EDUCATION PROGRAMS**

a. Occasionally, payments, gifts or donations are offered to VA, VA staff or VA-associated Non-Profit Corporations from academic affiliates (including associated health professions schools), other hospitals or health care organizations, commercial vendors (device or pharmaceutical manufacturers), other entities (Federal or non-Federal, commercial or non-profit) or the HPTs themselves, in support of health professions training or educational programs. Some overseas institutions such as Caribbean medical schools have standard practices of payment for their student rotations.

b. The Standards of Ethical Conduct for Employees of the Executive Branch, 5

C.F.R. § 2635, govern VA employees' personal acceptance of gifts, including payments, goods or services. Under those standards, an employee cannot accept a gift in return for being influenced in the performance of an official act, such as the provision of HPE services (e.g., clinical supervision). **NOTE:** For additional information, see [https://www.oge.gov/web/oge/nsf/resources\\_standards-of-conduct](https://www.oge.gov/web/oge/nsf/resources_standards-of-conduct) and 5 C.F.R. § 2635.202(c)(1). Contact the agency's ethics official, usually the local Regional Counsel or, in VA Central Office (VACO), the Assistant General Counsel to discuss questions with a VA ethics official.

c. Acceptance of payments, goods, services or other benefits that are offered to VA, VA staff, or a VA-associated Non-Profit Corporation in exchange for HPT clinical rotations is never permitted.

d. VA medical facilities and training programs may not charge tuition to HPTs in exchange for clinical rotations at VA for either affiliate or VA-sponsored training programs.

e. Financial relationships between VHA health care providers and industry are addressed by VHA Handbook 1004.07, Financial Relationships Between VHA Health Care Professionals and Industry, dated November 24, 2014.

f. Gifts and donations to VA in general support of a VA medical facility's HPE programs may be accepted by the VA medical facility Director. Donated funds must be handled through the VA medical facility's Non-Profit Research and Education Corporation (NPC) or the General Post Fund and are subject to VHA policy on acceptance and handling of gifts. **NOTE:** For additional information, see VHA Handbook 1200.17, VA Nonprofit Research and Education Corporations Authorized by Title 38 U.S.C. Sections 7361 Through 7366, dated April 27, 2016; VHA Directive 1200.02(1); and VHA Directive 4721, VHA General Post Fund, dated August 31, 2018. Gifts and donations in support of a particular HPE program at a VA medical facility in exchange for the provision of educational services at a VA medical facility are prohibited. For gifts and donations for official travel to attend a meeting or similar function, see VHA Directive 4721.

g. Intergovernmental Personnel Agreements may be used for faculty sharing arrangements with authorization of the VA medical facility Director and the local Human Resources Management Service. **NOTE:** For additional information, see 5 U.S.C. § 3371-3376 and VA Handbook 5005, Staffing, dated April 15, 2002, Part I, Section C.

h. Sharing agreements to sell VA HPE services cannot violate the policy in paragraph 8.c. above and must comply with VHA Directive 1660.01, Health Care Resources Sharing Authority – Selling, dated June 20, 2018. Typically, these sharing agreements are for affiliates interested in buying VA-based Program Director time. Sharing agreements for the sale of services to affiliates (such as Program Director time) require prior approval from the VACO Rapid Response Team and certification by the VA medical facility Director and VISN Director that compliance with VHA Directive 1660.01 has been met.

## 9. AFFILIATION PARTNERSHIP COUNCIL

a. **Overview.** The APC is the entity through which the VA medical facility and academic leaders oversee their affiliation relationships. Historically, committees known as “Deans Committees” oversaw the VA affiliation. In 1996, the name of these committees was changed to APC, which became the umbrella advisory committee for overseeing all affiliation relationships within a VA medical facility. While there are requirements for establishing, administering and maintaining APCs and associated subgroups, the specific arrangements are flexible and depend on the complexity of the affiliation, number of programs, proximity of the affiliate to the VA medical facility and desires of local VA and affiliate leadership. Subgroups for medical, nursing, associated health education and research are strongly recommended. The local subgroups should be sufficiently flexible to enhance the clinical education of the HPTs and affiliation relationships.

b. **Description.** The APC is the official forum for meetings between affiliated academic leaders and VA medical facility leadership. The APC is required by 38 U.S.C. § 7313, which states that VA must establish an advisory committee to advise the Secretary and the Under Secretary for Health on policy matters arising in connection with the operation of an affiliation agreement between VA and any school, institution of higher learning, VA medical facility or other public or non-profit agency, institution or organization for the training or education of health personnel. The intent is for APCs to act as the strategic planning, oversight and coordinating bodies for the affiliation(s). The council and its subgroups constitute forums for medical, dental, nursing and associated health affiliation partners to advise VA leadership and to have dialog on patient care, education and research. APCs are considered workgroups under FACA, the only authorized way that VA may receive recommendations and input from non-VA participants. APCs fall under the responsibility of the National Academic Advisory Council (NAAC), a Federal advisory committee staffed by OAA. APCs send their recommendations and policy input on an annual basis to NAAC’s APC Subcommittee, which are then considered by the full NAAC.

c. **Role of the Affiliation Partnership Council.** The APC, as a workgroup of the NAAC’s Affiliation Partnership Subcommittee, is a coordination and communication mechanism for affiliation relationships. In many VA medical facilities, the APC participates in the following activities:

- (1) Strategic and operational planning for educational and research relationships.
- (2) Advises the NAAC; the Chief Officer, OAA; and other VA leaders on policy matters regarding education and research programs conducted in VA medical facilities.
- (3) Based on HPT feedback, makes recommendations for improvement in the clinical learning environment and training programs.

d. **Membership.**

(1) APC attendees include representatives of those institutions and programs with major training footprints at the VA medical facility. Members should include:

(a) Representatives of affiliated medical schools and the organizational entities sponsoring GME programs covered by affiliation agreements. The selection of appropriate representatives from nursing and associated health affiliations is extremely important.

(b) VA members include:

1. DEO.

2. VA medical facility Director.

3. VA medical facility CoS.

4. VA medical facility ADPCS.

5. Associate or Assistant Director.

6. Associate Chief of Staff for Research.

7. Representatives from clinical services within the VA medical facility.

8. The Associate Chief of Staff for Nursing Education and the Associate Chief of Staff for Nursing Research are strongly recommended as members if these positions exist at the VA medical facility.

9. A representative from the local NPC such as the Executive Director is strongly recommended.

(c) Veteran Service Organization (VSO) representatives may be invited.

(2) The VA medical facility DEO compiles a list of major affiliates, which should include medical, dental, nursing and associated health programs. Representatives to the APC should be nominated by senior leaders at the respective academic institutions. The VA medical facility CoS invites VA attendees.

e. **Meeting Attendance.**

(1) **Designated Education Officer.** The VA medical facility DEO oversees APC meetings and recommends a Responsible Federal Official (RFO) to the VA medical facility Director. The DEO attends all APC meetings and ensures that all APC meetings are managed by the RFO, that all areas of HPE are represented, that all appropriate affiliates are invited and that summary notes are taken and kept on file for 5 years.

(2) **Responsible Federal Official.** The RFO manages all APC meetings, takes attendance, creates summary notes and meets the reporting requirements stated in paragraph 9.g.

(3) **Chiefs of Clinical Service Lines and VA Site Directors.** All chiefs of clinical service lines and VA Site Directors should be invited and make every effort to attend the APC.

(4) **VA Medical Facility Leadership.** The VA medical facility Director, VA medical facility CoS, VA medical facility ADPCS, Associate or Assistant Director, as well as the Associate Chief of Staff for Research should attend the APC meeting. The APC serves as a vital communication mechanism for planning and solving problems between VA and affiliates.

(5) **Veteran Service Organizations.** VSO representatives are optional attendees.

(6) **Non-Profit Research and Education Corporation.** Representatives from the local NPC such as the Executive Director are strongly recommended to attend full APC meetings, as well as research subgroup meetings.

f. **Subgroups.** The APC may appoint subgroups for the oversight of more specific affiliate programs, domains or issues. For example, specific subgroups may be created for physician education, nursing education, associated health education or research relationships. These subgroups serve as extensions of the larger council and provide for more focused forums for discussions around specific disciplines, topics or tasks. Creation of subgroups does not need national or VISN approval. Members of subgroups do not need a specific appointment in order to participate. Commonly, subgroups are constituted to discuss educational space, input from learner feedback surveys such as OAA's Trainee Satisfaction Survey, joint recruitment, or research relationships. There may be a smaller executive subgroup that meets regularly between larger meetings.

g. **Meetings and Reporting Requirements.**

(1) The site and frequency of meetings of the APC and its subgroups are determined by local needs. The APC meets at least once annually, while subgroups may meet more frequently.

(2) A summary of each APC meeting must be written and kept on file for five years. The summary must reflect members present, matters discussed and policy recommendations proposed.

(3) Information concerning APC activities is filed online annually with OAA for distribution to the NAAC and its APC subcommittee.

## 10. TRAINING

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

a. VHA Mandatory Training for Trainees, TMS # VA 3185966, upon initial appointment.

b. VHA Mandatory Training for Trainees Refresher, TMS # VA 3192008, on an

annual basis thereafter.

## 11. RECORDS MANAGEMENT

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

## 12. REFERENCES

- a. 5 U.S.C. App 2.
- b. 5 U.S.C. § 3371-3376.
- c. 38 U.S.C. §§ 7302, 7313, 7361-7366, 7405, 7406, 8153 and 8301.
- d. 5 C.F.R. part 2635.
- e. VA Handbook 5005, Staffing, dated April 15, 2002.
- f. VHA Directive 1052, Appropriate and Effective Use of VHA Employee Mandatory and Required Training, dated June 29, 2018.
- g. VHA Directive 1200.02(1), Research Business Operations; dated March 10, 2017.
- h. VHA Directive 1400, Office of Academic Affiliations, dated November 9, 2018.
- i. VHA Directive 1400.01, Supervision of Physician, Dental, Optometry, Chiropractic, and Podiatry Residents, dated November 7, 2019.
- j. VHA Directive 1400.05, Disbursement Agreements for Health Professions Trainees Appointed Under 38 U.S.C. Section 7406, dated June 2, 2021.
- k. VHA Directive 1400.09(1), Education of Physicians and Dentists, dated September 9, 2016.
- l. VHA Directive 1400.10, Health Care Resources Contracting: Educational Cost Contracts, dated May 20, 2020.
- m. VHA Directive 1660.01, Health Care Resources Sharing Authority – Selling, dated June 20, 2018.
- n. VHA Directive 4721, VHA General Post Funds – Gifts and Donations, dated August 31, 2018.
- o. VHA Handbook 1004.07, Financial Relationships between VHA Health Care Professionals and Industry, dated November 24, 2014.

p. VHA Handbook 1200.17, VA Nonprofit Research and Education Corporations Authorized by Title 38 U.S.C. Sections 7361 Through 7366, dated April 27, 2016.

q. VHA Handbook 1400.04, Supervision of Associated Health Trainees, dated March 19, 2015.

r. VHA Handbook 1400.07, Education of Advanced Fellows, dated February 26, 2016.

s. VHA Handbook 1400.08, Education of Associated Health Professions, dated February 26, 2016.

t. VHA Handbook 1400.11 Extended Educational Leave, dated April 1, 2016.

u. Federal Advisory Committee Act. <https://www.gsa.gov/cdnstatic/FACA-Statute-2013.pdf>.

v. United States Government Accountability Office Report. VA RESEARCH: Opportunities Exist to Strengthen Partnerships and Guide Decision-Making with Nonprofits and Academic Affiliates (GAO-20-570). 2020. <https://www.gao.gov/products/gao-20-570>.

## MAINTENANCE OF EDUCATIONAL RELATIONSHIPS

### 1. INTRODUCTION

Education relationships thrive in a climate of communication, cooperation and trust. Both Department of Veterans Affairs (VA) and the affiliated site (educational institution or clinical care site) bring assets to the relationship and are motivated to provide quality education, training and patient care for Veterans. Systematic assessment of educational programs, in partnership with academic affiliates, provides the basis for continual improvement. Formal and informal assessment activities as described below provide a framework for evaluating the scope, operations, value and outcomes of all health professions training programs. These criteria are only a guide; other criteria for maintaining educational relationships may also be used.

### 2. EDUCATIONAL RELATIONSHIP CRITERIA

Criteria for maintaining educational relationships differ for individual programs and for institutions that may sponsor multiple programs. However, there is significant overlap between the two sets of criteria. The VA medical facility Designated Education Officer (DEO) regularly assesses educational programs using the following criteria (individual program and institutional) as a guide and should discuss the assessment with senior VA medical facility leadership.

a. **Individual Program Criteria.** Individual program reviews using the checklist provided below are performed periodically. The following is a non-inclusive list of items to be considered:

- (1) Each training program provides tangible and intangible value to VA and to Veterans.
- (2) The accreditation status of the program is fully successful or above.
- (3) The clinical experience meets the needs of the training program, the Health Professions Trainees (HPTs), the VA medical facility and Veterans.
- (4) There is adequate access to educational resources for HPT use.
- (5) There is adequate space for patient care, HPT study and the supervision process.
- (6) There are adequate equipment and supplies to meet educational needs.
- (7) There is a sufficient number of qualified supervising practitioners to instruct and mentor HPTs.
- (8) There is appropriate availability of Office of Academic Affiliations (OAA) funding



for HPTs if appropriate.

(9) There is sufficient administrative time protected for education staff at the VA medical facility. At a minimum, VA site directors, VA program coordinators, VA disbursement coordinators and the program directors of VA-sponsored programs must have protected time to support the educational programs (see recommended OAA protected time tables for education administration at <https://dvagov.sharepoint.com/:b:/r/sites/VHAOAA/public/SiteAssets/SitePages/OAA-Staffing-Guidelines/OAA---Protected-Education-Time-for-VA-Clinicians-Sept.-2021.pdf?csf=1&web=1&e=LKocs7>. **NOTE:** *This is an internal VA website that is not available to the public*).

(10) Where appropriate, there is a current educational Program Letter of Agreement (PLA) or Memorandum of Understanding (MOU) for each program sponsored by an affiliated institution. An educational PLA or MOU is a document executed between a VA medical facility and a specific educational program after an affiliation agreement has been executed.

**b. Institutional Portfolio Criteria.** Criteria for maintaining relationships with individual programs are also applicable to assessing the institutional portfolio of educational relationships. In addition to the individual program criteria, institutional portfolio criteria may be reviewed annually by the VA medical facility DEO and may be in the form of a checklist. Some items to be considered are the following:

(1) The number and variety of training programs are appropriate to the VA medical facility's mission, including the provision of health care services to Veterans.

(2) The accreditation status of the training programs is fully successful or better.

(3) Recommendations or citations from accrediting bodies are being addressed.

(4) Training programs are of high quality and graduates of the program are eligible for VA employment and meet VA qualification standards (either at graduation or later in their careers).

**c. Other Aspects.** Other aspects of the regular review process may be performed in conjunction with planned and systematic review processes based on developed findings such as feedback from HPTs and accrediting bodies.

**ACADEMIC CALENDAR REPORTS AND FORMS****1. INTRODUCTION**

The following list contains most of the Office of Academic Affiliations' (OAA) recurring reports, which include requests for Health Professions Trainee (HPT) positions or funding of positions. The reports are issued annually in a cycle that corresponds to the academic year, which extends from July 1 through June 30.

**2. VA ALLOCATION OF TRAINEE POSITIONS**

a. The Veterans Health Administration's (VHA) HPT allocation process must provide allocation decisions by program or specialty according to a timeframe that allows available positions to be filled.

b. **Physician Residents.** The allocation process for physician residents is linked to the "Match" (i.e., National Resident Matching Program, a private, not-for-profit corporation established in 1952 to provide a uniform date of appointment to positions in graduate medical education in the United States.) The Match occurs in mid-March of the academic year to select physician resident HPTs for the next academic year beginning on July 1 of that calendar year. The recruitment of residents generally begins in the fall, and educational institutions or teaching hospitals must submit their rank lists for selection of physician residents to the Match by February. Results are announced in mid-March.

c. **Nursing and Associated Health Trainees.** Allocations are generally determined by December for positions starting in July or later in the new calendar year.

**3. REPORTS**

The timing of reports concerned with funding HPT positions is designed to facilitate recruitment of HPTs from affiliates or independent programs for rotations to Department of Veterans Affairs (VA) medical facilities.

**a. Medical and Dental Resident Allocation Process.**

(1) **Summary.** This provides policies and procedures for the preparation and submission of requests for funding support of physician and dental resident positions.

(2) **Issue Date.** Early October.

(3) **Due Date.** Early November.

**b. Trainee Support in Associated Health Professions.**

(1) **Summary.** This is a program announcement providing policies and procedures

for the preparation and submission of request for funding support for students in associated health professions.

(2) **Issue Date.** Early September.

(3) **Due Date.** Early November.

**c. Health Services Training Report.**

(1) **Summary.** The *Health Services Training Report* meets centrally mandated reporting requirements to annually assess the numbers of HPTs who use VA as a training site. VA medical facilities report on the number of persons who received health professional training in VA medical facilities throughout the previous fiscal year.

(2) **Issue Date.** Early October.

(3) **Due Date.** Mid-November.

**d. Announcement and Applications for Advanced Fellowship Program Appointments.**

(1) **Summary.** This is a program announcement providing policies and procedures for the preparation and submission of request for funding support for HPTs in Advanced Fellowship Programs.

(2) **Issue Date.** December.

(3) **Due Date.** Mid-April.

**e. Annual Oversight and Compliance Report.**

(1) **Summary.** The *Annual Oversight & Compliance Report* (formerly the Annual Report on Residency Training Programs) monitors the quality of VA HPT programs and is required by VHA Directive 1400.01, Supervision of Physician, Dental, Optometry, Chiropractic, and Podiatry Residents, dated November 7, 2019. It requires the VA medical facility Designated Education Officer through the VA medical facility Director to report the status of the residency training programs in their VA medical facilities annually to the Veterans Integrated Services Network (VISN) Director and VISN Academic Affiliations Officer. This report includes information on post-graduate programs for physician, dental, optometry and podiatry residents and monitors of HPT supervision. See VHA Directive 1400.01 for all related responsibilities.

(2) **Issue Date.** Mid-May.

(3) **Due Date.** Late July from the VA medical facility and late August from the VISN.

**f. Filled Residency Positions by Specialty.**

(1) **Summary.** This is a report providing information about whether the allocated resident positions in physician, dentistry, nursing, optometry, pharmacy, podiatry, psychology interns and psychology post-doctoral fellows have been filled or recruited and the post-graduate year level if appropriate.

(2) **Issue Date.** Early March.

(3) **Due Date.** Early April.