



GME Enhancement in the U.S. Department of Veterans Affairs Status at Year 4 of Implementation

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Objectives

- ▶ To address physician workforce shortages by expanding resident positions in specialties of greatest need to U.S. Veterans and the Nation
- ▶ Specifically, to add ~2,000 positions to a base of 8,900 in AY 2005-06 to raise VA's national GME share to 10-11%
- ▶ To address uneven geographic distribution of residents to improve healthcare access
- ▶ To foster innovative models of education, while enhancing VA's GME leadership role

Design

- ▶ The allocation process used a competitive review of applications submitted in response to 3 basic requests for proposals (RFPs).
- ▶ VA facilities in collaboration with their affiliates were selected based upon an expert panel quality review.

Setting

- ▶ The largest single provider of healthcare training in the U.S., a national system of 153 hospitals, 6 free-standing outpatient clinics, and 783 clinics providing integrated care to about 8 million U.S. military Veterans.
- ▶ VA teaching facilities include 124 hospitals and 3 outpatient clinics.

Participants

- ▶ VA healthcare facilities, affiliates, peer reviewers, VA's Office of Academic Affiliations

Main Outcome Measures

- ▶ Demographically-sensitive award of positions to facilities with demonstrated educational infrastructure and training capacity.
- ▶ Positions awarded to high-quality programs implementing new medical education models.
- ▶ Positions awarded to rural sites of VA care

Conclusions

VA continues as the only U.S. Federal agency presently:

- ▶ Expanding residency positions
- ▶ Attempting to redirect the educational content, structure, and setting of clinical training.

VA has been successful in providing GME positions to under-represented sites. However, the analysis shows that the largest gains in positions have gone to fellowship and specialty positions instead of pipeline programs. A rural health initiative this year was able to attract applicants for positions and infrastructure support.

Future work will focus on patient-centered primary care, patient safety, inter-professional collaboration, and rural outreach as part of our emphasis on educational innovations.

RESULTS

Table 1. Approved Resident Positions by Request for Proposals (RFP) awarded to 87 VA facilities in 71 different specialties for 1,106 programs

Request for Proposal	GME Positions Awarded (2006-09)				Totals	%
	2006	2007	2008	2009		
Critical Needs and Emerging Specialties	300	294	212	147	953	78%
New Affiliations & New Sites	42	41	50	76	209	17%
Educational Innovation	(N/A)	21	7	10	38	3%
Rural Health Training	(N/A)	(N/A)	(N/A)	21	21	2%
Total	342	356	269	254	1,221	100%

Figure 1. Geographic Distribution: Phases 1-4

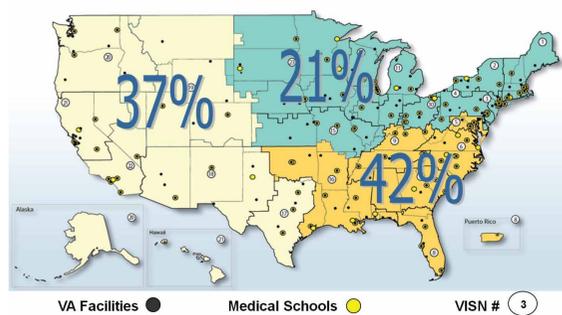


Figure 3. Impact on Total VA GME Positions by Year

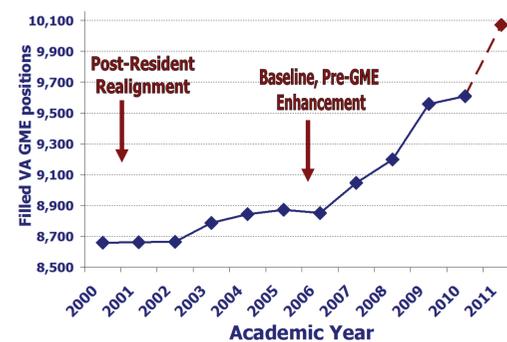


Figure 4. Impact on Total VA GME Positions by Specialty Groupings

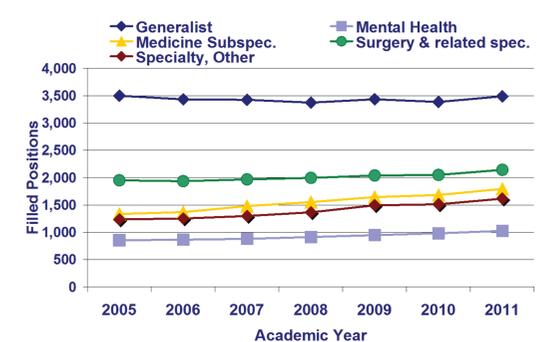


Table 4. Distribution of GME Enhancement Awarded Positions by Program Designation as 'Pipeline,' 'Fellowship,' or 'Specialty.'

GME Enhancement	Positions	Percent
Pipeline	526	43%
Fellowship	527	43%
Specialty	168	14%
Totals:	1,221	100%

**For the purpose of this analysis:*
 • Pipeline programs = entry-level programs – i.e., anesthesiology, emergency medicine, family medicine, internal medicine, OB/GYN, pathology, physical medicine & rehabilitation, psychiatry, radiology (diagnostic), general surgery, and transitional year. [Note: VA has no pediatrics programs.]
 • Specialty = dermatology, neurosurgery, neurology, nuclear medicine, ophthalmology, orthopaedic surgery, otolaryngology, plastic surgery, preventive medicine, radiation oncology, and urology.
 • Fellowships = all other programs, which require completion of a core residency before entry.

Table 2. GME Positions Awarded by Specialty Top 10 Training Programs

Program Rank	Specialty	Positions Approved	Number of Programs
1	Internal Medicine	194	86
2	Psychiatry	123	79
3	Anesthesiology	47	32
4	Hospice & Palliative Care Medicine	41	32
5	Gastroenterology	39	45
6	Cardiovascular disease	38	37
7	Dermatology	38	39
8	Neurology	35	33
9	Nephrology	34	39
10	Pulmonary dis. & crit. care medicine	34	38

Figure 2. Distribution of Positions Awarded through GME Enhancement by Request for Proposal & by Year:

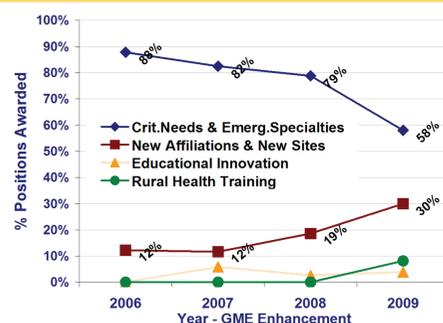


Table 3. Distribution of GME Enhancement Awarded Positions by Specialty Groupings

Specialty Grouping	Positions	Percent Total
Generalist	245	20%
Medicine Subspecialty	323	26%
Mental Health	169	14%
Surgery & Related	186	15%
Specialty Other	206	17%
Ancillary Diagnostic	64	5%
Rehabilitation	29	2%
Total:	1,221	100%

Figure 5. Percent Distribution of Total VA GME Positions by Specialty Groupings, at Baseline and Post-GME Enhancement

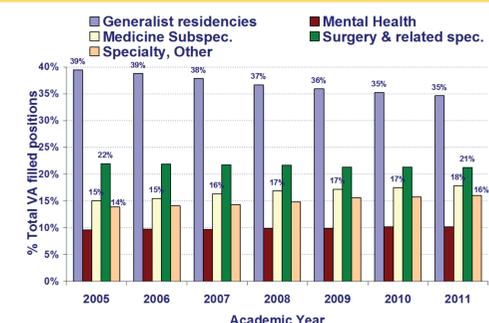


Figure 6. Impact of GME Enhancement on Total Allocations of Pipeline, Fellowship, and Specialty Programs

