



AAMC Workforce Conference

VA's Role in Workforce Development

Crystal City, VA
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Veterans Health Administration

Veterans Health Administration FY 2007

- Largest U.S. "integrated" health care system
 - Medical Care Obligations: \$35.2 billion
 - 153 Hospitals (17,500 operating beds), 895 Outpatient Clinics (including 731 CBOCs), 135 Nursing Homes
 - 7.8 million enrollees
 - 5.5 million patients treated
 - 62.3 million outpatient visits
 - 589,000 hospital admissions
 - 4.9 million bed days of care
 - 204,600 full-time employees
 - 101,400 health professional trainees
- Acclaimed as a leader in system redesign, quality improvement and patient safety

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Academic Affiliations FY 2007

- ~80% of VA hospitals have affiliation agreements with U.S. medical schools
- Over 40 other health professions are represented by affiliation agreements with more than 1,200 colleges and universities
- Over 100,000 trainees rotate through VA annually
- ~\$1 billion annual trainee budget

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Academic Affiliations Enduring Value

- For Universities: Academic support
 - Education and research funding
 - Expanded learning environment
 - System-based clinical practice
- For VA: Excellence in clinical care
 - Cost-effective clinical workforce
 - Enhanced staff recruitment
 - Evidence-based clinical practice

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Agenda

- If you build it, will they come?
 - Geriatrics
- Will they come to the right place?
 - GME Enhancement
- How will we know when we've got it right?
 - Educational Innovation

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Geriatrics Demand & Supply

- Number of Americans age 65 or older will double by 2030
- Need for board certified geriatricians is projected to quadruple by 2030
- If current graduation rates remain the same, the number of board certified geriatricians and geriatric psychiatrists will hardly budge by 2030
- Interest in careers in primary care and geriatrics is declining

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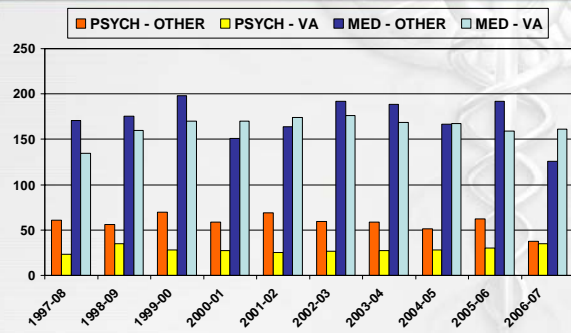
Potential Supply Side “Fixes”

- **Financial incentives**
 - Payment reform
 - Recruitment and retention bonuses
 - Education debt reduction programs
- **Practice incentives**
 - Primary care models
 - Collaborative care models
- **Training incentives**
 - Expansion of training opportunities
 - Educational innovation

Expansion of Training Opportunities

- **VA’s pioneering support of Geriatrics**
 - ACGME- accredited fellowship programs
 - Internal Medicine, Family Medicine and Psychiatry
 - VA Advanced Fellowships in Geriatrics
 - Medicine, Psychiatry and Neurology
 - Geriatric Research Education & Clinical Centers (GRECCs)
- **VA’s (more recent) expansion of graduate medical education**
 - GME Enhancement Initiative

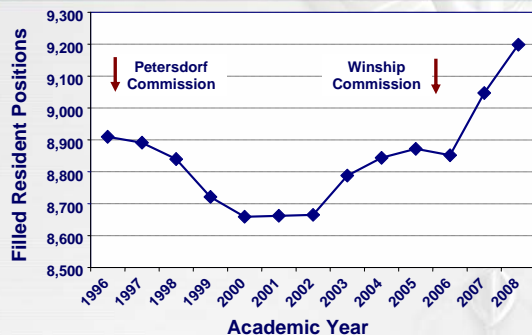
ACGME Geriatrics Fellowship Positions



GME Enhancement Initiative

- **2,000 new medical residency positions over 5 years**
- **Estimated incremental cost: \$250 million**
- **VA is presently the only GME payer increasing support for workforce expansion and development**

GME Enhancement Results: Phases 1 & 2



GME Enhancement Positions Approved by RFP

RFP	Positions		
	Requested	Approved	% Approved
CN & ES	862	594	69%
NA & NS	185	83	45%
ED INN	33	21	64%
Total	1080	698	65%

CN & ES = Critical Needs & Emerging Specialties
 NA & NS = New Affiliations & New Sites of Care
 ED INN = Educational Innovation (Phase 2 only)

Positions Approved by Specialty Group

Specialty	Approved		Base Yr
	N	%	%
Medicine	501	72	68
Surgery	110	16	22
Psychiatry	87	12	10
Total	698	100	100

Note: Surgery includes all surgical specialties plus anesthesiology; Psychiatry includes all mental health specialties and subspecialties; and Medicine includes all other specialties (not in Surgery and Psychiatry).

Top 10 Specialties

Rank	Discipline	Approved	
		N	%
1	General Internal Medicine	98.8	14.2
2	General Psychiatry	52.5	7.5
3	Hospice/Palliative Care	27.7	4.0
4	Cardiovascular Disease	27.0	3.9
5	Dermatology	25.5	3.7
6	Gastroenterology	25.1	3.6
7	Endocrinology & Diabetes	22.8	3.3
8	Sleep Medicine	22.0	3.2
9	Anesthesiology	21.0	3.0
10	Pulmonary & Critical Care	19.9	2.9
21	Geriatric Medicine	12.5	1.8
29	Geriatric Psychiatry	9.2	1.3

Positions Approved by Region

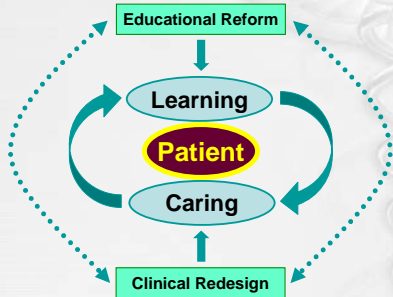


REGIONS	CN & ES	NA & NS	ED INN	TOTAL	%
NE, MA, MW	121	3	9	133	19
SE	226	59	6	291	42
NW, W, SW	247	21	6	274	39
TOTAL	594	83	21	698	100

Entirely New Affiliations/New Sites

Site	VA	Affiliate
VAMC	Muskogee	Oklahoma State Univ COM
	Northampton	Dartmouth
	Salisbury	Rowan Med Cntr/Edward Via COM
	West Palm Beach	Univ Miami at FAU
OPC	Las Vegas	Touro Univ COM/Valley Med Cntr
	Orlando	Orlando Regional Healthcare
CBOC	Atlanta-East Point	Moorehouse
	Durham-Greenville	Pitt County Mem Hosp/East Carolina
	Little Rock- Pine Bluff	Univ Arkansas/Pine Bluff AHEC
	Temple-Austin	Seton Healthcare Network

Educational Innovation



GME Enhancement Innovation Themes

Facility	Specialty	Innovation
Bedford	Psych	Mentoring & leadership development
Cleveland	Int Med	Inter-professional team training
Indianapolis	Int Med	Collaborative care; risk analysis & reduction
Phoenix	Gen Surg	Laparoscopic/endoscopic simulation
San Francisco	Int Med	Continuity of care; chronic disease management
Augusta	Int Med	Patient values; palliative care

San Francisco VA and UCSF

- **Background**
 - VA PRIME program
 - Epidemiology/outcomes research emphasis
 - RRC-IM Education Innovation Project
 - Relief from ACGME requirements
- **Goal: Patient-centered care and learning**
 - Continuity of care and supervision
 - 50% ambulatory/elective
 - General *and* subspecialty ambulatory clinics
 - Transitions of care curriculum

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San Francisco VA and UCSF Team Continuity Model

RESIDENT 1		amb1		amb1
RESIDENT 2	amb2		amb2	
OUTPATIENT TEAM	amb2	amb1	amb2	amb1
INPATIENT COVERAGE				

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Summary

- Expanding training positions alone is a relatively crude workforce tool. It may increase supply but not necessarily in geographic areas or specialties of greatest need.
- New educational models that more realistically reflect the core values of the profession and national workforce needs are required.
- Given its size, reputation for quality and enduring partnerships with the academic community, VA is well positioned to have a leadership role in reforming (not just expanding) health professions' education.

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Framework for Change

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