



EDITORIAL

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What is the VA? The Largest Educator of Health Care Professionals in the U.S.

This July, medical students, residents, and fellows in almost every medical and surgical specialty will join nurses at all levels of training, undergraduate and graduate pharmacists, dentists, and allied health students to train at a VA hospital. The VA Office of Academic Affiliations (OAA), which coordinates this massive educational effort, reported that in 2015, the last year for which data are available, 123,552 health care trainees were enrolled in VA programs.¹ That's in addition to the hundreds of health care professionals trained in the 4 branches of the armed services, including students at the Uniformed Services University of the Health Sciences and those receiving a health care education through the PHS. Federal institutions are easily the largest contributors to health care education in the nation and very likely in the world.

This mission to educate the U.S. health care workforce is not new. This year marks the 70th anniversary of the collaboration between the VA and academic affiliates across the country to ensure a highly qualified cadre of health care professionals care, not only for veterans, but also for the public. Hence, the OAA motto: To educate for VA and for the nation.

When allopathic and osteopathic medical schools are combined, there are partnerships between the VA and 90% of U.S. medical schools. More

than 70% of all U.S. practicing physicians trained at a VA facility at some time.² Currently, the VA has more than 40 different health care professional training programs under its auspices.

This educational mission is a core VA function that is enshrined in law as are VA's other 3 core charges. According to the statute, the VA secretary shall "to the extent feasible without interfering with the medical care and treatment of veterans, develop and carry out a program of education and training of health personnel." The primary clinical care, education, and research functions of the VA are inseparable, and none can be carried out without an adequate number of qualified staff.

Government reports and the media have identified the shortage of VA health care professionals as a major contributor to the wait times crisis of the past several years.³ Section 301 of the Veterans Access, Choice, and Accountability Act of 2014 actually requires the VA Office of Inspector General (OIG) to conduct assessments of the staffing shortages in the department. Reports from the OIG have identified 5 critical need occupations: medical officer, nurse, psychologist, physician assistant, and physical therapist.⁴

From my perspective as a medical officer, I am certain that the reason I went straight to the VA after my residency in psychiatry and have

never left is my overwhelmingly positive experience as a medical student and resident. The VA had many of the best teachers in my training programs. The patients were—and still are nearly 20 years later—among the most respectful and appreciative of any I have treated.

Many VA patients considered us, even as trainees, their doctors and often asked us when we were residents whether they could "keep us," although they knew that as former members of the military, most of us would rotate out of their lives. Yet they also knew that because of the strength of the training programs, a new young doctor would come to take care of them. Even now when the occasional angry patient says, "all you doctors care about is money," I am proud to say that I could probably make more money in the private sector, but I choose to work at the VA.

Many of my fine colleagues in medicine, nursing, psychology, and allied health also remained at the VA after their training, inspired to provide public health to those who served and were underserved. Those who entered military medicine or the PHS had similar ideals borne of the role models who taught them in those federal institutions. One of the often unappreciated negative consequences of the VA scandal is that it may discourage students in the health care professions from

rotating through or seriously considering careers in the VA.

The VA and the military often do not receive the recognition they deserve as academic medical institutions. Some of the most renowned and accomplished faculty of prestigious medical universities also work at VA facilities. The ability to simultaneously teach gifted students, conduct cutting-edge research, and practice high-quality medicine all in a public health setting are what attracted me and many other idealistic health care professionals to the VA.

The VA, however, has taken active steps to restore its reputation as one of the best places to learn and work. Three outstanding initiatives deserve special attention. The first being a series of visits to medical schools that Carolyn M. Clancy, MD, made when she was the interim under secretary for health. Fortunately for me, she spoke at the academic affiliate of my VAMC (the University of New Mexico School of Medicine), where she talked about the excitement and rewards of VA clinical care and research.⁵

The VA Nursing Academic Partnerships (VANAP) is another initiative to promote VA as an educator and employer of health professionals. Comprised of 18 competitively selected nursing schools in the nation and the VA, VANAP's objective is "increasing recruitment and retention of VA nurses as a result of enhanced roles in nursing education." The New Mexico VA Health Care System, the hospital I practice at, had the honor of being awarded one of these partnerships, and I have been encouraged to see many student nurses choose the

training track at the VA and express interest in employment.

According to a nurse at the Oregon Health & Science University VA partnership, "One thing I learned that I did not expect was about the wars the clients had served in. I gained a greater respect for our men and women in the service past and present...I have now an understanding of not only the physical, but also the mental and emotional effects war has on an individual."⁶ It is important to realize that even if physicians and nurses in training do not ultimately enter the VA workforce, they still leave their educational experience with a more empathic understanding of the health care needs of veterans.

The salience of the third endeavor, however, has not been widely recognized. In March, Secretary Robert McDonald spoke at a meeting of the Association of American Medical Colleges Council of Deans. His speech traced the history of academic collaboration with the VA; acknowledged the bureaucratic, information technology, and other challenges faced by the VA and its academic affiliates; and reaffirmed the VA's commitment to academic partnerships. He recognized the significant and lasting contributions the relationship with academic medical centers has had on the care of veterans and the community for decades. His remarks concluded with a vision of the potential the partnership has to transform health education and the delivery of care in the years to come. But perhaps the most hopeful remarks in the speech came not from Secretary McDonald but from the comments of medical

students who had rotated at the San Diego VAMC, which he shared:

"The emphasis on teaching was fantastic, and far superior to most other rotations."

"The vets were a wonderful patient population who really allowed us a great opportunity to learn."

"The VA is the best place for medical students to work."⁷ ●

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Disclaimer

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