VA/DoD Health Executive Council **Memorandum**

Date: September 8, 2004

From: Co-Chairs, Department of Veterans Affairs/Department of Defense Health Executive Council

Subj: Establishment of VA/DoD Evidence-Based Practice Work Group

To: VA/DoD Health Executive Council Members

1) The co-chairs of the VA/DoD Health Executive Council direct the establishment of the Evidence-Based Practice Work Group (Work Group) to advise the VA/DoD Health Executive Council (HEC) on the use of clinical and epidemiological evidence to improve the health of the population across the Veterans Health Administration and Military Health System. (November 2004)

2) We are charging the Work Group (see membership attached) to perform the following functions:

   A) Responsibilities:

      (1) Facilitate ongoing implementation of evidence-based clinical advances into practice.
      (2) Champion the integration of evidence-based clinical practice into current developing information systems.
      (3) Foster integration of evidence-based practice into VA/DoD initiatives related to health promotion, disease prevention, and wellness initiatives.
      (4) Adopt or adapt, develop, implement and sustain evidence-based clinical practice guidelines.
      (5) Assess the effectiveness of implementation and make recommendations to maximize performance improvement.
      (6) Identify opportunities and make recommendations for research related to evidence-based practice within VA/DoD.

   B) Procedures: The Work Group will:

      (1) Select topics for implementation of evidence-based indicators based on high cost, high volume, high risk, and problem prone conditions.
      (2) Prioritize topics based on cost, feasibility and knowledge of the etiology of the gap.
      (3) Coordinate evidence reviews to support recommendations for care.
      (4) Maintain and update VA/DoD evidence-based clinical practice guidelines and other recommendations for care.

(5) Use evidence-based process and outcome indicators to assess the efficacy of implementation processes.
(6) Promote the use of medical informatics to support clinical decision-making.
(7) Create and charge subcommittees as necessary to facilitate the work of the Work Group.

3) The workgroup will have two co-chairpersons (one from each Department) and will have representation from each Department to include the Veterans Integrated Service Networks and the Military Services.

4) Monthly status updates will be provided by the Work Group co-chairs at the staff-level meeting. Bimonthly status reports will be provided for the VA/DoD Health Executive Council.

Jonathan Perlin, MD, Ph.D, MSHA, FACP
Acting Under Secretary for Health
Department of Veterans Affairs

William Winkenwerder, Jr., MD
Assistant Secretary of
Defense (Health Affairs)

Attachment

Department of Veterans Affairs/Department of Defense Health Executive Council Evidence-Based Practice Work Group

MEMBERSHIP

Veterans Affairs

Co-Chair: Appointed by Undersecretary, Veterans Health Administration

Members: VA Patient Care Services Representative

VA Chairperson of the Medical Advisory Panel to the Pharmacy Benefits Management Program

VA Office of Quality and Performance Representative

VA Informatics Representative

VA Director of External Peer Review Program

VA Employee Education System Representative

VA Evidence-Based Practice Representative

VA Health Services Research and Development Representative

Department of Defense

Co-Chair: Appointed by the Assistant Secretary of Defense (Health Affairs)

Members: Army Medical Department Representative

Navy Bureau of Medicine and Surgery Representative

Air Force Medical Department Representative

DoD PharmacoEconomic Center Representative

DoD Medical Informatics Representative

2 DoD Health Affairs / TRICARE Management Activity Representatives

DoD Clinical Practice Guidelines Project Officer