

# **Department of Veterans Affairs / Department of Defense Health Executive Committee (HEC) Evidence Based Practice Work Group Charter**

## **Governance Structure**

The HEC is supported by a structure of Business Lines (BLs) and Work Groups (WGs) to encourage, support, and oversee the Department of Veterans Affairs (VA) and Department of Defense (DoD) sharing and collaboration efforts. The Evidence Based Practice WG reports to the HEC through the Professional Development BL. The HEC reports to the Joint Executive Committee (JEC). The WG is co-chaired by a VA and a DoD leader appointed by their respective VA or DoD BL Co-Lead.

## **Charge**

The Evidence Based Practice WG will actively collaborate to advise the HEC on the use of clinical and epidemiological evidence to improve the health of the population across the Veterans Health Administration (VHA) and the Military Health System.

## **Scope of Responsibilities**

- Identify, assess, and promote strategic opportunities for the coordination and sharing of health related services and resources between the Departments.
- Ensure collaboration and communication between the Departments in functional area.
- Participate in the VA/DoD JEC Joint Strategic Planning (JSP) process to develop and implement the strategies and performance measures as outlined in the JSP guidance, or as directed by BL or HEC leadership.
- Participate in the VA/DoD JEC Annual Report development process, as directed by BL or HEC leadership.
- Operate in accordance with guidelines established by the JEC and HEC.
- Complete assignments received from the BL and HEC.
- Develop and coordinate reports to Congress.
- Respond to GAO reports and other inquiries. Provide coordinated joint responses when indicated.

- Develop tools to assist with implementation of evidence-based clinical advances into practice.
- Champion the integration of evidence-based clinical practice into current developing information systems.
- Foster integration of evidence-based practice into VA/DoD initiatives related to health promotion, disease prevention, and wellness initiatives.
- Adopt or adapt, develop, and update evidence-based clinical practice guidelines.
- Identify opportunities and make recommendations for research related to evidence-based practice within VA/DoD.
- The role of the WG is limited to making recommendations. The WG will not direct actions, oversee functions, create policies or make Department decisions.

## **Structure**

Chairpersons: The DoD Co-Chair is the Director, Clinical Performance Assurance Directorate, U.S. Army Medical Command. The VA Co-Chair is the Assistant Deputy Under Secretary for Health for Quality, Safety and Value.

- Membership (Attachment A): The Co-Chairpersons will request membership from both Departments. DoD membership will include representatives from the Army, Navy, and Air Force. WG Co-Chairs will add additional members as needed for the work identified. A membership list will be provided to the HEC support offices upon request.
  - Membership is based on subject matter expertise.
  - Sub-groups: The WG may establish sub-groups for specific tasks projects. Sub-groups do not need to be chartered and will include at least one representative from each Department.

## **Procedural Guidelines**

- Consensus Building: Deliberation of WG issues will be at the lowest appropriate level with formulation of recommendations by majority consensus of the WG membership or their designee. When majority consensus cannot be reached, the Co-Chairs will elevate issue(s) to the BL Co-Leads, who may elevate to the HEC as needed.
- Deliverables: Delivery of information to the BL or HEC shall be in a milestone-driven format. Deliverables will be formulated as recommendations and courses of actions with pros and cons.

- Meetings: The WG will meet no less than quarterly to discuss progress of required HEC briefings, current or new legislation requirements delegated to the WG, JSP initiatives and milestones, and other topics as appropriate. Meeting notes are required and distributed to WG members.
- Duration: The WG is established until the assigned scope of work is complete. Upon completion of WG functions, a memorandum outlining the rationale to close or move the WG to ad hoc status will be presented to the BL for approval.
- Review of Charter: The WG will submit recommended changes to the Charter when necessary. The HEC support staff in conjunction with the WG Co-Chairs will review the charter every two years from date of signature. All requested Charter changes with accompanying justification will be submitted to the BL Co-Leads for approval.
- Coordination: Appropriate coordination will be completed with other BLs, WGs, VA and DoD offices, as needed, before finalizing work.

## Reporting

- The WG provides reports and informational or decisional briefing to the BL and HEC per request.
- The work of any sub-groups will be reported during regular reporting of the WG or as a separate report when requested by the WG, BL, or HEC.
- Provide fiscal year achievements as requested.

## Liaison Support

The VA and DoD HEC coordination staff will serve as liaisons to the WG Co-Chairs. The liaisons guide the Co-Chairs on HEC processes, track activities to include JSP milestones and performance measures as well as annual report submissions, and contribute to WG meetings, as applicable.

9 Jan 17

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 Director, Education & Training (J-7), Defense  
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 Professional Development Business Line  
 Co-Lead

9 Jan 17

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Mr. Volney "Jim" Warner  
 Chief Learning Officer, Veterans Health  
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 Professional Development Business Line  
 Co-Lead

## Attachment A

### **Department of Defense / Department of Veterans Affairs Health Executive Committee Evidence Based Practice Work Group Membership**

#### **Department of Defense Members**

- Co-Chair: Director, Clinical Performance Assurance Directorate, U.S. Army Medical Command
- U.S. Army Medical Command Representative
- U.S. Navy Representative, Bureau of Medicine and Surgery (BUMED)
- U.S. Air Force Medical Department Representative
- DHA PharmacoEconomic Center Representative
- DoD Medical Informatics Representative
- Defense Health Agency, Health Care Operations, Clinical Support Division
- Chief, Evidence-Based Practice, U.S, Army Medical Command
- Defense Health Agency, Health Care Operations, Public Health Division
- Defense Center for Excellence for Psychological Health and Traumatic Brain Injury

#### **Department of Veterans Affairs Members**

- Co-Chair: Assistant Deputy Under Secretary for Health for Quality, Safety and Value
- VHA Patient Care Services Representative
- VHA Pharmacy Benefits Management Program Representative
- VHA Informatics Representative
- VHA Director, Evidence Based Practice Program
- VHA Employee Education System Representative
- VHA Health Services Research and Development Representative
- VHA Chief Consultant, Preventative Medicine, Patient Care Services
- VHA Veterans Integrated Services Network (VISN) Representative