

**RESPONSIBILITIES OF THE NATIONAL CENTER FOR HEALTH PROMOTION AND
DISEASE PREVENTION (NCP)**

- 1. REASON FOR ISSUE:** This Veterans Health Administration (VHA) Directive establishes the policy and responsibilities of the National Center for Health Promotion and Disease Prevention (NCP, 10P4N) within the Office of Patient Care Services (PCS, 10P4).
- 2. SUMMARY OF MAJOR CHANGES:** This revised Directive establishes the framework for policy and responsibilities for the programs in NCP and incorporates changes from the VHA Preventive Care Program, a sub-initiative of the New Models of Care Transformational Initiative within the Office of Strategic Integration. **NOTE:** *In other related documents, the leadership for NCP is titled "Director"; because of an organizational change in Patient Care Services the title changed to "Chief Consultant for Preventive Medicine", which is used in this Directive.*
- 3. RELATED ISSUES:** VHA Handbooks 1120.01, 1120.02, 1120.04, and 1120.05.
- 4. RESPONSIBLE OFFICE:** The Chief Consultant for Preventive Medicine at the National Center for Health Promotion and Disease Prevention (10P4N) in PCS is responsible for the content of this Directive. Questions may be referred to 919-383-7874, ext. 2220.
- 5. RESCISSIONS:** VHA Directive 1120, dated July 29, 2009 is rescinded.
- 6. RECERTIFICATION:** This VHA Directive is scheduled for recertification on or before the last working day of July 2020.

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RESPONSIBILITIES OF THE NATIONAL CENTER FOR HEALTH PROMOTION AND DISEASE PREVENTION (NCP)

1. PURPOSE: This Veterans Health Administration (VHA) Directive establishes the policies and responsibilities of the National Center for Health Promotion and Disease Prevention (NCP). **AUTHORITY:** 38 United States Code 7301(b) and 7318.

2. BACKGROUND:

a. NCP, a section of the Office of Patient Care Services (PCS), was established in 1995. The purpose of NCP is to provide a central office to monitor and encourage VHA activities with respect to the provision, evaluation, and improvement of preventive health services and health education, and to promote the expansion and improvement of clinical, research, and educational activities related to VHA preventive health services (see 38 U.S.C. 7318). NCP activities support VHA Strategic Goal 1 to provide Veterans personalized, proactive, and patient-driven health care.

b. NCP planned, developed, and implemented VHA's Preventive Care Program, a sub-initiative of the New Models of Care Transformational Initiative within the Office of Strategic Integration. The Program is designed to ensure that Veterans receive comprehensive health education, appropriate clinical preventive services, coaching for health behavior change, and support for self-management to prevent the onset of or limit the effect of chronic diseases. This Program is closely integrated with the Patient-Aligned Care Teams (PACT) sub-initiative and supports facility Health Promotion Disease Prevention (HPDP) infrastructure and staff. Key components of the Program are the Facility HPDP Programs, Health eLiving Assessment (HLA), and the Veterans Health Library (VHL). The Preventive Care Program is closely aligned with two established NCP programs, the Veterans Health Education and Information Program (VHEI), and the MOVE![®] Program.

3. POLICY: It is VHA policy to strongly support the provision of health promotion, disease prevention, and health education services for Veterans, and to organize the effort to provide policies, programs, and services in these areas through the National Center for Health Promotion and Disease Prevention, Office of Patient Care Services.

4. RESPONSIBILITIES:

a. **General Responsibilities of the National Center for Health Promotion and Disease Prevention.** The National Center for Health Promotion and Disease Prevention (NCP) is responsible for:

(1) Planning, development, implementation, sustainment, and evaluation of VHA programs for weight management (e.g., MOVE![®]), health promotion and disease prevention, Veterans health education and information, and clinical preventive services.

(2) Creating and maintaining personalized, proactive, and Veteran-driven policies in weight management, health promotion and disease prevention, Veterans health education and information, and clinical preventive services.

(3) Advising the Under Secretary for Health on evidence-based and Veteran-centered health promotion, disease prevention, and health education policies and services.

(4) Collaborating with other VHA clinical and administrative program offices on prevention policy and services related to specific clinical topics in health promotion and disease prevention.

(5) Providing nationwide leadership, training, guidance, consultation, tools, and resources to VHA staff, HPDP Program Managers, Health Behavior Coordinators, Veterans Health Education Coordinators, and MOVE![®] Coordinators. This includes providing VHA clinicians with training in Veteran-centered communication, health education, health coaching, health behavior change counseling, and self-management support for chronic conditions to enhance patient care.

(6) Developing innovative and comprehensive tools and resources for Veterans, which enhance proactive, personalized, and Veteran-driven preventive health care.

(7) Serving as the VA liaison, as requested, to other Federal programs, offices, committees, and task forces on matters pertaining to health promotion and disease prevention. These Federal activities include, but are not limited to, the National Prevention Council, the United States Preventive Services Task Force, the Task Force on Community Preventive Services, the Advisory Committee on Immunization Practices, and Healthy People 2020.

b. **MOVE![®] Weight Management Program for Veterans.** NCP is responsible for serving as VHA's central resource for weight management programs (e.g., MOVE![®]) in VA medical facilities and community-based out-patient clinics (CBOC). MOVE! is a comprehensive, evidence-based, population-level, multi-disciplinary, self-management-focused weight management program, tailored for the VA population. NCP is responsible for the oversight of compliance with minimal core weight management program requirements per VHA Handbook 1120.01, MOVE! Weight Management Program for Veterans (MOVE!).

c. **Health Promotion and Disease Prevention Programs.**

(1) NCP is responsible for serving as VA's central resource for HPDP programs in VA medical facilities, CBOCs, Community Living Centers, and other sites of health care or accessed by Veterans through telehealth. HPDP refers to environmental, educational, motivational, and clinical activities designed to encourage improvement in health behaviors and Veteran engagement in clinical preventive services that are conducive to improving the health and well-being of populations and individuals. Disease prevention refers to clinical preventive services (screenings, immunizations, health behavior counseling, and preventive medications) that aim to prevent or minimize

future morbidity and mortality by delaying or averting the onset or severity of disease, or detecting already existing disease at an early stage when it can be more successfully treated. HPDP services include, but are not limited to: clinical preventive services, related health education, self-management support for chronic conditions, and health coaching. This includes the maintenance, revision, and evaluation of the HLA. The HLA is an online tool for Veterans that asks about health history, lifestyle choices, and health habits. Individualized reports based on Veterans' responses include an assessment of current health and health risks, tailored recommendations for improving health, and guidance for creating a preventive health care plan. Veterans may choose to share their reports with their health care team to support discussions about setting and working toward desired healthy living goals.

(2) In addition, NCP is responsible for the development, implementation, and evaluation of training programs for promoting Veteran-centered communication skills and new clinical programming in health education, health coaching, health behavior change counseling, motivational interviewing, self-management support for chronic conditions, and HPDP for PACT. NCP is responsible for oversight of compliance with minimal core HPDP program requirements per VHA Handbook 1120.02, Health Promotion and Disease Prevention Core Program Requirements.

d. **Veterans Health Education and Information Program.** NCP is responsible for serving as VHA's central resource for Veteran health education and information (VHEI) programs in medical centers, CBOCs, Community Living Centers, and other sites of health care or accessed by Veterans through telehealth. The VHEI Program is a coordinated approach to planning, delivering, and evaluating evidence-based, Veteran-centered health education programs, services, and resource materials for Veterans and, as appropriate, their family members. This includes maintenance, revision, and evaluation of the VHL. NCP is responsible for oversight of compliance with minimal core VHEI program requirements per VHA Handbook 1120.04, Veterans Health Education and Information Core Program Requirements.

e. **Clinical Preventive Services.** NCP is responsible for serving as VHA's central resource for guidance about clinical preventive services (immunizations, screenings, brief health behavior counseling, and preventive medications). NCP works closely with key stakeholders in appropriate program offices in the development of guidance about clinical preventive services, including Pharmacy Benefits Management Services for guidance about immunizations and preventive medications. The Preventive Medicine Field Advisory Committee (PMFAC) members are responsible for assisting in the assessment of and providing guidance on new clinical prevention services, formulation of VHA prevention guidance statements, and monitoring of VHA prevention program performance. The PMFAC identifies field prevention challenges, priorities for improvement, and opportunities for disseminating best prevention practices. The PMFAC is composed of representatives of Veterans Integrated Service Network (VISN) HPDP Program Leaders, other field-based clinicians who are preventive medicine subject matter experts, and representatives from VHA Program Offices with a prevention focus, including, but not limited to: Primary Care Services and other offices within PCS, Office of Public Health, Office of Nursing Services, Office of Informatics and

Analytics, Office of Quality, Safety and Value, Office of Research and Development, and Deputy Under Secretary for Health for Operations and Management. PMFAC members are all Federal employees and are appointed by the Chief Consultant for Preventive Medicine, NCP. NCP is responsible for oversight of compliance with minimal core Clinical Preventive Services requirements per VHA Handbook 1120.05, Coordination and Development of Clinical Preventive Services. The Chief Consultant for Preventive Medicine also serves on the VA/Department of Defense (DoD) Evidence-Based Practice Work Group, which oversees the development and dissemination of VA/DoD Clinical Practice Guidelines that provide recommendations on the management and treatment of (but generally not screening for) common clinical conditions.

5. REFERENCES:

- a. 38 U.S.C. Section 7318.
- b. 38 U.S.C. Section 1701.
- c. VHA Handbook 1120.01. MOVE! Weight Management Program for Veterans (MOVE!):
- d. VHA Handbook 1120.02. Health Promotion and Disease Prevention Core Program Requirements.
- e. VHA Handbook 1120.04. Veterans Health Education and Information Core Program Requirements.
- f. VHA Handbook 1120.05. Coordination and Development of Clinical Preventive Services.
- g. NCP Internet Web site: <http://www.prevention.va.gov/>.
- h. NCP Intranet Web site: <http://vaww.prevention.va.gov/> . **NOTE:** *This is an internal VA Web site that is not available to the public.*
- i. MOVE![®] Intranet Web site: <http://vaww.move.med.va.gov/> . **NOTE:** *This is an internal VA Web site that is not available to the public.*
- j. MOVE![®] Internet Web site: <http://www.move.va.gov/>.

6. DEFINITIONS:

a. **Clinical Preventive Service.** A clinical preventive service is a service delivered in the clinical setting for the primary prevention of disease, or for the early detection of disease in persons with no symptoms of the target condition, with the goal of preventing or minimizing future morbidity and mortality. Clinical preventive services typically include: screening (for infectious diseases; cancers; heart and vascular diseases; injury and violence; mental health conditions and substance abuse; metabolic, nutritional,

endocrine, musculoskeletal, obstetric, and gynecological conditions; and vision disorders), immunizations, health behavior counseling, and preventive medications.

b. **Health Behavior Change.** Health behavior change is the process of considering, initiating, achieving, and maintaining change in health behavior(s), e.g., tobacco use, risky alcohol use, unhealthy diet, and physical inactivity.

c. **Health Behavior Counseling.** Health behavior counseling consists of a variety of individualized communication techniques and strategies used by health professionals to engage patients in the process of making health behavior changes to prevent disease, promote health, and enhance the quality of life.

d. **Health Education.** Health education, as defined in VHA Handbook 1120.04, Veterans Health Education and Information Core Program Requirements, paragraph 3.a. and the National Task Force on the Preparation and Practice of Health Educators as “the process of assisting individuals, acting separately or collectively, to make informed decisions about matters affecting their personal health and that of others.” In VHA, Veterans health education encompasses patient education, and is defined as any combination of information, education, and other strategies designed to help Veterans to enhance their quality of life, promote health and prevent illness, actively partner with their providers and health care teams, engage needed family and social support systems, develop self-management, and coping skills, and access and appropriately utilize VHA health care resources across the continuum of care.

e. **Health Promotion and Disease Prevention.** HPDP refers to environmental, educational, motivational, and clinical activities designed to encourage improvement in health behaviors and conditions of living that are conducive to improving the health and well-being of populations and individuals. Disease prevention refers to health-related interventions or services that aim to prevent or minimize future morbidity and mortality by delaying or averting the onset or severity of disease, or detecting already existing disease at an early stage when it can be more successfully treated. HPDP services include, but are not limited to: clinical preventive services (screenings, immunizations, health behavior counseling, and preventive medications); related health education; self-management support for chronic conditions; and health coaching.

f. **Immunization.** Immunization is the administration of vaccines, toxoids, or immunoglobulins with the goal of protecting susceptible patients from vaccine-preventable diseases.

g. **Preventive Medications, Substances, or Devices.** Preventive medications, substances, or devices are drug products or other substances used by a person who is not known to have the target condition, with the goal of preventing future morbidity and mortality. This includes selected prevention supplies or commodities, such as condoms.

h. **Screening.** Screening is an examination or testing of a person with no symptoms of the target condition to detect disease at an early stage when treatment may be more effective, or to detect risk factors for disease or injury.

i. **Self-Management and Self-Management Support.** Self-management includes managing the medical aspects as well as the functions, roles, and emotions associated with having a chronic condition. To foster and enhance patient self-management, health care systems provide self-management support in-person or through telehealth, which includes, but is not limited to: guidance, education, collaborative goal setting, action planning, skill building, problem solving, and ongoing support.