



HEALTH AFFAIRS

THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, D. C. 20301-1200

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MEMORANDUM FOR ASSISTANT SECRETARY OF THE ARMY (M&RA)
ASSISTANT SECRETARY OF THE NAVY (M&RA)
ASSISTANT SECRETARY OF THE AIR FORCE (M&RA)
DIRECTOR OF THE JOINT STAFF

SUBJECT: Medical Surveillance Information Management Strategy for Force Health Protection

There are a variety of medical surveillance initiatives underway within the Office of the Secretary of Defense and in the Services. An integrated strategy is needed to ensure these initiatives are complementary and that they provide for the regular or repeated collection, analysis, and dissemination of uniform health information for monitoring the health of populations, and for intervening in a timely manner.

The goal of the DoD longitudinal medical surveillance program is to provide a capability to continuously monitor, assess and provide real-time reports regarding the health status of Service members (including National Guard and Reserve personnel during periods of active duty), from the time of their accession until the time of their separation or retirement from active duty. Comprehensive health surveillance includes: (1) individual longitudinal health and medical readiness monitoring; (2) epidemic outbreak detection; (3) deployment health and health hazards monitoring; (4) environmental and occupational health hazards assessments; (5) preventable disease and injury control monitoring; and (6) health care system evaluation and planning analysis.

This policy memorandum officially designates the following:

a. The Deputy Assistant Secretary of Defense for Force Health Protection and Readiness (DASD (FHP&R)), as the Chair of the Force Health Protection Council (FHPC), is the principal staff assistant and advisor to the Assistant Secretary of Defense for Health Affairs for comprehensive health surveillance for the Department of Defense (DoD).

b. The Force Health Protection Council will formulate and present recommendations regarding medical surveillance strategies to the DASD (FHP&R) to ensure a healthy and more effective force.

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c. The FHPC may charter individual work groups consisting of subject matter experts from the Services, the Joint Staff, and the Office of the Secretary of Defense to formulate medical surveillance functional requirements and information exchange requirements.

d. All DoD medical surveillance information management (IM) and information technology activities (IT) will be coordinated with the DASD (FHP&R) and the FHPC.

e. The DASD (FHP&R) and the FHPC will be responsible for developing and defending requests for Defense Health Program funding for joint medical surveillance capabilities to meet DoD senior management needs during peacetime and contingency scenarios. Senior management users include: (1) Office of the Secretary of Defense, (2) the Joint Staff, (3) Combatant Commanders, (4) Joint Task Force Commanders, and (5) the Services.

The Services are directed to support the joint medical solution and coordinate with DASD (FHP&R) to identify emerging health surveillance requirements to meet individual Service and DoD-level medical surveillance requirements. The DASD (FHP&R) is the recommending authority for all health surveillance initiatives.



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