



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, JOINT STAFF

SUBJECT: Policy for Department of Defense Deployment Health Quality Assurance Program

This memorandum establishes policy and provides program guidance for the Department of Defense (DoD) Deployment Health Quality Assurance (QA) Program. The program supports the Force Health Protection requirements associated with ongoing deployments and identified during reviews by the General Accounting Office.

Key elements of the DoD Deployment Health QA Program include reports on centralized pre- and post-deployment health assessments, reports on Service-specific deployment health QA programs, and visits to military installations to assess deployment health program compliance and effectiveness. Major findings and recommendations will be summarized in an annual report and coordinated through the Force Health Protection Council. Details are provided in the attached program policy guidance.

This policy is effective immediately and will be executed under the direction of the Deputy Assistant Secretary of Defense (Force Health Protection & Readiness).

Deployment health quality assurance activities—at both the DoD and Service levels—are critically important to meeting the health needs and addressing the health concerns of deployed personnel. Your collaboration and commitment are vital to their success. My point of contact in the Deployment Health Support Directorate is COL John Gardner at 703-578-8524 or [john.gardner@deploymenthealth.osd.mil](mailto:john.gardner@deploymenthealth.osd.mil).

  
William Winkenwerder, Jr., MD

Attachment:  
As stated

cc:  
Service Surgeons General  
Medical Officer of the Marine Corps  
Joint Staff Surgeon  
USD (Personnel & Readiness)  
ASD (Reserve Affairs)

HA POLICY: 04-001

## ATTACHMENT

### Department of Defense Deployment Health Quality Assurance Program

#### References:

- (a) Department of Defense Directive 6490.2, "Joint Medical Surveillance," August 30, 1997
- (b) Department of Defense Instruction 6490.3, "Implementation and Application of Joint Medical Surveillance for Deployments," August 7, 2003
- (c) Assistant Secretary of Defense (Health Affairs) Memorandum, "Policy for Pre- and Post-Deployment Health Assessments and Blood Samples," October 6, 1998
- (d) Assistant Secretary of Defense (Health Affairs) Memorandum, "Updated Policy for Pre- and Post-Deployment Health Assessments and Blood Samples," October 25, 2001
- (e) Joint Chief's of Staff Memorandum, "Updated Procedures for Deployment Health Surveillance and Readiness," February 1, 2002
- (f) Under Secretary of Defense (Personnel & Readiness) Memorandum, "Enhanced Post-Deployment Health Assessments," April 22, 2003
- (g) General Accounting Office Report, "Defense Health Care: Quality Assurance Process Needed to Improve Force Health Protection and Surveillance," September 19, 2003

References (a) through (f) detail current policies for protecting the health of deployed forces. Reference (g) identifies opportunities to improve force health protection and surveillance, and to ensure compliance with deployment health policies, through the establishment of a DoD deployment health quality assurance program.

The DoD Deployment Health Quality Assurance (QA) Program will be developed under the direction of the Deputy Assistant Secretary of Defense for Force Health Protection and Readiness, in conjunction with the Deployment Health Support Directorate, the military departments' medical offices, and the Joint Staff Health Service Support Division. Major findings and recommendations will be presented to the Force Health Protection Council.

Key elements of the DoD Deployment Health QA Program include the following:

1. Periodic reports on centralized pre- and post-deployment health assessments.
2. Periodic reports on Service-specific deployment health QA programs.
3. Periodic visits to military installations to assess deployment health programs.
4. An annual report on the DoD Deployment Health QA Program.

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## 1. Periodic Reports on Centralized Pre- and Post-Deployment Health Assessments.

References (c) through (f) direct that copies of Pre- Deployment Health Assessments (DD Form 2795), where applicable, and Post-Deployment Health Assessments (DD Form 2796), be forwarded to the Army Medical Surveillance Activity (AMSA) for centralized storage and inclusion in the Defense Medical Surveillance System (DMSS). AMSA will provide (at a minimum) monthly reports to the Deployment Health Support Directorate (DHSD) on deployment health assessment data. The reports should differentiate data by branch of service, active or reserve component, and specific deployment/military operation. Post-deployment health assessment data should include the following:

- Servicemember's general health status.
- Medical or dental problems developed during deployment.
- Medical profile or light duty status.
- Mental health treatment or concerns.
- Concerns about possible deployment exposures or events.
- General health issues or concerns.
- Post-deployment health referrals indicated.
- Follow-up medical visits accomplished.
- Post-deployment blood samples on file in DoD repository.
- Detailed medical, mental health, and exposure concerns.

Metrics (measures of success) will be jointly developed and updated by DHSD, AMSA, and the military medical departments, with emphasis on the most important outcomes that are capable of being measured and that have value at both the DoD and Service levels. The following are considered as initial baseline metrics for deployment health assessments:

- Identification of deployed/redeployed personnel (100%).
- Both pre- and post-deployment health assessments on file at AMSA (90%).
- Blood samples on file in DoD repository (100%).
- Post-deployment referrals accomplished (90%).

## 2. Periodic Reports on Service-Specific Deployment Health QA Programs.

Reference (f) directs the Services to establish quality assurance programs to ensure each redeploying servicemember receives a thorough post-deployment health assessment and related health care. The Services will provide (at a minimum) quarterly reports to the Deployment Health Support Directorate (DHSD) on the status and findings of their respective deployment health QA programs. While each Service will determine the scope and methodology of its deployment health QA program, including associated metrics, the following key elements should be addressed:

- Identification of deployed/redeployed personnel.

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- Accomplishment of applicable pre- and post-deployment health assessments and related requirements (e.g., immunizations, blood samples, referrals).
- Inclusion of deployment-related health documentation in permanent medical records.

### 3. Periodic Visits to Military Installations to Assess Deployment Health Programs.

Reference (a) specifies that ASD(HA) has the responsibility for monitoring implementation of DoD joint medical surveillance policy and the authority to evaluate Service compliance with deployment health assessment requirements. Visits to military installations will serve to complement and validate Service deployment health QA program reports. These visits will be planned, coordinated, and conducted jointly by staff members from DHSD and the Service's medical department. The specific timing, site selection, and scope will focus on maximizing utilization of staff resources while minimizing interruption of installation activities. At least four visits (a minimum of one per quarter) will be conducted each year.

While each visit may be tailored to address contemporary deployment health issues, and could parallel the procedures and metrics used by the General Accounting Office (GAO) in reference (g), the following key elements should be included:

- In-briefs and out-briefs with unit/medical command elements.
- Solicitation of feedback on DoD deployment health policies and programs.
- Procedures for identifying deploying/redeploying personnel.
- Accomplishment of pre- and post-deployment health assessments.
- Placement of deployment-related documentation in individual medical records.

### 4. Annual Report on the DoD Deployment Health QA Program

The DASD(FHP&R) will provide an annual report on the status of the DoD Deployment Health QA Program to the ASD(HA) not later than 15 February. The report will be prepared by DHSD, coordinated with the Services, and submitted through the Force Health Protection Council.