Department of Veterans Affairs
Veterans Health Administration
Washington, DC 20420

VHA DIRECTIVE 1445
Transmittal Sheet
October 13, 2023

WHOLE HEALTH SYSTEM

1. SUMMARY OF CONTENT: This new directive:

a. Establishes the Whole Health System (WHS) model of health care within the Veterans Health Administration (VHA) and outlines requirements and responsibilities for WHS implementation across Veterans Integrated Services Networks (VISNs) and Department of Veterans Affairs (VA) medical facilities in paragraphs 2 and 3.

b. Establishes full-time equivalent employees and associated responsibilities for the VISN Whole Health Coordinator, VA medical facility Whole Health Clinical Director, VA medical facility Whole Health Coordinator and VA medical facility Employee Whole Health Coordinator in paragraph 2.

c. Defines Employee Whole Health in paragraph 7.

2. RELATED ISSUES: VHA Directive 1137, Provision of Complementary and Integrative Health, dated December 13, 2022.

3. POLICY OWNER: The Office of Patient Centered Care and Cultural Transformation (12PCCCT) is responsible for the contents of this directive. Questions may be addressed to VHA12PCCCTPatientCenteredCareAction@va.gov.

4. RESCISSIONS: VHA Memorandum 2019-08-25, Advancing Whole Health Education – Network Education Coordinator Position (VIEWS #01367797), dated August 28, 2019; VHA Memorandum 2022-02-15, Phase 2 Site Identification for Whole Health Primary Care Mental Health Integration Effort (VIEWS #6647684), dated February 7, 2022; and VHA Memorandum 2022-08-25, Phase 2 Site Identification for Whole Health Primary Care Mental Health Integration Effort (VIEWS #8205609), dated August 24, 2022 are rescinded.

5. RECERTIFICATION: This VHA directive is scheduled for recertification on or before the last working day of October, 2028. This VHA directive will continue to serve as national VHA policy until it is recertified or rescinded.

6. IMPLEMENTATION SCHEDULE: VISNs and VA medical facilities must implement the minimum WHS implementation requirements outlined in this directive within 48 months of publication (by September 2027). ***NOTE:*** *The implementation date has been updated to September 2027 to allow for flexibility during VHA restructuring efforts. The implementation date was updated on September 4, 2026.*

BY DIRECTION OF THE OFFICE OF THE UNDER SECRETARY FOR HEALTH:

/s/ M. Christopher Saslo
DNS, ARNP-BC, FAANP
Assistant Under Secretary for Health
for Patient Care Services/CNO

NOTE: *All references herein to VA and VHA documents incorporate by reference subsequent VA and VHA documents on the same or similar subject matter.*

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WHOLE HEALTH SYSTEM

1. POLICY

It is Veterans Health Administration (VHA) policy that the Whole Health System (WHS) is integrated at all Department of Veterans Affairs (VA) medical facilities so that Veterans have access to a model of care that empowers and equips them to take charge of their health and well-being and to live their lives to the fullest. VHA is also committed to supporting employee well-being as integral to transforming to a WHS. ***NOTE:*** *For the purposes of this directive, Employee Whole Health refers only to employee well-being. Well-being in this directive refers to the social, economic, psychological or spiritual conditions that contribute to an individual's emotional and physical state. The Employee Whole Health Program does not have authority over the clinical health of employees, is not permitted to diagnose, manage, treat or provide clinical recommendations to employees nor does it provide functions performed by Workforce Management and Consulting.* **AUTHORITY:** 5 U.S.C. § 7901; 38 U.S.C. §§ 1710, 7301(b); 38 C.F.R. § 17.38.

2. RESPONSIBILITIES

a. **Under Secretary for Health.** The Under Secretary for Health is responsible for ensuring overall VHA compliance with this directive.

b. **Assistant Under Secretary for Health for Patient Care Services/Chief Nursing Officer.** The Assistant Under Secretary for Health for Patient Care Services/Chief Nursing Officer (CNO) is responsible for:

(1) Supporting the Office of Patient Centered Care and Cultural Transformation (OPCC&CT) with implementation and oversight of this directive.

(2) Communicating the contents of this directive to VHA program offices and supporting the integration of the WHS across all administrative and clinical service lines responsible for Veteran health care and experiences in VHA.

(3) Supporting the integration of the WHS into VHA initiatives and activities focused on employee well-being and the resilience of the workforce.

c. **Assistant Under Secretary for Health for Operations.** The Assistant Under Secretary for Health for Operations is responsible for:

(1) Communicating the contents of this directive to each of the Veterans Integrated Service Networks (VISNs).

(2) Assisting VISN Directors to resolve WHS implementation and compliance challenges in all VA medical facilities within that VISN.

(3) Providing oversight of VISNs to ensure compliance with this directive and its effectiveness.

d. **Executive Director, Office of Patient Centered Care and Cultural Transformation.** The Executive Director, OPCC&CT is responsible for:

(1) Providing oversight for VISN and VA medical facility implementation of this directive and ensuring action is taken when barriers to implementation are identified through consultation; site visits; monitoring of reports generated from the Whole Health Dashboard; and analyses of WHS Self-Assessment Tool data, which must occur twice a year. See paragraph 7.e. for additional information on the WHS Self-Assessment Tool. ***NOTE:*** *The Whole Health Dashboard tracks a variety of activity in Whole Health and the cultural changes taking place to support the delivery of proactive care. This information includes, but is not limited to, Whole Health referral requests, Whole Health encounters in telehealth and in Mental Health. The Whole Health Dashboard is available at: https://dvagov.sharepoint.com/sites/VHAOPCC/sitePages/Whole-health-dashboards.aspx.This is an internal VA website that is not available to the public.*

(2) Identifying and driving critical strategies to advance WHS implementation across VHA.

(3) Providing Whole Health consultation, guidance, technical assistance, site visits, implementation resources and data review (e.g., Whole Health Dashboard data, Veteran and employee experience data, clinical and administrative data provided by research partners) to VHA program offices, VISNs and VA medical facilities.

(4) Overseeing OPCC&CT collaboration with appropriate stakeholders (e.g., VISNs, VA medical facilities, contractors, OPCC&CT education team, Veterans) in the creation and development of education and training resources for WHS implementation. ***NOTE:*** *This includes, but is not limited to, development of materials for Introduction to Whole Health and Taking Charge of My Life and Health sessions. See paragraph 3.c. for additional information.*

e. **Veterans Integrated Service Network Director.** The VISN Director is responsible for:

(1) Ensuring that all VA medical facilities within the VISN comply with this directive and informing leadership when barriers to compliance are identified.

(2) Overseeing the development of the VISN WHS implementation strategy and collaborating with the VISN Whole Health Coordinator and OPCC&CT staff.

(3) Identifying a member of the VISN leadership team as an executive sponsor to advocate for change toward a culture rooted in Whole Health principles, building coalitions to facilitate WHS implementation and incorporating Whole Health in appropriate communications across the organization.

(4) Ensuring the VISN establishes and maintains a Whole Health governance body that reports to the VISN Director or other executive-level VISN leadership. ***NOTE:*** *The VISN Director must determine if the VISN Whole Health governance body will be a stand-alone Whole Health governance entity or be integrated into an existing entity. If a*

separate Whole Health governance body is established, it must be chaired by a core Whole Health Leader; see paragraph 3.c. for core Whole Health leadership positions.

(5) Establishing mechanisms for VISN and VA medical facility Whole Health governance and Whole Health leadership to be directly aligned with VISN governance, the Designation Framework for Whole Health Implementation (further referred to as the Designation Framework) and WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.* For details on implementation requirements, see paragraph 3.

(6) Identifying or hiring a VISN Whole Health Coordinator in alignment with minimum WHS implementation requirements outlined in paragraph 3.

(7) Communicating an expectation that VISN leadership and staff complete recommended Whole Health education and training as outlined in the Whole Health Training for Staff section of the Operations Domain in the WHS Implementation Guide and The Whole Health Education Hub in support of the Accomplishments sections in the Governance and Operations Domains in the Designation Framework, available at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

(8) Collaborating with the VISN CMO, VISN CNO (and other VISN leadership, as appropriate) and the VISN Whole Health Coordinator to develop a strategy for WHS implementation for the VISN and VA medical facilities in alignment with the Designation Framework and WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.* Minimum implementation requirements are outlined in paragraph 3.

f. **Veterans Integrated Service Network Chief Medical Officer and Chief Nursing Officer.** The VISN CMO and VISN CNO are responsible for:

(1) Overseeing VISN-wide strategies to integrate the WHS into all clinical disciplines and align it with related program office initiatives. For details on minimum implementation requirements, see paragraph 3.

(2) Ensuring that the integration of the WHS into clinical disciplines includes primary care and mental health and expands to other disciplines as the VISN and VA medical facilities implement, spread and sustain Whole Health clinical care as outlined in the Whole Health Clinical Care Domain in the Designation Framework and further defined in the WHS Implementation Guide Whole Health Clinical Domain at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.*

(3) Collaborating with the VISN director (and other VISN leadership, as appropriate), and the VISN Whole Health Coordinator to develop a strategy for WHS implementation for the VISN and VA medical facilities in alignment with the Designation Framework and WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.* Minimum implementation requirements are outlined in paragraph 3.

g. **Veterans Integrated Service Network Whole Health Coordinator.** ***NOTE:*** *The VISN Whole Health Coordinator may also be referred to as Whole Health Manager or the VISN Network Sponsor.* The VISN Whole Health Coordinator is responsible for:

(1) Collaborating with VISN director, CMO and CNO (and other VISN leadership, as appropriate) to develop a strategy for WHS implementation for the VISN and VA medical facilities in alignment with the Designation Framework and WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.* Minimum implementation requirements are outlined in paragraph 3.

(2) Participating in the VISN Whole Health governance body providing oversight for Whole Health with direct line of authority to the VISN Governance Board.

(3) Overseeing WHS implementation at all VA medical facilities within the VISN to ensure adherence with the VISN WHS implementation strategy through consultation, site visits, reports generated from the Whole Health Dashboard and analysis of WHS Self-Assessment Tool data. See paragraph 3 for minimum implementation requirements and paragraph 8 for additional information regarding the WHS Self-Assessment Tool. Additional information is available in the Designation Framework and WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

(4) Notifying the Executive Director, OPCC&CT of changes in VISN Whole Health staffing, including but not limited to, Network Education Coordinator and Network Education Faculty and updating the Whole Health Point of Contact (POC) national list(s) as necessary. ***NOTE:*** *The Whole Health POC national list is available at: https://dvagov.sharepoint.com/sites/VHAOPCC/SitePages/Points-of-Contact.aspx. This is an internal VA website that is not available to the public.*

h. **VA Medical Facility Director.** The VA medical facility Director is responsible for:

(1) Ensuring overall VA medical facility compliance with the directive and appropriate corrective action is taken if non-compliance is identified.

(2) Ensuring resources, such as adequate staffing and personnel, are available for implementation of minimum WHS requirements at the VA medical facility as outlined in paragraph 3.

(3) Identifying a member of the VA medical facility leadership team as the Whole Health executive sponsor and ensuring the executive sponsor advocates for change toward a culture rooted in Whole Health principles, builds coalitions to facilitate WHS implementation that reflects integration across service lines and incorporates Whole Health in appropriate messaging and communications across the VA medical facility.

(4) Ensuring the VA medical facility establishes and maintains a Whole Health governance body and an Employee Whole Health governance body that report to VA medical facility Director or other member of the VA medical facility executive leadership team. ***NOTE:*** *The VA medical facility Director must determine if the VA medical facility Whole Health governance body will be a stand-alone Whole Health governance entity or be integrated into an existing entity (e.g., Organizational Health Committee). If a separate Whole Health governance body is established, it must be chaired by a core Whole Health Leader. The VA medical facility Director must also make this determination for the VA medical facility Employee Whole Health governance body established by the VA medical facility Employee Whole Health Coordinator as outlined in paragraph 2.m.*

(5) Ensuring that WHS implementation is a priority in the VA medical facility strategic plan, new or revised SOPs and hiring activities, and that VA medical facility WHS implementation plans address all WHS components as outlined in the Designation Framework and WHS Implementation Guide located at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.*

(6) Overseeing VA medical facility WHS implementation in alignment with the Designation Framework and ensuring the minimum VA medical facility expectations for WHS implementation are achieved within the required timeframes as outlined in paragraph 3. ***NOTE:*** *The Designation Framework is located at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. This is an internal VA website that is not available to the public.*

(7) Communicating an expectation that VA medical facility leadership and staff complete recommended Whole Health education and training as outlined in the Operations Domain, Whole Health Training for Staff, of the WHS Implementation Guide and The Whole Health Education Hub in support of the Accomplishments sections in the Governance and Operations Domains in the Designation Framework, available at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.*

i. **VA Medical Facility Chief of Staff/VA Medical Facility Associate Director for Patient Care Services.** The VA medical facility Chief of Staff (CoS)/VA medical facility Associate Director for Patient Care Services (ADPCS), are responsible for:

(1) Building coalitions amongst clinical leadership to facilitate WHS implementation into clinical practice that reflects integration across service lines and incorporates Whole Health in appropriate clinical messaging and communications across the VA medical facility.

(2) Facilitating WHS integration into all clinical disciplines in alignment with the Designation Framework and WHS Implementation Guide located at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.*

(3) Ensuring dedicated time for a VA medical facility Whole Health Clinical Director in alignment with WHS minimum implementation requirements outlined in paragraph 3.

(4) Collaborating with the VA medical facility Employee Whole Health Coordinator to provide opportunities for employee well-being to staff at the VA medical facility.

j. **VA Medical Facility Chief Financial Officer.** The VA medical facility Chief Financial Officer is responsible for collaborating with the VA medical facility core Whole Health leadership (e.g., Whole Health Coordinator, Whole Health Clinical Director, Employee Whole Health Coordinator) for WHS implementation. This includes, but is not limited to, ensuring that WHS implementation needs are incorporated into the VA medical facility budget and developing resource plans.

k. **VA Medical Facility Whole Health Coordinator.** ***NOTE:*** *The VA medical facility Whole Health Coordinator may have previously been referred to as the Whole Health Manager or Sponsor.* The VA medical facility Whole Health Coordinator is responsible for:

(1) Developing and overseeing WHS implementation plans and coordinating related activities in alignment with the Designation Framework and further defined in the WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.* Minimum implementation requirements are outlined in paragraph 3.

(2) Sharing evidence-based, best and promising practices on Whole Health across the VA medical facility (e.g., actively participating in Whole Health Community of Practice forums).

(3) Participating in the VA medical facility Whole Health governance body.

(4) Collaborating with the VA medical facility Whole Health Clinical Director and VA medical facility Employee Whole Health Coordinator on related activities in alignment with the Designation Framework and further defined in the WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.* For details on implementation requirements, see paragraph 3.

(5) Completing WHS Self-Assessments to report on implementation progress and allow for monitoring by OPCC&CT, at minimum twice a year, using the WHS Self-Assessment Tool available at: https://vaww.whsassessmenttool.va.gov/login/. ***NOTE:*** *This is an internal VA website that is not available to the public. A username and password are required to access the WHS Self-Assessment Tool.*

(6) Tracking and analyzing data from the Whole Health Dashboard, as needed, to identify priority areas and opportunities for improvement for Whole Health at the VA medical facility. ***NOTE:*** *The Whole Health Dashboard tracks a variety of activity in Whole Health and the cultural changes taking place to support the delivery of proactive care. This information includes, but is not limited to, Whole Health referral requests, Whole Health encounters in telehealth and in mental health. The Whole Health Dashboard is available at: https://dvagov.sharepoint.com/sites/VHAOPCC/sitePages/Whole-health-dashboards.aspx.This is an internal VA website that is not available to the public.*

(7) Notifying the Executive Director, OPCC&CT of changes in Whole Health staffing at the VA medical facility, including but not limited to, core Whole Health Leadership and education coordinators and updating the VA medical facility Whole Health POC list(s) as necessary. ***NOTE:*** *The VA medical facility Whole Health Coordinator may serve as the Whole Health POC or designate another individual to perform this role. The Whole Health POC helps Veterans and VA medical facility staff connect to the appropriate Whole Health resources. The Whole Health POC national list maintained by OPCC&CT is available at: https://dvagov.sharepoint.com/sites/VHAOPCC/SitePages/Points-of-Contact.aspx. This is an internal VA website that is not available to the public.*

l. **VA Medical Facility Whole Health Clinical Director.** The VA medical facility Whole Health Clinical Director is responsible for:

(1) Ensuring Veteran access to Whole Health services in alignment with the Whole Health Clinical Care Domain of the Designation Framework, the Whole Health Clinical Domain of the WHS Implementation Guide and paragraph 3 of this directive. ***NOTE:*** *The Designation Framework and WHS Implementation Guide are located at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. This is an internal VA website that is not available to the public.*

(2) Ensuring clinical staff are aware of VA medical facility processes (e.g., consults) to access available Whole Health services.

(3) Participating in relevant clinical councils and governance bodies (e.g., Patient Aligned Care Teams and Mental Health) to ensure the integration of Whole Health in clinical disciplines at the VA medical facility.

(4) Developing and executing a change management strategy in collaboration with VA medical facility Whole Health leadership to support the clinical staff with the integration of Whole Health into clinical practice.

(5) Coordinating with the VA medical facility Whole Health Coordinator and the VA medical facility Employee Whole Health Coordinator on related activities in alignment with the Designation Framework and further defined in the WHS Implementation Guide located at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.* For details on implementation requirements, see paragraph 3.

(6) Ensuring all patient safety events that occur in Whole Health programming are submitted into VA's Joint Patient Safety Reporting System (JPSR).

m. **VA Medical Facility Employee Whole Health Coordinator.** ***NOTE:*** *The VA medical facility Employee Whole Health Coordinator has only the authority to work with employee well-being and does not have the authority to diagnose, manage, treat or provide clinical recommendations to employees. Well-being in this directive refers to the social, economic, psychological or spiritual conditions that contribute to an individual's emotional and physical state.* The VA medical facility Employee Whole Health Coordinator is responsible for:

(1) Developing Employee Whole Health implementation plans and coordinating with the VA medical facility Whole Health Coordinator and the VA medical facility Whole Health Clinical Director on related activities in alignment with the Designation Framework and further defined in the WHS Implementation Guide located at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.* Minimum implementation requirements are outlined in paragraph 3.

(2) Collaborating with the VA medical facility Director, CoS and ADPCS to provide opportunities for employee well-being to VA medical facility staff.

(3) Assembling a VA medical facility Employee Whole Health governance body to assist in planning and implementing educational opportunities, well-being activities and programs for employees. ***NOTE:*** *The Employee Whole Health Coordinator must, at minimum, participate as a voting member of the VA medical facility Whole Health governance body.*

(4) Managing the VA medical facility Employee Whole Health Program in alignment with the Employee Whole Health Domain in the Designation Framework, which is further defined in the WHS Implementation Guide, and national guidance such as recommendations from Reducing Employee Burnout and Optimizing Organizational Thriving (REBOOT) Task Force, available at https://vaww.insider.va.gov/reducing-employee-burnout/. ***NOTE:*** *The Designation Framework and WHS Implementation Guide are located at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. This is an internal VA website that is not available to the public.*

(5) Addressing overall well-being issues for VA medical facility employees including

but not limited to nutritional, mental, emotional, social, physical and environmental well-being. ***NOTE:*** *The VA medical facility Employee Whole Health Coordinator only has the authority to work with employee well-being and does not have the authority to diagnose, manage, treat or provide clinical recommendations to employees.*

n. **VA Medical Facility Health and Wellness Coach.** ***NOTE:*** *VA medical facilities can provide health and wellness coaching on site, virtually or through inter-facility collaborations.* The VA medical facility Health and Wellness Coach is responsible for:

(1) Supporting Veterans in mobilizing internal strengths and external resources to develop strategies for making sustainable, healthy lifestyle behavior changes and more effectively managing chronic disease. This support must include providing guidance and offering resources to Veterans from nationally recognized authorities.

(2) Working in close collaboration with interdisciplinary clinical and non-clinical staff and teams throughout the VA medical facility on a Veteran-centered process to facilitate and empower Veterans to develop and achieve self-determined goals related to health and well-being.

(3) Following OPCC&CT guidance and VHA policy relevant to health and wellness coaching.

o. **VA Medical Facility Whole Health Partner.** ***NOTE:*** *VA medical facilities can provide Whole Health Partner services on site, virtually or through inter-facility collaborations.* The VA medical facility Whole Health Partner is responsible for:

(1) Informing Veterans of available Whole Health services and recruiting Veterans to participate in Whole Health initiatives at the VA medical facility relevant to their Mission, Aspiration and Purpose (MAP) as they develop an individualized Personal Health Plan (PHP). ***NOTE:*** *PHPs are an essential activity for Veterans engaged in The Pathway component of WHS and often serve as the first step of engagement in The Pathway component. Additional information is available in the WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. This is an internal VA website that is not available to the public.*

(2) Connecting Veterans to VA medical facility and community Whole Health resources.

(3) Facilitating individual and group sessions (in person, telephonically or via telehealth) for Veterans to learn about the Whole Health approach and engage in the PHP process. ***NOTE:*** *This includes but is not limited to Introduction to Whole Health and Taking Charge of My Life and Health sessions. See paragraph 3.c. for additional information.*

3. IMPLEMENTING THE WHOLE HEALTH SYSTEM

a. VA's shift to a WHS of care must be enterprise-wide, and it is expected that full transformation will take several years. In addition, VISN Whole Health infrastructure described in the WHS Implementation Guide and Designation Framework is necessary to provide coordination, resources and accountability across the VISN for successful implementation and sustainment of the WHS in VA medical facilities.

b. All VISNs must complete the following minimum requirements of WHS implementation within 18 months of publication of this directive:

(1) At least one member of the VISN executive leadership team must be assigned to the role of executive sponsor.

(2) WHS implementation must be communicated as a priority, documented in the VISN strategic plan and visible in new or revised standard operating procedures (SOP) and hiring activities.

(3) Staff must be hired, or existing staff must be transitioned, into the VISN Whole Health Coordinator role (1.0 full-time equivalent (FTE) employee).

(4) There must be dedicated VISN staff time ($\geq$ 0.2 FTE per individual VISN staff member) to support development and execution of coordinated VISN Whole Health education and training. This includes, but is not limited to:

(a) Network Education Coordinator.

(b) Network Education Faculty.

c. Phased transformation to a WHS for VA medical facilities is outlined in the Designation Framework and further described in the WHS Implementation Guide. The following accomplishments are aligned with the Preparation and Foundational Phases of the Designation Framework and must be implemented at all VA medical facilities within 18 months of publication of this directive:

(1) The VA medical facility must assign at least one member of the executive leadership team to be the VA medical facility Whole Health executive sponsor; see paragraph 2.h.

(2) The VA medical facility must include WHS implementation as a priority in their strategic plan, in new or revised SOPs and hiring activities; see paragraph 2.h.

(3) The VA medical facility must establish a Whole Health governance body to provide oversight for WHS implementation activities and accountability for sustained change, quality outcomes and engaged leadership. Each VA medical facility must determine if it will incorporate Whole Health oversight into an existing committee or establish a separate Whole Health Committee; additional guidance is provided in the

WHS Implementation Guide. Should a separate Whole Health committee be established, it must be chaired by a core Whole Health Leader.

(4) Staff must be hired, or existing staff must be transitioned, into the following core Whole Health leadership positions at every VA medical facility:

(a) Whole Health Coordinator (1.0 FTE or ≥ 0.5 FTE for VA medical facilities classified as Level 3-lower complexity by VHA's Office of Productivity, Efficiency, and Staffing. ***NOTE:*** *Additional information on VA medical facility complexity models is available at: see https://dvagov.sharepoint.com/sites/VHAOPES/SitePages/Facility-Complexity-Model-and-Patient-Level-Risk-Adjustment-Models.aspx. This is an internal VA website that is not available to the public*.

(b) Whole Health Clinical Director (≥0.5 FTE).

(c) Employee Whole Health Coordinator (≥0.5 FTE).

(5) Staff must be identified as or hired into the following key roles commensurate with the VA medical facility's Whole Health scope and strategy for Whole Health implementation to support required Whole Health services as outlined in paragraph 3.c.(6) below.

(a) Whole Health Partner.

(b) Health and Wellness Coach(es).

(c) Complementary and Integrative Health (CIH) providers in accordance with VHA Directive 1137, Provision of Complementary and Integrative Health, dated December 13, 2022. ***NOTE:*** *CIH approaches available to Veterans through VHA are outlined in VHA Directive 1137.*

(6) The following services must be provided for all Veterans as part of WHS implementation. Additional information and implementation resources for these services are available in the Designation Framework and WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

(a) Introduction to Whole Health session. ***NOTE:*** *Introduction to Whole Health session(s) are developed by OPCC&CT; however, delivery can be customized at the VA medical facility based on local resources. Introduction to Whole Health materials are available at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Pathway.aspx. This is an internal VA website that is not available to the public*.

(b) Taking Charge of My Life and Health session(s). ***NOTE:*** *Taking Charge of My Life and Health session(s) are developed by OPCC&CT; however, delivery can be customized at the VA medical facility based on local resources. Taking Charge of My*

Life and Health materials are available at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Pathway.aspx. This is an internal VA website that is not available to the public.

(c) Well-Being programs.

(d) Health and Wellness coaching.

(e) CIH approaches in accordance with VHA Directive 1137.

(7) The following Employee Whole Health initiatives must be established at all VA medical facilities as part of WHS implementation. ***NOTE:*** *The VA medical facility Employee Whole Health Coordinator oversees Employee Whole Health implementation as outlined in paragraph 2.m. Additional information and implementation resources for these services are available in the Designation Framework and WHS Implementation Guide at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx.* ***NOTE:*** *This is an internal VA website that is not available to the public. For the purposes of this directive, Employee Whole Health refers only to employee well-being. Well-being in this directive refers to the social, economic, psychological or spiritual conditions that contribute to an individual's emotional and physical state. The Employee Whole Health Program does not have authority over the clinical health of employees, is not permitted to diagnose, manage, treat or provide clinical recommendations to employees, nor does it provide functions performed by Workforce Management and Consulting.*

(a) Employee Whole Health services that support employee well-being initiatives and help employees live their best lives in alignment with what matters most to the individual.

(b) A VA medical facility Employee Whole Health governance body (e.g., Employee Whole Health Committee). Employee Whole Health Coordinators should, at minimum, be a voting member of this governance body, which is multi-disciplinary and collaborative with other key stakeholders to address employee well-being for the VA medical facility. Example charters are available at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/Employee_WH_Domain/Forms/AllItems.aspx?id=%2Fsites%2FVHAOPCC%2FWH%2DImplementation%2FEmployee%5FWH%5FDomain%2FCharters%5FEWH&viewid=06077045%2Ddbf7%2D4e20%2Db288%2D0ef80be938f2. ***NOTE:*** *This is an internal VA website that is not available to the public*.

(c) Employee access to required Whole Health training as outlined in paragraph 4 and additional learning experiences accessible through the Whole Health Hub, available at: https://dvagov.sharepoint.com/sites/VHAOPCC/SitePages/Index.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

4. TRAINING

OPCC&CT developed Whole Health education and training materials that are recommended for completion by VISN and VA medical facility leadership and staff. See paragraphs 2.e. and 2.h. in this directive for additional information and website links.

5. RECORDS MANAGEMENT

All records regardless of format (e.g., paper, electronic, electronic systems) created by this directive must be managed as required by the National Archives and Records Administration (NARA) approved records schedules found in VHA Records Control Schedule 10-1. Questions regarding any aspect of records management should be addressed to the appropriate Records Officer.

6. BACKGROUND

a. OPCC&CT was established in January 2011 to develop a Whole Health model of care to transform the system of health care provided at VA from the conventional medical model to one which is personalized, proactive and person-centered. Whole Health combines conventional health care and preventative care with PHPs, emphasizing Veteran activation and engagement, CIH approaches and education for self-care and self-management.

b. OPCC&CT formalized the WHS in 2016; in 2018, OPCC&CT partnered with VISNs to launch a 3-year pilot to integrate Whole Health, Primary Care and Mental Health beginning with 18 flagship sites in Phase 1, expanding to 36 additional sites in Phase 2 and all sites in Phase 3 in response to requirements outlined in the Comprehensive Addiction Recovery Act, P.L. 114-198 § 933. VISNs conducted a formal evaluation and research study to assess the impact of WHS implementation on Veteran health and well-being (see Executive Decision Memo (EDM): Engaging Veterans in Lifelong Health, Well-being and Resilience Integrated Project Team, issued through the VHA Governance Board).

c. VA modernization efforts and response to P.L. § 115-182, MISSION Act, identified Whole Health, including employee well-being, as a key lane of effort to ensure Veterans receive personalized and patient-centered care. Employee well-being was identified as a foundational element to deliver personalized, whole health care to Veterans.

d. In 2021, VHA Modernization: Continuing the Journey 2021, Transforming Health Care Delivery Report's section on Whole Health, available at: https://dvagov.sharepoint.com/sites/VHAANC/QM/SR/SitePages/System-Redesign-and-Improvement.aspx established VHA's plan to implement the Employee Whole Health Program at all VA medical facilities to focus on employee well-being in alignment with REBOOT recommendations. In 2022, VHA's REBOOT Task Force formalized an employee well-being priority to address employee mental health (e.g., fatigue, stress, low morale) and promote work-life integration through a Whole Health approach. ***NOTE:*** *VHA Modernization: Continuing the Journey 2021, Transforming Health Care Delivery Report is available at:*

https://dvagov.sharepoint.com/sites/VHAANC/QM/SR/SitePages/System-Redesign-and-Improvement.aspx; REBOOT recommendations are located at: https://vaww.insider.va.gov/reducing-employee-burnout/. These are internal VA websites that are not available to the public.

e. OPCC&CT created the following resources to assist VISNs and VA medical facilities in the implementation of Whole Health and Employee Whole Health Programs:

(1) The Designation Framework for Whole Health Implementation (the Designation Framework) describes the future state of WHS implementation at VHA and Veteran perspective once WHS is implemented. The Designation Framework outlines the seven domains within WHS implementation (Governance, Operations, Pathway, Well-being Program, Whole Health Clinical Care, Employee Whole Health and Community Partnerships), describes the desired outcomes along four phases of implementation (Preparation, Foundational, Developmental and Full) within each domain and associated key milestone accomplishments with each phase of implementation. The goal of the Designation Framework is to provide VISNs and VA medical facilities with the latitude and flexibility to operationalize processes and practices towards each accomplishment, encouraging exploration of local considerations and creative paths. The Designation Framework is available at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

(2) The WHS Implementation Guide is a resource to help VA medical facilities determine how to implement Whole Health practices by providing information, context and guidance surrounding WHS implementation and examples of how accomplishments within each domain and phase of implementation can be met. The WHS Implementation Guide is at: https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/Home.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

f. The Whole Health Advisory Committee (WHAC) was established in 2022 and reports to the Health Care Delivery Council. The purpose of the WHAC is to advise the Executive Director, OPCC&CT on strategic and tactical directions and progress of enterprise-wide WHS development, implementation, evaluation and sustainment activities. The WHAC charter is located at https://dvagov.sharepoint.com/sites/VHAGovBoard/HDC/WH/Pages/default.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

g. Whole Health for Veterans and employees is identified in the 2022-2028 VA Strategic Plan, available at: https://www.va.gov/performance/ and VHA Long Range Plan Framework Fiscal Year (FY) 2002-2025, available at: https://www.va.gov/VHAStrategy/. Whole Health is also communicated as one of the Under Secretary for Health's six priorities for FY 2023; see https://www.va.gov/health/priorities/index.asp.

7. DEFINITIONS

a. **Employee Whole Health.** Employee Whole Health is a health care model that is protective against the stressors and challenges employees face in their day-to-day lives and supports the goal of professional fulfillment and joy in work. ***NOTE:*** *Employee Whole Health refers only to employee well-being. Well-being in this directive refers to the social, economic, psychological or spiritual or conditions that contribute to an individual's emotional and physical state. The Employee Whole Health Program does not have authority over the clinical health of employees, is not permitted to diagnose, manage, treat or provide clinical recommendations to employees nor does it provide functions performed by Workforce Management and Consulting.*

b. **Whole Health.** Whole Health is an approach to health care that empowers and equips people to take charge of their health and well-being and to live their lives to the fullest. The Whole Health approach to care intends to support Veterans through and following transition from military to civilian life and VHA employees through their employment journey.

c. **Health and Wellness Coaching.** Health and Wellness coaching is a person-centered process facilitated by a Health and Wellness Coach to empower individuals to develop and achieve self-determined goals related to health and well-being by mobilizing internal strengths and external resources to develop strategies for making sustainable, healthy lifestyle behavior changes and more effectively managing chronic disease.

d. **Whole Health System.** The WHS is a health care model that includes conventional treatment and also focuses on self-empowerment, self-healing and self-care. The WHS model includes three central components: (1) The Pathway; (2) Well-Being Programs and (3) Whole Health Clinical Care.

e. **Whole Health System Self-Assessment Tool.** The WHS Self-Assessment Tool is a structured, interactive tool for VA medical facilities to track and report on local Whole Health implementation efforts. The WHS Self-Assessment tool provides a list of WHS implementation milestones and accomplishments; data from the WHS Self-Assessment Tool can be used by VA medical facilities to track progress toward Full implementation of the WHS.

8. REFERENCES

a. P.L. 114-198; 115-182.

b. 5 U.S.C. § 7901.

c. 38 U.S.C. §§ 1710, 7301(b).

d. 38 C.F.R. § 17.38.

e. VHA Directive 1137, Provision of Complementary and Integrative Health, dated

December 13, 2022.

f. Executive Decision Memo (EDM), Engaging Veterans in Lifelong Health, Well-being and Resilience IPT, dated March 4, 2020. https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation/SitePages/WH_Integration_MH_PC.aspx#background-and-purpose. ***NOTE:*** *This is an internal VA website that is not available to the public*.

g. VA Insider – Reducing Employee Burnout REBOOT Recommendations. https://vaww.insider.va.gov/reducing-employee-burnout/. ***NOTE:*** *This is an internal VA website that is not available to the public*.

h. VA Strategic Plan 2022-2028. https://www.va.gov/performance/.

i. VHA Health Care Priorities. https://www.va.gov/health/priorities/index.asp.

j. VHA FY 2022-2025 Long Range Plan Framework. https://www.va.gov/VHAStrategy/.

k. VHA Modernization: Continuing the Journey 2021, Transforming Health Care Delivery. https://dvagov.sharepoint.com/sites/VHAANC/QM/SR/SitePages/System-Redesign-and-Improvement.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

l. VHA Office of Productivity, Efficiency, and Staffing Complexity and Risk Models. https://dvagov.sharepoint.com/sites/VHAOPES/SitePages/Facility-Complexity-Model-and-Patient-Level-Risk-Adjustment-Models.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

m. VHA OPCC&CT Whole Health Implementation SharePoint page and related content (Designation Framework for Whole Health Implementation, WHS Implementation Guide, Whole Health Hub, Whole Health Dashboard and WHS Tracking and Coding). https://dvagov.sharepoint.com/sites/VHAOPCC/WH-Implementation. ***NOTE:*** *This is an internal VA website that is not available to the public*.

n. VHA OPCC&CT Whole Health System of Care Progress Report on Outcomes of the WHS Pilot at 18 Flagship Sites. https://www.va.gov/WHOLEHEALTH/docs/EPCC_WHSevaluation_FinalReport_508.pdf . ***NOTE:*** *This is an internal VA website that is not available to the public.*

o. Whole Health Advisory Committee Charter. https://dvagov.sharepoint.com/sites/VHAGovBoard/HDC/WH/Pages/default.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public*.

p. Whole Health POC national list. https://dvagov.sharepoint.com/sites/VHAOPCC/SitePages/Points-of-Contact.aspx. ***NOTE:*** *This is an internal VA website that is not available to the public.*

q. WHS Self-Assessment Tool. https://vaww.whsassessmenttool.va.gov/login/.
NOTE: *This is an internal VA website that is not available to the public. A username and password are required to access the WHS Self-Assessment Tool.*