



**JTF CapMed**  
**Integrated Delivery System Update**

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### JTF CapMed Missions

- Oversee the NCR Medical BRAC execution
- Establish an integrated healthcare delivery system anchored by two world-class treatment facilities - Walter Reed National Military Medical Center and Fort Belvoir Community Hospital
- Responsible for healthcare delivery
  - Readiness
  - Experience of Care
  - Population Health
  - Per Capita Cost



## BRAC Summary

- **BRAC consolidated four NCR inpatient hospitals into two**
  - Most complex and largest Base Realignment and Closure project in the history of the Department of Defense
  - Combined projects for the Walter Reed National Military Medical Center and Fort Belvoir Community Hospital
    - \$2.8 billion in construction and outfitting of over 3 million square feet of new and renovated medical and administrative space
    - Consolidation of over 4,400 civilian personnel
    - Relocation of 224 Wounded Warriors and their families
    - Migration of 9,600 medical staff



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## BRAC Hospital Projects

### Walter Reed National Military Medical Center



### Fort Belvoir Community Hospital



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## BRAC Hospital Projects (cont.)

Infrastructure Capability/Capacity	FBCH	WRNMMC
Total New Square Feet	1,515,000	1,103,000
Total Renovated Square Feet	0	472,000
Increased Parking Spaces	3,500	2,693
Increased Wounded Warrior Lodging	288	306
Hospital Outfitting		
<ul style="list-style-type: none"> <li>• Consolidated initial outfitting and transition contract for two Service Hospitals               <ul style="list-style-type: none"> <li>– Achieved bid saving of <u>\$77M</u> against independent government cost estimate</li> <li>– Estimate 9.5% (\$32M) savings in the execution of <u>\$341M</u> General Dynamics Initial Outfitting &amp; Transition Contract</li> </ul> </li> <li>• Re-used <u>10,781</u> equipment items resulting in cost avoidance of <u>\$114M</u></li> <li>• Procured <u>158,250</u> medical and non-medical items (including new medical technologies)</li> <li>• Issued 46 Authorizations to Proceed which increased quantity of outfitting items from 101,492 to 158,250 items</li> </ul>		



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## BRAC Hospital Projects (cont.)

Patient Reassignment and Appointing
<ul style="list-style-type: none"> <li>• Reassigned 34,206 enrollees from WRAMC to NCR MTFs (accommodated all patient preferences)</li> <li>• Established single appointing phone number for Integrated Referral Management and Appointing Center for all WRNMMC &amp; FBCH enrollees</li> </ul>
Transition and Relocation
<ul style="list-style-type: none"> <li>• <u>5,748</u> Staff received orientation training</li> <li>• <u>5,474</u> Staff trained on new equipment</li> <li>• <u>2,153</u> Staff attended 5 Day in the Life Training Exercises</li> <li>• <u>160</u> Clinical Services relocated</li> <li>• <u>750,000</u> cubic feet of materiel relocated</li> <li>• <u>168</u> Inpatients moved (Including internal NNMC, WRAMC to NNMC, DACH to FBCH moves)</li> <li>• <u>224</u> Outpatient Wounded Warriors moved to Fort Belvoir or NSA Bethesda</li> </ul>



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## BRAC Hospital Projects (cont.)

### Manpower and Personnel

- Successfully implemented Guaranteed Placement Program for 2,300 WRAMC employees without displacing any of the 1,930 NNMC or DACH employees
- Successful conversion of 4,410 Service civilians to DoD
- Developed Manpower Documents and Workforce Mapping migration for 9,618 employees
- Created 4,446 movement orders for personnel in transition

### IM/IT

Executed \$19.3M installation of an Integrated Healthcare Data Network (JMED) which provides a common desktop and a standardized suite of IT tools for providers across the NCR. Improves visibility of patient information (patient data, radiology images, and email). Reduces sustainment costs throughout all NCR medical facilities.

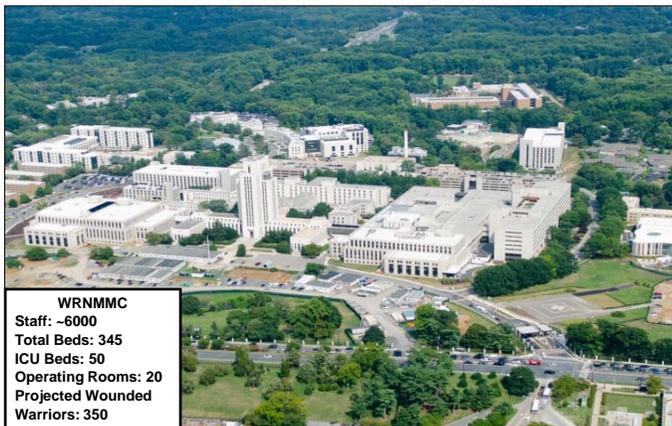


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## Walter Reed National Military Medical Center

### New WRNMMC Capabilities

- Vision Centers of Excellence
- National Intrepid Center of Excellence
- Level 2B Nursery
- Level 2 Trauma Care
- Consolidated Cancer Center
- Military Advanced Training Center
- Gynecological Oncology
- Prostate Oncology
- Breast Cancer Center
- Medical Oncology
- Surgical Oncology
- Comprehensive Warrior Transition Support Services
- Joint Pathology Center



**WRNMMC**  
**Staff: -6000**  
**Total Beds: 345**  
**ICU Beds: 50**  
**Operating Rooms: 20**  
**Projected Wounded Warriors: 350**

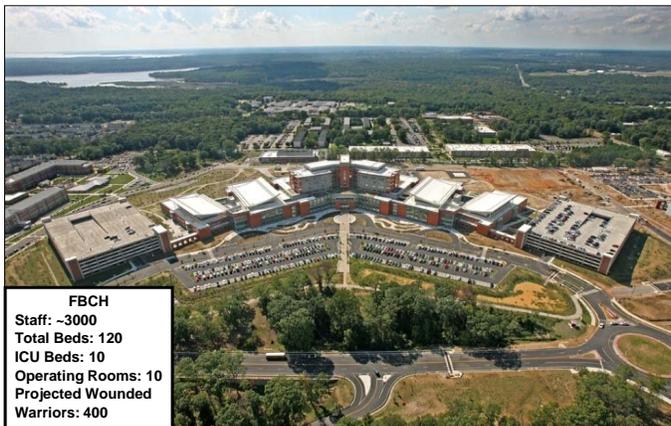


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## Fort Belvoir Community Hospital

### FBCH Capabilities

- Adult and Radiation Oncology Services
- ICU
- IP Behavioral Health
- Inpatient Pediatric
- Breast Center
- Nuclear Medicine
- Laser Eye Center
- Oral Surgery
- Chiropractic Services
- Pain Clinic
- Rheumatology
- Vascular
- Cardiac Catheter Lab
- Neurology
- Endocrinology
- Pulmonary Clinic
- Interventional Radiology
- Comprehensive Warrior Transition Services



**FBCH**  
**Staff: ~3000**  
**Total Beds: 120**  
**ICU Beds: 10**  
**Operating Rooms: 10**  
**Projected Wounded Warriors: 400**



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## BRAC Lessons Learned

- **504** Lessons Learned gathered from stakeholder groups
- **53** Critical Lessons Learned grouped into **6** principal areas:
  - 1. Governance:** A decision-making structure with a defined process to support it is crucial to ensuring key decisions are made which move the program forward to a successful completion.
  - 2. Requirements:** Early requirements identification helps define resource decisions but must be balanced with the necessity for flexibility in the desired product or service.



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### BRAC Lessons Learned (cont.)

3. **Communication:** A deliberate communication strategy that incorporates a rapid response process to correct misinformed stakeholders is required for projects with transformational change implications.
4. **Resources:** Persistent, active gathering of resources is required for the execution of major projects where resourcing spans multiple fiscal years, Services, and appropriation categories.
5. **Plans:** A strong program management foundation is essential to manage the size, scope, and complexity of the transition of healthcare delivery.
6. **Culture:** Sustained emphasis on cultural integration is important before, during, and after transformational changes to the organization.



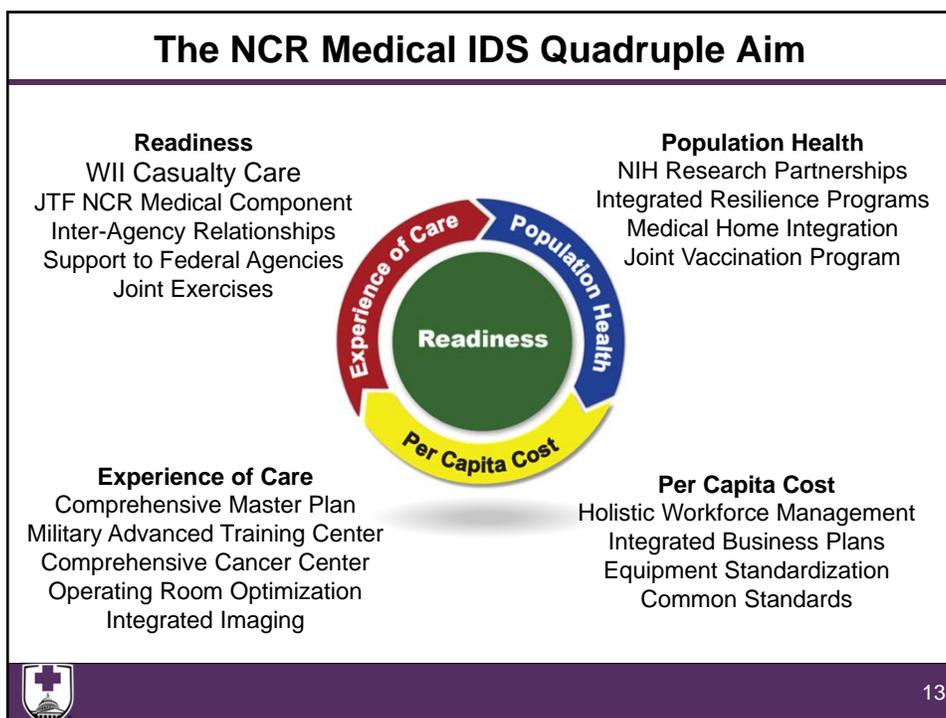
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### NCR Medical Integrated Delivery System

- JTF CapMed Operational and Fiscal Control of NCR Hospitals
  - Walter Reed National Military Medical Center
  - Fort Belvoir Community Hospital
  - Hospital Staff - 9,703 (Milpers - 3,783, Civpers - 4,410, Contractors - 1,510)
  - ~\$1.15B Operating Budget
  - TACON Medical Clinics: 32
- GME: 63 GME programs, 2011/12 - 711 trainees
  - Forty-six percent (46%) of all Army GME programs and 34% of all Navy GME programs are based in the NCR. These programs include 28% of all Army and 23% of all Navy GME trainees
- Patient Population: Hospitals: ~133,000 enrollees; JOA: ~280,000 enrollees



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### Objectives of NCR Medical Integrated Delivery System

- Objectives of the NCR Integrated Delivery System (cont.)
  - Consumer Responsiveness:
    - Seamless continuum of care
    - Focus on the health of enrollees
  - Community Benefit:
    - Improvement of community health status
    - Addressing the prevention of social issues which affect community health
- Standard systems and common processes and practices will allow for smooth movement of staff and patients between the hospitals



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### Integrated Delivery System Shared Services

- Integrated Referral Management and Appointing Center
- Civilian Human Resources
- Information Management and Information Technology
- Supply Chain Logistics and Contracting
- Planning, Programming, Analysis & Evaluation



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## WRNMMC Comprehensive Master Plan Components

MILCON (in \$M)		Operations & Maintenance (in \$M)	
<b>WRNMMC Central Clinical Expansion</b>		<b>Medical Technology Upgrade</b>	
Design	\$56	SMART Suites/ Beds* <i>Funded in FY10</i>	\$10
Temporary Facilities and Parking Garage	\$69	Real Time Location System* <i>Funded in FY10</i>	\$3
New Construction/Replacement/Demolition	\$492	Equipment Relocation and Acquisition	\$10
Subtotal \$617		Subtotal \$23	
<b>Bethesda Installation</b>		<b>Installation and Medical Center Environment</b>	
Design	\$10	Master Planning	\$2
Child Development Center	\$18	Campus Wayfinding and ADA Accessibility	\$11
Utility Upgrades	\$47	Pedestrian Improvements	\$2
Subtotal \$85		Subtotal \$15	
Base Installation Appearance Plan	\$6	<b>WRNMMC Central Clinical Expansion</b>	
Traffic and Parking Improvements	\$4	Initial Outfitting and Transition	\$89
Subtotal \$85		Subtotal \$89	
<b>MILCON TOTAL \$702</b>		<b>TOTAL = \$829M</b>	<b>O&amp;M TOTAL \$127</b>

### Also:

- \$65M Special Project Phase 1 renovation of 10 WRNMMC operating rooms completed Aug 2011, Phase 2 renovation for remaining 7 ORs started Nov 2011, estimated completion Aug 2012.
- Special Project for Bulk Transport/Central Sterilization Phase 1: On-going will complete March 2012 and Phase 2 designed and awarded.



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## WRNMMC CMP Update

- FY12 Program (\$109M) funded and includes:
  - All MILCON design funds (\$66M)
  - Funding to build Child Development Center (CDC) (\$18M)
  - O&M investment (\$25M)
    - Medical Technology Upgrade
    - Master Planning
    - Campus Wayfinding
    - Campus Wayfinding
    - ADA Accessibility
    - Pedestrian Improvements
- Construction award for FY12 Child Development Center MILCON project expected in May 2012



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### WRNMMC CMP Update (cont.)

- Design awards for FY13 are underway and include:
  - Temporary Facilities
  - Electrical capacity/cooling towers Upgrade Phase 1
  - Implement Accessibility & Appearance Plan
- FY14 project design awards are awaiting completion of Congressional Notification period (required by Title 10 USC Section 2807) and include:
  - Electrical capacity/cooling towers Phase 2
  - Parking Garage
  - New Central Clinical Building
- DoD continues to examine projects to determine whether other improvements or refinements should be incorporated



### NCR Medical Integrated Delivery System Unity of Command & Unity of Effort



Provision of high quality, integrated medical care	<input checked="" type="checkbox"/>
Maintenance of trained and deployable medical force	<input checked="" type="checkbox"/>
Achievement of significant cost-savings	<input checked="" type="checkbox"/>

JTF Command & Control Model has inherent advantages for IDS over other MHS Models



**Questions?**

