Defense Center of Excellence (DCoE)
National Intrepid Center of Excellence (NICoE)
for Psychological Health / Traumatic Brain Injury

Presentation for the Defense Health Board

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Chief of Staff
23 April 08
Agenda

• Overview
• DCoE Introduction
  – Vision / Mission
  – Organization
  – Milestones
• NICoE Introduction
  – Vision / Mission
  – Organization
  – Milestones
• Summary/Discussion
• Way Ahead
Overview

Health Affairs (HA)
- PH/TBI strategy, plans, policy and compliance
- Responsible for overall DoD plan for addressing PH/TBI

Defense Center of Excellence (DCoE)
- Coordination/collaboration
- Standards of care
- Full spectrum holistic focus
- Research/telehealth

Military Community and Family Policy
- Responsible for DoD Quality of Life policy and program oversight
- Provides policy and management direction for education programs

National Intrepid Center of Excellence (NICoE)
- Family centered approach
- Evaluation and diagnosis
- Training and education
- Research/clinical partners
- Follow-up and outcomes
Defense Center of Excellence (DCoE) Introduction

- **History:** Various task forces, Presidential, and independent committees proposed over 300 recommendations to address Psychological Health (PH) and Traumatic Brain Injury (TBI) issues in wounded Warriors. Congress provided $900M to meet requirements for PH/TBI.

- **Purpose:** DCoE was established in response to these recommendations to maintain focus on PH/TBI health issues in Service members and their families.

- **Funding:** DCoE operations will be sustained through FY 2008 and FY 2009 supplemental funding, and FY 2010-15 POM.

- **Staffing:** DCoE staffing will be from the military Services, GS / Contract personnel; and Federal / Civilian partnerships.
• **Vision:** Keeping the faith with America’s Warriors, Families, leaders, and communities

• **Mission:** To maximize opportunities for Warriors and Families to thrive by leading a collaborative global network promoting resilience, recovery, and reintegration for PH and TBI.
DCoE Global Network

- 4 Polytrauma Centers
- 8 MTF Sites
- Warriors and Families
- Civilian Collaborators
- NIH/Federal Partners
- DVBIC
- DHB Advisory Groups
- International Partners
- NCoE
- CDP
- DHCC
- DVA
- USUHS
- CSTS
- 10 MTF Sites
DCoE “Center of Centers”

- TBI-specific evaluation, treatment and follow-up care for all military personnel, their dependents and veterans
- TBI clinical research, training and education

- Deployment-related behavioral health training for military and civilian mental health professionals
- Research deployment-related needs of service members and families

- Medical advocacy and assistance for military personnel and families with deployment-related health concerns
- Specialized Care Programs for service members and veterans suffering from chronic illnesses and PTSD

- Conduct research, education, consultation and training on PH/TBI
- Knowledge, leadership and applications for preparing for, responding to and recovering from the consequences of disaster and trauma
- Research teams

- Clinical arm of DCoE
- PH/TBI evaluation and diagnosis, initial treatment plans, family-centered education, telehealth and long-term follow-up

Defense Veteran’s Brain Injury Center (DVBIC)
Center for Deployment Psychology (CDP)
Deployment Health Clinical Center (DHCC)
Center for the Study of Traumatic Stress (CSTS)
National Intrepid Center of Excellence (NICoE)
DCoE Organization

<table>
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<th>Phase</th>
<th>Date</th>
<th>Operational Capabilities</th>
<th>Staffing</th>
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<tr>
<td>Phase I</td>
<td>Oct 07 – Jul 08</td>
<td>50%</td>
<td>25-30</td>
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<td>Phase II</td>
<td>Jul 08 – Oct 09</td>
<td>80%</td>
<td>75-100</td>
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<td>Phase III</td>
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<td>Fully Functional</td>
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DCoE Program Development Overview

- IOC: 30 Nov 07
- DCoE Planning Summit: 26-28 Feb 08
- ConOps Complete: May 08
- 80% Operational: Oct 08
- FOC: 100% Operational

Steps:
- Set Scope and Vision
- Define Mission
- DCoE Summit
- Program Development
- Develop ConOps
- Develop Staffing and Training Plans
- Complete Gap Analysis

Timeline:

1. Set Scope and Vision
2. Define Mission
3. DCoE Summit
4. Program Development
5. Develop ConOps
6. Develop Staffing and Training Plans
7. Complete Gap Analysis
8. FOC: 100% Operational

Timeline:
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DCoE in Action

DCoE Highlights: Last 90 Days
- Established DoD/VA PWG on reintegration for Warriors, Veterans and Families
- Coordinated 18 TBI training events
- Briefed UK SG LTG Lillywhite; UK has adopted MACE, furthering global impact of DCoE
- Reviewed 846 research programs; recommended 75 programs for funding
- Developed a 2-week deployment psychology training course; trained 82 primary care providers and 188 PH providers
- Featured in Wall Street Journal article *Pentagon Seeks Battlefield Device to Diagnose Brain Injury*
- Participated in DoD Media Roundtable to discuss the Rand study, *Invisible Wounds of War*
**History:** Various task forces, Presidential, and independent committees proposed over 300 recommendations to address Psychological Health (PH) and Traumatic Brain Injury (TBI) issues in wounded Warriors. Congress provided $900M to meet requirements for PH/TBI.

**Purpose:** The NICoE is the clinical arm of the DCoE. It is intended to provide holistic evaluation and diagnosis, initial treatment plans, family-centered education, telehealth and long term follow-up.

**Funding:** The NICoE will be built and equipped through the generosity of the Intrepid Fallen Heroes Fund and the Fisher family.

**Staffing:** The NICoE will be staffed by a team of clinicians, subject matter experts, researchers, and support staff all dedicated to the evaluation and diagnosis of PH/TBI conditions.
The National Intrepid Center of Excellence is a state of the art facility that provides intensive outpatient evaluation, advanced diagnostics, initial treatment plans, treatment modalities, and long term follow-up for patients suffering from Traumatic Brain Injury and Psychological Health issues. Using cutting edge evidence-based practice, technology and research tools, the Center facilitates maximum recovery for Warriors and Families and return to function within their home communities.
NICoE Functional Organization

NICoE

Consultation and Coordination
- Call Center
- Eligibility/Referral
- Pre-visit Evaluation
- Welcome/Reception
- Fisher House
- Telehealth

Comprehensive Evaluation
- Physical Exam
- Psych Testing
- Family Evaluation
- Audiology
- Olfactory
- Clinical Pharmacy
- Other, as required

Individualized Treatment
- Speech Pathology
- Neuropsych
- Electrophysiology
- Optometry
- Occupational Therapy
- Physical Therapy

Research
- Clinical Research
- Imaging
- CAREN
- Collaborative/Consortia Partnerships

Training and Education
- Teaching
- Learning
- Partnerships (NIH, VA, USUHS, WRNMMC, NNMC, etc)
- Lessons Learned

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<th>Budget</th>
<th>Staffing</th>
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<td>Oct 09</td>
<td>approx. 88</td>
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NICoE Program
Development Overview

Agreement Reached on NICoE Concept: 19 Sep 07
Working Group Kickoff: 27 Dec 07
Complete ConOps: Mar 08
Begin NICoE Construction: Jul 08
Open NICoE: Oct 09

1. Set Scope and Vision
2. Define Mission
3. Establish Working Groups
4. Begin Space Design
5. Develop ConOps
6. Develop Staffing and Training Plans
7. Outfit Facility
8. Conduct Search for NICoE Director and Deputy Directors
9. Open NICoE
People
- Family representatives, together with 30 leading clinicians, researchers, and administrators from various agencies, including:
  - DoD
  - VA
  - NIH
  - USUHS
  - WRAMC
  - NNMC
  - SmithGroup

Process
- Determine Center specifications (space, equipment, department adjacencies)
- Develop the Concept of Operations including:
  - Consultation and Coordination
  - Comprehensive Evaluation
  - Individualized Treatment
  - Research
  - Training and Education
  - Telehealth/follow-up
- Provide feedback to SmithGroup on space program allocations
- Brief Mr. Fisher and Senior Leadership
Draft Products

Building/Space Design Outputs:

- Space Plan
- Equipment Plan
- Floor Plan
- NICoE Building Design

Operational Outputs

- Project Schedule
- Information Paper
- Functional Process Flows
- Concept of Operations
- NICoE Charter
Building Characteristics

- Approximately 80,000 Sq Ft
- 2 stories
- Replacing building 12 directly across from the front door of the hospital
- Opens October 09
NICoE Fact Sheet

- **Location**: NNMC, Bethesda, MD
- **Lot Size**: Approx. 3 AC
- **Building Size**: 80,000 SF
- **Number of Stories**: 2
- **Number of Personnel**: 88 (estimated)
- **Functions**:
  - Case Management/Telehealth
  - Advanced Neuroimaging
  - Neurology
  - Neuropsychology/Behavioral Health
  - Research
  - Physical Therapy/Occupational Therapy
  - Education and Training
  - Cognitive Therapy
  - Clinical Pharmacy
- **Major Diagnostic / Rehabilitation Equipment**:
  - CAREN (Computer Assisted Rehabilitation Environment) system
  - Positron Emission Tomography with Computed Tomography (PET/CT)
  - Trans-Cranial Doppler Ultrasound
  - Magnetoencephalography (MEG) Scanner
  - Fluoroscopy
- **Evaluation and Treatment Facilities**:
  - Occupational Therapy Gym
  - Gait Lab
  - Outdoor Rehabilitation
  - Vocational Rehabilitation
  - Vehicle Simulator
  - Virtual Reality Lab
  - Activities of Daily Living Lab
  - Speech, Hearing, and Sight
- **Patient & Family Amenities**:
  - Family Lounge
  - Café
  - Activity Center
  - Basketball Court
- **Conference Facilities**:
  - Auditorium
  - Media Digital Imaging, Video Editing (DIVE) Room
- **Electrical System**: Approx. 2,500 KVa system with 1,500 KW Emergency Load
- **Credentials**: LEED Silver certified
NICoE Milestones

- ConOps Completed - 21 Mar
- Design Reviews Complete – Jun 25
- Site prep begins – May 10
- Construction Begins – Jun 23
DCoE/NICoE Program Summary and Discussion

**DCoE Summary**
- On track to be 80% operational by Oct 08
- Clear understanding of:
  - How the DCoE program operates
  - Staffing Requirements
  - Concept of Operations
  - Budget

**NICoE Summary**
- On track to deliver a first-class capability
- Clear understanding of:
  - NICoE Mission support of PH/TBI Initiatives
  - The facilities and equipment needed
  - How the NICoE program will operate
  - How NICoE will be staffed