Joint Pathology Center (JPC)

Status of Compliance with Section 722 of the NDAA for FY08

Brief for the Defense Health Board

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12 Nov 2009
Status

• JPC CONOPS completed by JPCWG chartered by ASD(HA)
  – 27 Aug 08
• POTUS delegated JPC establishment to DoD
  – 27 Apr 09
• Delegation of JPC C2 within DoD pending
  – Senior medical leadership have recommended delegation to JTF CAPMED June 09
  – Pending decision from DEPSECDEF
    • JTF CAPMED created JPC Implementation Team
    • Charter and team set in Jul 09
      – Membership; AFIP, Service Pathology Reps, JTF CAPMED, Exec Agent (Army), VA, OSD HA, TMA, USU
• Plan, Build, Execute methodology
Plans

• JPC Initial Operating Capability (IOC) currently set for Jul 2010 (27 Aug 08 CONOPS)
• JPC Full Operating Capability (FOC) set for Summer 2011
• JPC I-Team in Plan phase
  □ Refinement of CONOPS through gap analysis
  □ Development of detailed OPLAN
  □ Development of implementation plan to include milestones
  □ Coordination with AFIP’s BRAC closure plan
JPC Capabilities

• Establish Joint Pathology Center to be fully operational NLT Summer 2011
  • Full spectrum pathology consultative services for the federal government in support of clinical care
    – Consultation utilizing state-of-the-art molecular testing, histopathology and immunohistochemistry
    – Mission critical testing such as depleted uranium and embedded fragment analysis in support of DoD/VA programs
    – Serves as primary pathology reference center for the Armed Forces Medical Examiner System
• Pathology Education
  – Partnership with Uniformed Services University to provide Continuing Medical Education to physicians within the federal government
  – Integral component of WRNMMC and DoD pathology residency and fellowship programs
JPC Capabilities (cont’d)

• Clinical Research
  – Support military relevant and military critical research including TBI initiative, combat wound initiative and US Military Cancer Institutes (USMCI) initiatives
  – Pathology research through WRNMMC and other military facilities
  – Use of repository material for research
  – Partner with USMCI
  – Utilize cohort registry and ACTUR data for research

• Tissue Biorepository
  – Maintain and modernize
  – Use material for clinical care and develop process for utilization

• Utilize Strategic Partnerships to leverage and enhance existing capabilities
  – USMCI and Uniformed Services University
• Organizational Placement:
  • Director JPC will report to JTF HQ

• Resources:
  – Staffing based on gap analysis and validation of staffing model
    • Director
    • 29 board certified subspecialist pathologists
      • Derm, GU, Heme, GI/Hepatic, Pulmonary/Mediastinal, Oral/ENT/Endocrine, GYN/Breast, CV, Neuro, Nephro, Environmental, ID, Soft Tissue/Bone
      • In collaboration: Rad Path (WRNMMC staff) and Vet Path (C2 TBD)
    • 75 Technical and administrative support staff
  – Budget (Preliminary Estimate)
    • Estimated start up costs $4M
    • Estimated annual budget $21M
    • Working with TMA/HA for funding
Way Ahead

• Complete gap analysis, OPLAN and I Team deliberation

• Coordinate with AFIP closure plan to ensure continuity of clinical care

• Work with all stakeholders to ensure retained services are programmed to appropriate organizations
Back-up Slides
JPC CONOPS

• CONOPS leverages capabilities of existing organizations
  – Synergy, reduce redundancy, economy of scale
  – Provides framework for development of strategic partnerships

• CONOPS meets NDAA language

• Developed in collaborative process with Services and VA to meet patient care needs

• CONOPS reviewed and approved by Health Affairs JPC Work Group
Attributes and Capabilities Required for IOC and FOC at minimum

• IOC
  – Maintenance of Tissue Repository
  – Limited Scope of Secondary Consultation / Diagnostic Services
  – Selection of Interim Director
    • Office of the Director
    • Support Staff
  – Limited Research and Education in Pathology

• FOC
  – Molecular Pathology, Histology, Telepathology
  – PMO, Tumor Registry (ACTUR)
  – Implement Plan to Modernize Tissue Repository
  – Implement plan to expand Research and Education
  – Implement full scope of Secondary Consultation