DoD Response to Achieving World Class Report and Progress Report on Walter Reed National Military Medical Center

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Agenda

• PURPOSE:
  – To provide an overview of the Department’s response to the Defense Health Board’s (DHB) review of the design plans for the new Walter Reed National Military Medical Center (WRNMMC) at Bethesda, MD and Fort Belvoir Community Hospital (FBHC) at Ft Belvoir, VA.

• OUTLINE:
  – Background
  – Congressional reporting requirements
  – Project Status
  – Summary of DHB Findings/Recommendations
  – Department’s response to DHB Findings/Recommendations
  – Conclusion
Background

• **2005** – BRAC directed realignment of Walter Reed Army Medical center to WRNMMC and FBCH.
• **Sep 2007** – DEPSECDEF established JTF CAPMED as a fully functional Standing JTF (reporting directly to SECDEF through DEPSECDEF) to oversee NCR Medical BRAC realignments and integrate healthcare delivery in the NCR
• **Nov 2008** – Sec. 2721(b), FY09 NDAA required independent review of the design and plans for the new WRNMMC and FBCH to determine whether they would be “world-class” facilities.
• **Jul 2009** – DHB panel submitted the independent review to DoD and Congress
Section 2714 of FY10 NDAA
Three SECDEF Reporting Requirements

• (a) NLT March 31, 2010, requires SECDEF to develop & implement a comprehensive master plan to provide sufficient world class military medical facilities and an integrated system of healthcare delivery for the NCR

• (b) NLT March 31, 2010, requires:
  – (1) Submittal of NCR comprehensive master plan in subsection (a)
  – (2) Recertification of Sec. 1650(a) of NDAA for FY08
  – (3) Certify MTFs covered by NCR master plan meet or exceed Joint Commission standards
  – (4) Assessment of risks/benefits to patient care associated with completing the realignment of WRNMMC by 9/15/11

• (c) NLT June 30, 2010, requires:
  – (1) Schedule for completion of requirements in NCR master plan
  – (2) Updated cost estimates to provide world class MTFs for the NCR
Walter Reed National Military Medical Center (WRNMMC)
## NCR Medical BRAC Schedule

### Bethesda, MD

<table>
<thead>
<tr>
<th>Project</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Walter Reed National Military Medical Center</td>
<td>Mar '08 - Design - Oct '09</td>
<td>Jul '08 - Construction - Sep '10</td>
<td>Oct '10 - Dec '10 - BT-BT Transition</td>
<td>Aug '11 - WR-BT Transition</td>
<td>Outfitting: Aug '10 - Nov '10</td>
</tr>
<tr>
<td>Building A - 67% Complete</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Building B - 60% Complete</td>
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</tr>
<tr>
<td>Renovations (Bldg 1-10) - 19% Complete</td>
<td>Mar '08 - Design - Feb '10</td>
<td>Jul '08 - Construction - Jul '11</td>
<td>Final Outfitting: Oct '09 - Aug '11</td>
<td>RFP 2 Award</td>
<td>Oct '09 - BT-BT Final Transitions - Aug '11</td>
</tr>
<tr>
<td>RFP 2: Warrior Transition Unit, Dining, Admin, I/EOQ</td>
<td></td>
<td></td>
<td></td>
<td>Aug '09 Design, Construct &amp; Outfit May '11</td>
<td></td>
</tr>
<tr>
<td>RFP 2: Building 17, Admin, Gym, Parking Garage</td>
<td></td>
<td></td>
<td></td>
<td>Aug '09 Design, Construct &amp; Outfit Aug '11</td>
<td></td>
</tr>
</tbody>
</table>

- **Green Circle:** On/ahead of schedule
- **Yellow Circle:** Still some schedule risk

### Legend:
- **Award:**
- **Design:**
- **Construction:**
- **Outfitting:**
- **Transition:**

### Notes:
- **As of:**
- **November 2009**
- **October 2010 Initial Operating Capability**
- **September 15, 2011 Full Operating Capability**

**Minimal Construction Risk**
WRNMMC Campus Projects

RFP #1
RFP #2

Administrative Facility

Patient Parking Garage: 943 spaces

Medical Swing Spaces: 30K sqft

Fisher Houses

Multi-purpose Parking Garage

WTU BEQ/Admin

Bldg A: Outpatient
6 floors
515K sqft
ECD: Sep 2010

Bldg B: In-patient
4 floors
162K sqft
ECD: Oct 2010

Fallen Hero Foundation
NCoE Facility
2 floors: 72K sqft
ECD: Summer 2010
Fort Belvoir Community Hospital
# NCR Medical BRAC Schedule

## Fort Belvoir Community Hospital (FBCH)

<table>
<thead>
<tr>
<th>Project</th>
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<th>2010</th>
<th>2011</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinic A</td>
<td>Oct '07 – Design – Dec '08</td>
<td>Mar '08 – Construction – Apr '10</td>
<td>Nov '10 – DW-FB</td>
<td>Aug '11 – WR-BT</td>
<td></td>
</tr>
<tr>
<td>Clinic B</td>
<td>Oct '07 – Design – Dec '08</td>
<td>Apr '08 – Construction – Nov '10</td>
<td>Sep '10 – Apr '11</td>
<td>Aug '11 – WR-BT</td>
<td></td>
</tr>
<tr>
<td>Hospital C</td>
<td>Oct '07 – Design – Mar '09</td>
<td>Jul '08 – Construction – Mar '11</td>
<td>Sep '10 – Apr '11</td>
<td>Aug '11 – WR-BT</td>
<td></td>
</tr>
<tr>
<td>Clinic D</td>
<td>Oct '07 – Design – Dec '08</td>
<td>May '08 – Construction – Oct '10</td>
<td>Sep '10 – Apr '11</td>
<td>Aug '11 – WR-BT</td>
<td></td>
</tr>
<tr>
<td>Clinic E</td>
<td>Oct '07 – Design – Dec '08</td>
<td>Mar '08 – Construction – May '10</td>
<td>Nov '10 – DW-FB</td>
<td>Aug '11 – WR-BT</td>
<td></td>
</tr>
</tbody>
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**Legend:**
- Green: On-ahead of schedule
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**As of:**
- November 2009
- October 2010: Initial Operating Capability
- September 15, 2011: Full Operating Capability

**Minimal Construction Risk**
Fort Belvoir Community Hospital

S. Garage (Jul 2010)

Clinic E (May 2010)

Clinic D (Oct 2010)

Building C (Mar 2011)

Clinic B (Nov 2010)

Clinic A (Apr 2010)

N. Garage (Aug 2010)
Summary of Defense Health Board Findings/Recommendations

1. Continue with construction and renovations at WRNMMC and FBCH – and correct DHB identified deficiencies
2. Identified authorities issue as “foundational” and recommended empowering a single official with complete organizational and budgetary authority in the NCR.
3. Develop a comprehensive master plan for both WRNMMC and NCR Integrated Delivery System (IDS).
4. Engineer integrated military healthcare culture.
5. More fully incorporate clinician/end-user input into plans.
1. Continue projects and correct deficiencies at WRNMMC/FBCH

- DHB defines “world-class” medical facility and Sec 2714 of FY10 NDAA codifies definition.
- DoD is pleased to see that designs for both WRNMMC and FBCH are sufficiently close to the newly defined standard to recommend that the construction and renovation projects should be continued.
- Where there are identified deficiencies, the Department is committed to correcting the design and construction, and to provide a way forward within a comprehensive master plan for future construction projects in the NCR IDS and at WRNMMC.
- Certain backfill renovations at WRNMMC can begin before the master plan is fully developed.
2. One official with organizational & budgetary authority in the NCR

- Sec. 2714, FY10 NDAA will require DoD to address this by 3/31/10.
- The NCR OIPT will review and ensure the appropriate delegation of organizational authorities to effectively implement a common world-class vision for the WRNMMC and the NCR
- The Department has already taken action to provide enhanced command authority to CJTF by establishing, no later that 15 September 2011, the WRNMMC and FBCH as jointly governed and staffed hospitals reporting to JTF
- ASD(HA), Commander, JTF CAPMED (CJTF), and each of the Services Surgeons General are working to develop effective funding flow equities for JTF CAPMED and the MTFs in the NCR JOA.
3. Develop comprehensive master plan for WRNMMC/NCR IDS

- The Department recognizes and endorses the importance of achieving a clear and common vision for an NCR IDS and WRNMMC.
- JTF CAPMED is developing a comprehensive master plan for the WRNMMC installation and the NCR IDS, to include facilities and healthcare delivery in the region. It will incorporate the increased need for support.
- Sec. 2714, FY10 NDAA requires this plan by 3/31/10.
- The master plan development will be ongoing and implementation will continue beyond the BRAC mandate of 15 September 2011.
4. Engineer integrated military healthcare

• Several actions are underway to develop a culture to support the NCR IDS and world-class military medical.
• The Enlisted Cell (working group) developed an Enlisted Orientation Program for NCR enlisted personnel.
• Phase II is to develop a similar orientation program for NCR Officers by Fall/Winter 2009.
• Phase III – civilian personnel NLT Spring 2010.
• JTF CAPMED has already contracted for an initial study of merging the cultures found at the Component (Service level) in the NCR.
5. More fully incorporate clinician/end-user input into plans

- Throughout the entire design process, frontline clinicians have been involved and have routinely reviewed space designs for WRNMMC to ensure no impediments to quality care will exist.
- As a direct result of clinician input, JTF CAPMED directed the redesign of certain portions of the planned outpatient building to support expanded services for Cancer care and the Pharmacy to be located within that building.
- Not all of the clinician’s suggestions could be incorporated due to architectural design constraints.
- Since facility planning efforts for new construction are largely complete, further recommendations will be taken into consideration for planning after the completion of the BRAC recommendation.
6. Evaluate construction processes for future MHS projects

• BRAC Facility construction in the NCR is being accomplished by two separate construction contract methods:
  – WRNMMC – Design-Build
  – FBCH – Integrated Design-Bid-Build
• ASD(HA) will prepare a lessons-learned from both methods in coordination with design/construction agents (USACE, NAVFAC)
• DoD plans to continue to utilize the expertise of the DHB to provide independent review of the WRNMMC and FBCH projects.
• ASD(HA) plans to develop measurement tools to assess the benefits of Evidence Based Design (EBD) features at FBCH.
Conclusion

• Appreciate the Defense Health Board’s invaluable support and guidance with NCR Medical.

• The Department is committed to providing world class healthcare to Service Members, families, and other beneficiaries.

• WRNMMC and FBCH will achieve the DHB panel’s newly established definition of a “world-class” medical facility.

• JTF CAPMED is preparing a comprehensive master plan for the NCR IDS, to include facilities and installation services.