

The seal of the Defense Health Board is a circular emblem. It features a central figure of a caduceus (a staff with two snakes entwined around it and wings at the top) superimposed on a map of the United States. The map is colored in shades of green and blue. The entire emblem is enclosed within a purple circular border. The word "DEFENSE" is written in white capital letters along the top arc of the border, and "HEALTH BOARD" is written along the bottom arc. Two white stars are positioned on the left and right sides of the border.

Decision Brief :

**Deployment Health Clinical Center
Follow-Up Review**

George K. Anderson, MD, MPH

Defense Health Board

August 19, 2013



Overview

- Background & History
- Tasking
- Review Process
- Previous Recommendations with DoD Response, Current Findings and Recommendations
- Next Steps



Background & History

2003: AFEB Memorandum proposed annual review of DoD Deployment Health Centers†

2004 – 2010: Several rounds of reviews of Centers conducted by AFEB, and subsequently, DHB

2011-2012: Dr. Anderson and Dr. Higginbotham conduct reviews of Centers

†Centers include the Deployment Health Clinical Center, Naval Health Research Center, and Armed Forces Health Surveillance Center.

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Background & History

(Continued)

March 2012: DHB deliberates findings and submits review findings and recommendations to the Department.

January 2013: Acting Under Secretary of Defense for Personnel & Readiness (USD[P&R]) requests follow-up review of Deployment Health Clinical Center (DHCC) in 2013, and subsequent reviews of all Centers every three years thereafter.



Background & History

(Continued)

February 2013: The Assistant Secretary of Defense (Health Affairs) responded to the Board's 2012 recommendations pertaining to DHCC, providing concurrence on all recommendations and offering progress updates toward meeting those recommendations.



Tasking



PERSONNEL AND
READINESS

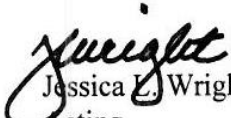
UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, DC 20301-4000

JAN 22 2013

MEMORANDUM FOR PRESIDENT, DEFENSE HEALTH BOARD

SUBJECT: Request to the Defense Health Board to Conduct External Reviews of the
Department of Defense Deployment Health Centers

Recognizing that the Board's previous periodic reviews of the Department of Defense Research and Clinical Centers for Deployment Health yielded valuable recommendations, I request that the Board continue these reviews. Given the nature and magnitude of the recommendations pertaining to the Deployment Health Clinical Center (DHCC), I request that the Board revisit the DHCC in 2013, to assess progress and perform a follow-up review. After this review, I request that the Board conduct reviews of the DHCC, Deployment Health Research Center, and Armed Forces Health Surveillance Center every 3 years, for the next 6 years. Please provide the first requested performance review to the Assistant Secretary of Defense for Health Affairs as soon as possible.


Jessica E. Wright
Acting



Review Process

- Dr. Anderson and Dr. Higginbotham conducted a site visit to DHCC on July 26, 2013.
- The DCoE Director, DHCC Director, Deputy Director, Chief of Staff and several DHCC Assistant Directors/Team Leads participated in the meeting.



Findings & Recommendations

Overview

- DHCC has undergone several changes in its organizational structure due to an internal reorganization and external realignment.
- DHCC has made significant progress in achieving the Board's recommendations, and has redefined itself as a key institution serving the psychological health needs of our Armed Forces.



Strategy

Previous Recommendations

- DHCC should develop a comprehensive strategic plan and clearly define scope of work
- DoD should monitor transition to U.S. Army Medical Research and Materiel Command and ensure DCoE can provide adequate oversight

➤ **DoD Response: Concur**

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Strategy

Current Findings

- DCoE and DHCC completed strategic review; revised mission and developed vision statement.
- Oversight from and relationship with DCoE has been strengthened.
- DHCC's new mission is focused on psychological health rather than broader deployment health issues.



Strategy Recommendations

1. DCoE and DHCC should continue to reassess strategic goals and objectives as part of its normal strategic planning process, in accordance with strategic planning best practices.
2. DHCC should consider changing its name to better align with its mission.



Process

Previous Recommendations

- DHCC should expand (Air Force) and/or begin engagement (Navy) with all of the Services, eliminating its Army-centric focus.
- DHCC should develop formal processes for assessing projects, to include cost effectiveness and scalability studies.

➤ **DoD Response: Concur**



Process

Current Findings

- DHCC has significantly expanded its relationship with the Services, even hiring a Navy Captain as its new Director.
- DHCC is being better monitored by DCoE and has new departments focused entirely on assessing and evaluating effectiveness.
- As a result of the reorganization, DHCC staff are now located in three different buildings.



Process Recommendations

3. DCoE and DHCC should continue striving to include greater Service representation in the staffing to improve coordination with the Services.
4. The Department should take the necessary actions to enable DHCC staff to be located within the same office space as quickly as possible, to maintain the momentum established by the recruitment of new leadership and strategic focus.

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People & Culture

Previous Recommendations

- DHCC should convert contract positions to military & civilian.
- DHCC should study its one contract to determine if costs could be saved.
- DHCC should adjust staff composition to meet to-be-defined strategic goals.

➤ **DoD Response: Concur**



People & Culture

Current Findings

- DCoE has submitted a proposal to convert contract staff positions to military and civilian (this would include DHCC).
- Due to reorganization, DHCC is now supported by six different contracts.
- The staffing composition at DHCC is closely aligned to its new mission and vision.



People & Culture Recommendation

5. DCoE and DHCC should secure permanent billets* for military leadership positions at DHCC and convert contract positions to civilian personnel.

*Authorized Staffing for DHCC is 103 personnel; Current staff includes 61 contractors (6 companies), 10 civilians, 16 USPHS, and 3 Active Duty.



Structure & Programs

Previous Recommendations

- The DHB made several recommendations pertaining to the organizational structure and its operational programs.
 - Programmatic efforts need to align with new strategy and direction
 - Programs need to be cost effective and appropriately evaluated
- **DoD Response: Concur**



Structure & Programs

Current Findings

- DHCC's revised organizational structure and new directorates enhance DHCC's capabilities
- DHCC's new model is program-based rather than project-based.
- DHCC's new structure includes an enhanced capability to promote and ensure program effectiveness.



Structure & Programs Recommendations

No Proposed Recommendations.

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Next Steps

In accordance with the USD (P&R) request, the Board will revisit all DoD Deployment Health Centers in 2016 for follow-up reviews.



Questions?

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