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MEMORANDUM

From: M. J. TEDESCO, RADM
COMDT (CG-11)

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Reply to: CG-112
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To: Distribution

Subj: COAST GUARD HEALTH SERVICES PROGRAM - STRATEGIC PLAN

Ref: (a) Coast Guard Health Services Strategic Plan

1. It is my distinct honor and pleasure to have assumed the role as the Coast Guard Director of Health, Safety and Work Life. As I look at the Coast Guard Health Services Program, I see a very bright future. There are common principles that are essential for accomplishing our mission and achieving our vision. They must be embedded into our processes and culture so they are a natural part of everything we do. These principles include:

a. Interoperable, interdependent -- anytime, anywhere. We will define appropriate capacities for each site and work in synergy to efficiently and effectively provide, with network partners, required services where needed.

b. Flexible & agile capabilities – continually improving while adapting to change. We will move quickly to take advantage of opportunities and stay ahead of the rapidly changing worlds of health care and Coast Guard missions.

c. Joint, interoperable, interdependent -- anytime, anywhere. We will select the appropriate capacities from each Service and work in synergy to efficiently and effectively provide required services wherever needed.

2. In order to actuate these principles, I have set out distinct goals in a Strategic Plan. This Strategic Plan is a living document that defines the Coast Guard's key health service outputs, expands the framework of accountability, and provides a set of guiding principles to develop our human capital. The Strategic Plan does not encompass everything that we can do in the Coast Guard Health Services Program, nor can we accomplish every stated goal in the near term. Implementation is a multi-year process.

3. However, for the sake of focus, while not limiting the other objectives in the Strategic Plan, I would like to share key efforts that will be programmatically addressed this year: transformation of the Coast Guard Health Services program, utilization of medical resource business metrics, implementation of the Periodic Health Assessment (PHA), the Medical Readiness & Reporting System (MRRS), the Electronic Deployment Health Assessment (EDHA), the HIV program, and electronic transition from P-GUI to the Armed Forces Health Longitudinal Technology Application (AHLTA).

a. As part of the Coast Guard's Transformation and Modernization, the Health, Safety and Work-life program will undergo a revitalization and reorganization. Changes in the program's control and billet structure will ensure overall unity of effort IAW Commandant Action Intent Orders 4, 5, 7 & 8.

b. In order to provide quality, accessible and efficient health care, we will use medical resource business metrics to gauge how well our program is functioning. The use of the Coast Guard Office of Health Services Balanced Scorecard will provide a snapshot of the status of objectives, initiatives, and measurements in the quest to implement the vision of the Strategic Plan. Achieving this balance will enable us to achieve near term performance gains, while ensuring the long-term vitality of the organization.

c. The PHA aligns exceptionally well with the CG-112 comprehensive Strategic Plan and will be implemented gradually throughout 2008. The PHA is a tailored, prevention oriented health assessment consisting of five key components: (a) The Health Assessment Survey, (b) Clinical Preventive Services, (c) Problem-Based Examinations, (d) Individual Medical Readiness Review, and (e) Occupational Medical Surveillance. In addition to achieving the goal of maintaining a healthy force, the emphasis on using the PHA will improve data collection for population health, increase visibility of the health of the force and assist optimal utilization of Coast Guard clinics. The PHA will replace the 5-year physical examination. Aviation, retirement, accession and occupational specialty physical examinations will continue to be required.

d. In January 2008, we will begin pilot testing MRRS. MRRS will replace the Medical Readiness System (MRS) program. MRRS provides Commanding Officers with the capability to record, track, and report aggregated medical data and it provides full visibility of individual medical readiness status. It has a user friendly interface and offers seamless interoperability with existing medical and dental readiness metrics, and is AHLTA compatible.

e. In January 2008, the Coast Guard will no longer use paper-based deployment health assessment forms for expeditionary deployments. The Electronic Deployment Health Assessment (EDHA) primarily affects Coast Guard members deployed to PATFORSWA and those clinics in support of providing follow up care. The EDHA is a web-based program accessible at any computer terminal.

f. By April 2008, the Coast Guard will transition from the U.S. Army to the U.S. Navy as their HIV Program Manager. Additionally, Coast Guard providers and Independent Duty Health Services Technicians (IDHS) will be able to access HIV results within 48 hours via CHCS, HMS Loader or MRRS.

g. The Coast Guard will transition from CHCS to AHLTA over the next year in order to align with the other military services. AHLTA is the military medical and dental clinical information system that will generate and maintain a comprehensive, life-long, computer-based patient record for each beneficiary. AHLTA provides a secure, comprehensive, interoperable, standards-based, enterprise-wide medical and dental clinical information system that generates, maintains, and provides round-the-clock access to longitudinal electronic health records of active duty military, their family members and others entitled to Coast Guard health care in fixed medical/dental facilities, on board ships, and in Theaters of Operations.

4. I applaud each member of the Coast Guard health care team for their service to the Coast Guard. These are ambitious plans and impossible to implement without your help. I will rely on your support and the staff of CG-11 and the MLC's to assist the clinics and sickbays in implementation.

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