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HEADQUARTERS, US ARMY MEDICAL COMMAND
Fort Sam Houston, TX 78234-6007
301305Q October 2009

OPERATION ORDER 10-12 (INTEGRATION OF MILITARY VACCINE AGENCY AND
VACCINE HEALTHCARE CENTERS NETWORK)

References:

- a. Department of Defense Directive (DoDD) 6205.02E, "Policy and Program for Immunization to Protect the Health of Service Members and Military Beneficiaries, dated 19 September 2006.
- b. Force Health Protection Council (FHPC) Minutes, dated 8 November 2006.
- c. FHPC Minutes, dated 13 December 2006.
- d. Army Regulation (AR) 40-562, Immunizations and Chemoprophylaxis, dated 29 September 2006.

Time zone used throughout the order: Quebec (Eastern Daylight Time).

Task Organization: No change.

1. SITUATION.

a. General. The Secretary of the Army is designated the Department of Defense (DoD) Executive Agent for military immunization programs by DoD Directive 6205.02E (Reference a.). This same directive established the Military Vaccine (MILVAX) Agency to synchronize, integrate, and coordinate efforts in immunization services for all DoD Components.

(1) On 6 August 2006, the Vaccine Healthcare Centers Network (VHCN) program was reviewed by the Scientific Military Medical Advisory Committee (SMMAC), which affirmed the value of the program and recommended formal incorporation into the Military Health System (MHS). The SMMAC also recommended that the final structure, budgeting, and oversight should be determined by the FHPC.

(2) On 13 September 2006, the FHPC formed a DoD VHCN Working Group tasked to develop a consensus position on requirements and report to the FHPC by 6 November 2006. The VHCN working group felt that oversight for the VHCN fell within this mandate and recommended integration of the VHCN within MILVAX. FHPC approved DoD VHCN Working Group recommendations on 13 December 2006 (Reference b. and c.).

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(3) The VHCN consists of the Network headquarters, located at Walter Reed Army Medical Center (WRAMC), and four regional VHCs at WRAMC, Washington, DC; Naval Medical Center Portsmouth, Portsmouth, VA; Womack Army Medical Center, Fort Bragg, NC; and Wilford Hall Medical Center (WHMC), San Antonio, TX. The FHPC approved the retention of this current structure and directed the Services to provide resource requirements based upon the designated percentage (USA = 43.6%, USN = 28.2%, USAF = 28.2%).

2. MISSION. No later than 31 October 2009, the MILVAX and the VHCN will complete the integration of their organizations to enhance the vaccine services provided to authorized beneficiaries in the DoD.

3. EXECUTION.

Intent: The purpose of the integration of the VHCN under the MILVAX is to provide Executive Agent-level oversight and to provide a structure for increased resource management and policy integration. To accomplish this task, the MILVAX Agency and the VHCN must analyze all current mission essential functional elements, determine if redundancies warrant consolidation, and integrate the functional elements of each organization. The end state is the VHCN and MILVAX are completely and seamlessly integrated into a single organization that is better able to coordinate the delivery of critical vaccine services.

a. Concept of Operations. USAMEDCOM staff and subordinate organizations will execute tasks to quickly and seamlessly integrate the VHCN into MILVAX. The MILVAX will provide updates on integration to the Director, DoD Executive Agencies Directorate as necessary.

b. Tasks to Subordinate Units and DoD Executive Agencies.

(1) Military Vaccine Agency.

(a) Assume overall authority for the operational supervision, governance, budget, and resourcing of the VHCN to optimize functional integration and reduce redundancies.

(b) Implement an annual personnel audit of VHCN requirements through US Army Public Health Command (USAPHC) for modification of the MCW03HAA TDA.

(c) Submit a rapid revision change request to DoDD 6205.02E (Reference a.) and AR 40-562 (Reference d.) documenting the integration to reflect the additional

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mission and responsibilities of MILVAX and the VHCN under the Army's Executive Agent authority.

(d) Provide significant activity reports to the Director, DoD Executive Agencies Directorate as required.

(e) Oversee establishment of standardized MOAs with local commands of VHCN Regional Centers.

(f) Assume oversight of outreach commitments and budget requirements for joint education missions and consolidate within the organization.

(g) Coordinate with US Army Medical Department Center and School to assist with possible integration of educational programs developed by MILVAX and the VHCN into the clinical educational programs for healthcare workers at all levels.

(h) Support interagency liaison/collaboration and representation where clinical expertise in vaccine safety and immunology is required.

(i) Facilitate contracting support services for the VHCN. The Fort Bragg contracting office, Mission & Installation Contracting Command (MICC), will facilitate the re-compete of the existing General Dynamics Information Technology contract.

(2) Vaccine Healthcare Centers Network.

(a) Establish standardized MOAs with local commands of VHCN Regional Centers. Each MOA will establish a task monitor at the support sites to provide daily oversight of the VHC Regional Centers.

(b) Integrate VHCN education activities within the MILVAX; focus on optimizing effective and efficient programs with MILVAX oversight of budget requirements and outreach commitments.

(c) Coordinate and define the clinical, logistics, and research necessary to sustain the mission/goals as they evolve.

(d) Provide support for the integrated Graduate Medical Education physician and medic training programs within the Allergy-Immunology Department at WRAMC and WHMC, as well as annual clinical immunology-vaccine safety certification and tri-service immunization allergy specialty technician courses.

(e) Support interagency liaison/collaboration and representation where clinical expertise in vaccine safety, efficacy, and immunology is required.

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(f) Provide clinical expertise for the Immunization-Allergy Specialty Course.

(3) Northern Regional Medical Command.

(a) Continue providing medical contracting support and government purchasing card (GPC) support through the Northern Regional Contracting Office (NRCO) for the VHCN. The Fort Belvoir Contracting Office will continue to provide non-medical contracting support.

(b) Reimburse US Army Garrison, Ft Detrick for facilities support, inclusive of costs for utilities, infrastructure repairs, and services for the VHCN headquarters, Building 161, located at Forest Glen.

(c) Provide collaborative clinical expertise support for healthcare provision and research services within the Allergy-Immunology Department at WRAMC.

(d) Provide credentialing support services for the VHCN clinical staff through WRAMC and transition to an integrated credentialing process to Walter Reed National Military Medical Center.

(e) Provide support to VHCN on TDA issues until final transfer to USAPHC TDA.

(f) Provide support for the Inter-service Training Resource Organization Triservice Immunization-Allergy Specialty Course in the National Capital Region.

(4) US Army Medical Research and Material Command.

(a) Facilitate the execution of MILVAX/VHCN studies and evaluations to improve the safety, effectiveness, and efficiency of Military Immunization Programs.

(b) Provide contract support to existing VHC contract requirements.

(5) US Army Public Health Command.

(a) Modify the MCW03HAA TDA requirements to include validated VHCN positions in all regional sites.

(b) Provide support for collaborative vaccine safety surveillance research that involves the Armed Forces Health Surveillance Center.

(6) US Army Medical Department Center and School. Provide support for integration of educational programs developed by MILVAX and the VHCN into the clinical educational programs for healthcare workers at all levels.

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(7) US Army Garrison Fort Detrick. Establish Installation Support Agreement that will provide space, infrastructure repairs, services, and utilities support for VHCN requirements within the Forest Glen facility to support mission requirements.

c. Tasks to OneStaff.

(1) Director, DoD Executive Agencies.

(a) Provide oversight support for the optimum functional integration of MILVAX and the VHC Network.

(b) Provide significant activity reports to The Surgeon General and Deputy Surgeon General as required.

(c) Submit Program Objective Memorandum, budget requirements, and documentation for MILVAX through Program Analysis and Evaluation and Resource Management.

(2) Assistant Chief of Staff, Operations.

(a) Provide Directorate supervision and support to MILVAX.

(b) Collect MILVAX significant activity reports and Good News Stories for submission to MEDCOM.

(3) Assistant Chief of Staff, Resource Management.

(a) Coordinate VHC's funding from Navy and Air Force, as stipulated by FHPC decision.

(b) Establish a separate funding line for the VHCN within the MILVAX budget.

d. Coordinating Instructions. Acknowledge receipt of this message electronically to OPS21 at eoc.opns@amedd.army.mil or telephonically at (703) 681-8052 or DSN 761-8052.

4. SERVICE SUPPORT. N/A.

5. COMMAND AND SIGNAL.

a. Command. Director, MILVAX will assume operational control of the VHCN. The Director, VHCN and regional Medical Directors will provide expert consultative services

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and policy advice upon request to the Service Surgeons General and other senior leadership throughout DoD.

b. Signal.


(1) The Military Vaccine Agency point of contact is COL Michael Krukar at (703) 681-6530/5101 or via e-mail at michael.krukar@us.army.mil.

(2) The point of contact for the Vaccine Healthcare Centers Network is COL Renata Engler at (202) 782-0411/0393 or via e-mail at renata.engler@us.army.mil.

ACKNOWLEDGE: OPS21 at eoc.opns@amedd.army.mil.

SCHOOMAKER
LTG

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ANNEXES:

Annex A (Task Organization)
Annex B-R Omitted.

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