



USAMRMC

STRATEGIC COMMUNICATION PLAN

U.S. ARMY MEDICAL RESEARCH AND MATERIEL COMMAND



U.S. Army Medical Materiel Agency (USAMMA)

Mission: The U.S. Army Medical Materiel Agency plans, synchronizes, and provides medical logistics for health service support to forces conducting joint and full spectrum operations by:

- Managing medical materiel life-cycle projects
- Equipping and sustaining the medical force
- Managing medical strategic centralized programs
- Advancing performance excellence

Background

USAMMA has its headquarters at Fort Detrick, Maryland, with several forward sites, medical maintenance organizations, and liaison cells located throughout the United States and overseas. USAMMA serves as the strategic level, medical logistics generating force command in support of Army Medicine, the Army Campaign Plan, Military Health System, and Combatant Commands. The agency provides optimal medical acquisition and logistics support and solutions across the full spectrum of military health care missions worldwide. Key elements of the USAMMA wartime responsibilities are predeployment support to the operational forces and the deployment of the Medical Logistics Support Teams (MLSTs).

USAMMA is the Army Surgeon General's executive agent for strategic medical logistics programs and initiatives. USAMMA has myriad strategic roles involving centrally managed medical logistics programs, Army Supply Class VIII (SC VIII) cataloging and set building, maintenance planning and operations, and Army Force Generation integration and synchronization. USAMMA also has operational oversight of medical materiel acquisition programs and serves as the Army Medical Department's (AMEDD's) command for fielding new medical materiel for the Army operational forces.

USAMMA performs its core competencies in planning, synchronizing, and providing medical logistics for equipping the medical operational forces and supporting medical readiness in support of Army and joint service operations. USAMMA equips and sustains the medical force in a support continuum beginning with medical materiel acquisition life-cycle projects, assembly and fielding of medical sets for commercial and nondevelopmental items, through the use of medical prepositioned stocks and medical chemical defense materiel, and medical equipment and technology maintenance for Army and joint spectrum military operations. USAMMA also emphasizes logistics information and knowledge management to satisfy the requirements of stakeholders and customers. USAMMA also performs product, process, and enterprise quality practices to achieve organizational and enterprise performance excellence.

Key Themes & Messages

- USAMMA directly supports the Army Campaign Plan and Military Health System in numerous ways including: medical acquisition logistics, medical set assembly management, medical materiel fielding, vaccine distribution, logistics assistance,

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504 Scott Street
Fort Detrick, MD 21702
301.619.7549
<https://mrmc.amedd.army.mil>



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strategic medical prepositioned stock management, technology assessments, as well as depot and sustainment-level biomedical equipment maintenance. USAMMA develops medical materiel solutions to improve products for the military medical community and continues to evaluate its business practices and provide timely, relevant innovations for improved functionality and cost savings.

Q & A

Q: How is USAMMA organized to achieve its core competencies?

A: USAMMA is composed of six directorates and three Project Management Offices (PMOs):

Deputy for Sustainment (DfS). The leaders and staff members within the DfS office focus on the activities and key processes related to the agency's operations (internal and external). The DfS office is composed of the following offices and directorates:

Business Support Office (BSO). The BSO sustains, improves, and expands USAMMA business enterprise through analysis of supply and logistics policies, procedures, and practices.

Distribution Operations Center (DOC). DOC coordinates the transportation and distribution of temperature-sensitive medical products and critical vaccines, provides cold chain management (CCM) consultation and training DoD-wide, and executes the DoD Medical Materiel Quality Control and Army Medical Materiel Information Message program.

Force Projection Directorate (FPD). FPD provides medical logistics situational awareness, customer support, centralized program management, materiel planning, programming, and execution to ensure medical materiel is available to support Army operations and the security assistance program for medical materiel. FPD manages the Army Pre-Positioned Stock (APS) and the SC VIII materiel, as well as the Office of the Surgeon General's contingency programs such as the Medical Chemical Defense Materiel, the Unit Deployment Packages, and the Reserve Component Hospital Decrement, Foreign Military Sales, and Medical Materiel Readiness Program.

Force Sustainment Directorate (FSD). FSD provides continuous medical materiel support to all Army component medical forces to optimize the medical materiel readiness of tactical Army organizations. FSD focuses on Reset and Left Behind Equipment, Plans, Operations, and Requirements, Production, and Assembly Management Materiel Fielding [(Total Package Fielding)].

Medical Maintenance Management Directorate (M3D). M3D ensures that every health care provider has the mission-capable medical equipment to deliver optimal health care support to America's Warfighter. M3D operates the AMEDD's three ISO 9001-registered, depot-level medical maintenance facilities; manages the AMEDD Maintenance Sustainment Program, serves as lead agent for the overall AMEDD National Maintenance Program and for Army Force Generation medical maintenance-related policy issues; and provides the Forward Repair Activity-Medical (FRA-M) in support of medical treatment facilities in Iraq and Afghanistan.

Force Integration & Operations Directorate (FIOD). FIOD provides medical logistics coordination to synchronize the USAMMA directorates/acquisition project managers and ensure that medical logistics solutions are available to support DoD and Department of the Army operations.



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Chief of Staff (CoS). The leaders and staff members within CoS office focus on the activities and key processes related to centralized support and shared services within USAMMA. The Enterprise Support Services Directorate staff provide support in the areas of property management, facilities and infrastructure, and information management and information technology. The Enterprise Resources Directorate staff provide support in the areas of human capital (civilian and military), financial and manpower management, and contracting management support.

Deputy for Acquisition (DfA). The leaders and staff members within the DfA office focus on the activities and processes related to all USAMMA integrated life-cycle acquisition projects. DfS office is composed of the following PMOs:

PMO, Integrated Clinical Systems (ICS). The ICS office executes a patient-centric approach to ensure the timely delivery of affordable, sustainable, interoperable, and information assurance-compliant capabilities for institutional and deployed medical treatment facilities. ICS programs are focused on imaging systems, imaging management systems, and clinical systems.

PMO, Medical Devices (MD). The MD office provides life-cycle management of all modified tables of organization and equipment devices and ancillary medical items supporting human and animal patient care, excluding imaging systems, across the full spectrum of field health care.

PMO, Medical Evacuation, Mission Equipment Package (MEDEVAC [MEP]). MEDVAC (MEP) office oversees and advances helicopter MEDEVAC equipment and subsystems. The goal is to synchronize the aviation community with the medical community to retrofit MEDEVAC legacy aircraft and newly produced aircraft with the best medical equipment and capability possible to support the wounded.

Q: *In what ways does USAMMA demonstrate performance excellence?*

A: USAMMA advances performance excellence as part of its Core Competency 4 using quality management approaches, methods, techniques, and tools. The agency's performance excellence framework supports the overarching Total Army Quality Management program, an integrated strategic management methodology practiced at strategic, functional, and tactical levels.

USAMMA's performance excellence framework is founded on the Army Performance Improvement Criteria and Malcolm Baldrige National Quality Award tenets (APIC/Baldrige). Performance excellence embodies several complementary and supporting approaches such as the Balanced Scorecard (BSC), ISO 9000 Quality Management System, Lean Six Sigma (LSS), and business process mapping/management.

Using the APIC/Baldrige criteria framework, USAMMA staff conduct periodic self-assessments. These self-assessments evaluate how well the staff perform collectively across seven interrelated and interdependent categories: leadership; strategic planning; customer focus; measurement, analysis, and knowledge management; workforce focus; process management; and results.

In general, BSC is a strategic change, performance measurement, and communication system composed of a strategy map and scorecard. The USAMMA strategy map (visual representation of cause and effect hypotheses) and scorecards (measures of success through project-like initiatives), enable USAMMA leadership and workforce to assess deployment of the agency strategic plan toward desired long-term objectives. Balance relates to consideration of several perspectives such as resources, learning and growth, processes, and customer and stakeholder. Linkages exist with other BSCs (up, down, across, and personal scorecards) and with LSS opportunities.



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LSS is a melding of lean manufacturing and Six Sigma. Lean manufacturing creates value by eliminating waste throughout the organization. Six Sigma is a method for measuring the performance of a process based on customer requirements. The design for LSS also builds lean and focused new processes. The DoD CPI involves tools and techniques for continuously improving processes, including using LSS. Process mapping endeavors at USAMMA give the leadership and workforce knowledge about the activities and procedures used to generate products/services.

The ISO 9000 Quality Management System comprises five international standards that provide guidance for the development and implementation of quality products and services. M3D maintenance operations (depots) are ISO 9001:2008 registered demonstrating these organizational elements are capable of effective and efficient practices that satisfy stakeholder regulatory requirements and customer needs. Essentially, ISO 9001:2008 certification means the organization element staff say what they do, do what they say, they prove it, and continually improve it.

Benchmarking is comparing products, processes, and the organization as a whole against high-performing organizations to identify strengths and gaps. Activity-based costing traces first the indirect and support costs against the activities performed and then assigns the activity costs to products/services and customers. Assigning the activity costs based on the quantity of each organizational activity consumed provides managers with knowledge about the consumption of resources throughout the value creation process.

In summary, performance excellence seeks to attain positive results through the linkage and optimization of all organizational strategic objectives, process improvements, and standardized procedures that deliver quality products or services required by stakeholders and customers with a minimal expenditure of resources.

Q: What is USAMMA's role in providing sets of grouped medical items?

A: Grouped medical items in the U.S. military are known by many terms including assemblies, assemblages, and sets, kits, and outfits (SKO). These assemblies range in size from small single-person combat medic kits to large combat support hospitals. There are three main types:

- Service-Unique (Major) Medical Assemblages – Managed by AMEDD and used primarily for the Army.
- Multi-Service (Minor) Medical Assemblages – Managed by the Defense Medical Standardization Board (DMSB) and used by multiple services.
- Deployable Medical Systems (also known as medical materiel sets or hospital modules) – Managed by the DMSB and used by multiple services.

USAMMA manages the processes of designing, procuring, and building medical materiel SKO.

Q: What has USAMMA developed to improve business operations?

A: In 2000 USAMMA developed a tightly integrated, web-based enterprise system. The Theater Enterprise-Wide Logistics System (TEWLS) application went live in 2002 at USAMMA, and the system expanded and extended globally to incorporate several other Army Medicine logistics commands soon afterwards. Now under the umbrella of the Defense Medical Logistics-Enterprise System (DML-ES), the TEWLS application has increased in its capability and functionality to provide a single instance database containing materials, customers, and vendors for the Army Medical Logistics Enterprise.





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For nearly 10 years, users of the DML-ES/TEWLS have managed more than \$1 billion in building and sustaining Army medical readiness, enabled acquisition and life-cycle management of Army medical assemblages, had annual production and time-definite delivery of greater than 2,500 individual assemblages, and annual acquisition of more than 3,000 equipment items.

The DML-ES/TEWLS Release 2 improved and expanded the system to include strategic programs for mobilization and deployment, theater supply chain management, and compliance with the Federal Financial Management Improvement Act.

Q: What products is USAMMA developing to support the Army Campaign Plan and Military Health System for the future?

A: USAMMA's primary focus is the acquisition of commercial-off-the-shelf (COTS) or modified COTS equipment for fielding to expeditionary medical treatment facilities. Advanced development activities are generally oriented on ruggedization of or enhancements to COTS systems with development of new capability only when no relevant or suitable COTS product exists. USAMMA PMO, MD has been instrumental in a myriad of advanced technology modernization activities. USAMMA led the activity to acquire a new operating room table when the previous table was clinically obsolete and parts were no longer available.

USAMMA was also instrumental in the rapid acquisition of the ambIT® infusion pump for delivery of pain medication. USAMMA is the lead developer for medical devices. USAMMA actively develops logistical products to manage materiel and supports programs to analyze existing technologies. CCM processes and materiel have been developed by USAMMA for the optimal preservation of temperature-sensitive products transported to customers in all locations. The Combat Support Equipment Assessment is a USAMMA program that provides information for the evaluation of equipment and technology. The Technology Assessment Requirements Analysis program conducts analyses of field medical materiel to develop acquisition strategies that ensure the quality of care to service members is optimized.

Q: How has USAMMA provided assistance to Operation Enduring Freedom (OEF) and Operation Iraqi Freedom (OIF)?

A: OEF and OIF remained persistent conflicts for many years, and USAMMA has actively modernized and transformed the medical logistics concepts and programs to provide better medical capabilities. The equipment, maintenance, and training provided by USAMMA were essential to the readiness of our operational forces during deployments to provide medical care in harsh field environments. During the early OIF conflict and as part of the shift of emphasis from OIF to OEF, USAMMA deployed its MLST to issue centrally managed materiel.

The OTSG Unit Deployment Package Program was provided for potency and dated medical materiel during OIF/OEF. USAMMA issued 143 unit deployment packages. The packages were issued to various units to include 10 combat support hospitals, 25 forward surgical teams, and 4 area support medical companies. USAMMA issued materiel from the APS Program from APS-3 (Charleston) and APS-5 (Qatar).

The types of units that received SC VIII medical materiel included two heavy brigade combat teams, one forward surgical team, two battalions, and four combat support hospitals. The Foreign Military Sales Program also has played an active role in supporting OEF/OIF. This support includes selling hospital x-ray and clinic equipment and medical equipment sets to Afghanistan.



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The OTSG Medical Chemical Defense Materiel Program continues to provide deploying forces with medical chemical defense materiel, which provides the Soldier with the capability to perform self-aid or buddy aid to treat injuries resulting from chemical, biological, radiological, nuclear, and explosive warfare agents.

One of the most significant changes in medical logistics between Operations Desert Shield and Desert Storm and OEF/OIF is a smaller medical footprint. Today 20-person forward surgical teams have replaced much larger mobile Army surgical hospitals, and 84-bed combat support hospitals and 44-bed early entry hospital elements have created faster, more deployable modules of the 248-bed combat support hospital.

These smaller lifesaving organizations require more flexible and timely SKO supply packages and faster line item resupply to support the same expected patient load. Medical logisticians are delivering such packages today in OIF. The configuration of these packages, according to sound business principles and medical practice, is one of the strategic missions of USAMMA. The use of the APS for SC VIII materiel enabled new on ground forces to engage in mission requirements with a much faster reaction time than capabilities allowed in the past.

Q: How has USAMMA provided medical maintenance assistance during the War on Terror in OIF?

A: USAMMA was nominated for the Surgeon General's Excalibur Award for implementing the forward repair activity-medical (FRA-M). Use of advanced medical technology on the battlefield has led to the lowest wound mortality rate in history. Deployed medical radiology systems have evolved from mirror-imaging fluoroscopy and wet-chemistry processing to multislice computed tomography, computed radiography, and digital teleradiology systems. Advanced medical systems, particularly on an austere battlefield, are a significant maintenance challenge for those who maintain and keep the equipment functional.

The implementation of the FRA-M has enhanced medical readiness by integrating civilian subject matter experts into the combat zone to assist, mentor, and provide critical back-up expertise to support our deployed biomedical equipment specialist 68As. These experts specialize in either imaging, laboratory, or pulmonary/anesthesia equipment. Deploying these sustainment-level technical skills forward on the battlefield minimizes the evacuation of critical medical equipment and dramatically reduces equipment downtime.

USAMMA deploys these medical equipment experts through a series of 120-day rotations and is currently on the 13th rotation. Feedback from the theater on the FRA-M has been phenomenal. The FRA-M concept has proven so successful that the AMEDD Center and School and the National Maintenance Program are now incorporating the concept into doctrine.

Q: Where can one find more information about USAMMA?

A: USAMMA has a public website accessible as links through the Fort Detrick and USAMRMC websites. The direct USAMMA website is <http://www.usamma.army.mil/>. The website provides additional details about the organization, products and services, and catalogs of materiel.

