



# JTF CAPMED Groundbreaking Newsletter



Volume 1, Issue 2 July 2008

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# GROUND BREAKING!

"The design of the new facilities will keep to the same standard of President Roosevelt's vision of what the hospital in Bethesda should look like. While the walls on the outside look like the ones built in the 40's, the inside will house the most modern medical resources in the world."

Joint Task Force National Capital Region – Medical Commander,  
– Rear Adm. John Mateczun



See next page for details



## Walter Reed National Military Medical Center Groundbreaking

*New integrated medical, research, teaching and care center of excellence at the hub of the nation's premiere military regional healthcare system, specializing in tertiary and casualty care for America's ill and wounded warriors and their families.*

BETHESDA, Md. Defense Department officials broke ground on the Walter Reed National Military Medical Center July 3rd, on the campus of the National Naval Medical Center in Bethesda. Construction of the 345-bed facility represents a new era of joint service provision of care to our nation's warriors and their families.



"Our warriors are our country's most important resource and when they return injured or ill from war, we must care for them without fail," said Deputy Secretary of Defense Gordon England. "This new joint facility will provide America's heroes and their families the most advanced medical care in the world."

The 2005 Base Closure and Realignment Commission recommended the relocation of certain Walter Reed Army Medical Center activities from D.C. to Bethesda, and establishing the Walter Reed National Military Medical Center. The medical center will provide tertiary, sub-specialty and complex medical services.

*Continued on next page*



# Noteworthy News

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## Walter Reed National Military Medical Center Groundbreaking (cont)



The \$970 million project will add or renovate 2.5 million square feet.

The Navy issued a Record of Decision May 6 to address actions necessary to build the Walter Reed National Military Medical Center. Assistant Secretary of the Navy for Installations and Environment, B.J. Penn, signed the environmental document, officially allowing construction to begin.

“The exterior design of the Medical Center will be in keeping with President Franklin Roosevelt’s vision of what the nation’s premiere military Medical Center should look like,” said Joint Task Force National Capital Region Medical Commander, Rear Adm. John Mateczun. “However, while the walls on the outside reflect the Medical Center’s historic significance, the inside will house the most state of the art medical resources in the world.”

Patients, staff members and visitors have already begun to see changes on the campus as crews prepare for construction.

“We must stretch the boundaries of progress and challenge complacency to provide unparalleled support to our warriors and veterans,” said National Naval Medical Center Commander Rear Adm. Richard Jeffries. “It’s our greatest desire to care for all the needs of our patients and their families. ‘Caring Is What We Do Best’ is more than just our motto — it’s our promise to this nation.”

Also, a new 120 bed community hospital at Fort Belvoir, Va. will provide non-tertiary care services to the Northern Virginia area. The Base Realignment and Closure law requires construction of the two facilities to be completed by Sept. 15, 2011.



## *Ft Belvoir Public Outreach*



May's Public Outreach event is part of a series of regularly scheduled meetings hosted jointly by the US Army Corps of Engineers (USACE), the Belvoir Integration Office, the Fort Belvoir Garrison Commander, and the Commander of Dewitt Army Community Hospital to keep the community informed about Corps construction activities at Fort Belvoir that impact them. COL Michael Rossi (USACE), COL Lauritzen, Fort Belvoir Garrison Commander, COL Moffatt, Deputy to the Garrison Commander for BRAC and Transformation, and COL Cannestrini, DeWitt Hospital Commander, each participated as part of the panel taking questions. COL Rossi gave an overview of all BRAC 2005/MILCON construction being executing at Fort Belvoir, with the primary focus on the new Fort Belvoir Community Hospital. COL Cannestrini discussed the mission of the new hospital, and its design as it relates to mission. USACE Engineer Subject Matter Experts (SMEs) on the hospital construction project were available to answer any questions.

There are four communities keenly interested in construction activities on the post, and events such as this are planned to focus on discussing the various impacts to the diverse communities surrounding Fort Belvoir.





## WRAMC Town Hall

Col. Patricia Horoho, Walter Reed Health Care System commander, announced 74 percent of retention survey respondents are willing to remain at Walter Reed Army Medical Center (WRAMC) until the facility closes by Sept. 15, 2011, if appropriate incentives are offered.

The 30-question retention survey, distributed to federal employees in April, garnered an 85 percent response rate.

"We believe that our WRAMC employees will remain with us, with the belief that the leadership will take care of them if they do remain," Horoho said. "What we didn't want was that the message to be sent to higher [command] that 74 percent are going to remain at Walter Reed without any special incentives."

The top incentives selected by survey respondents included a one-time \$25,000 bonus at the end of Base Realignment and Closure (BRAC), a 25 percent of salary bonus, and a \$10,000 annual student loan repayment plan.

"We at the leadership level absolutely will work very, very aggressively to get the right retention package in place to be able to properly incentivize you to remain with us, and then move to either [the new Walter Reed National Military Medical Center in Bethesda, Md., or DeWitt Army Community Hospital at Fort Belvoir, Va.], so we can make sure we really do have an integrated health care delivery system within the National Capital Area," Horoho said.

When asked which facility they preferred for relocation, 65 percent of respondents selected WRNMMC.

Horoho said that was expected, since the majority of Walter Reed staff lives closer to Bethesda. She said there was concern about manning the proper mix of specialists at each of the facilities.

"There's the big concern over whether or not we're going to have the right skill set and the right brain trust to be able to staff the 120-bed facility down at Fort Belvoir," Horoho said.

Walter Reed is working with the Secretary of the Army's human resources specialists to create an incentive package. Horoho said the staff will be informed of progress as it occurs.

Horoho also spoke about BRAC, medical service integration, and a new employee recognition program at a town hall meeting May 15.

According to the BRAC mandate, medical care currently provided at Walter Reed will be divided between WRNMMC and the expanded DeWitt.

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## WRAMC Town Hall

**"Part of our team will migrate north to the Bethesda campus to round out the new (WRNMMC), and part of the team and our capabilities are going south to the Fort Belvoir campus."**

**—COL Patricia Horoho, Walter Reed Health Care System Commander**

Horoho said she wanted staffers, when they think of Walter Reed, to think of both facilities.

"Part of our team will migrate north to the Bethesda campus to round out the new (WRNMMC), and part of the team and our capabilities are going south to the Fort Belvoir campus," Horoho said.

Groundbreaking for WRNMMC is scheduled for June 25. Horoho said the completion of the Environmental Impact Statement (EIS) makes it possible for work to begin on the expansion of facilities at Bethesda.

The design-build contract for both new hospitals allows for some flexibility in design as construction moves forward at both sites.

Horoho said relocation of Walter Reed's centers of excellence is being studied carefully, with the goal of maintaining current levels of care. Some of the centers have been allotted less space in the new hospitals.

"It may not be the exact thing we have here," Horoho said of the centers of excellence facilities. "But the right amount of space, configured to provide the same level of care at the same mission requirement." Subject matter experts briefed the joint task force on integration and the Congressional House Armed Services Committee.

Quality, Understanding, Excellence, Safety and Teamwork (Q.U.E.S.T.) is the new employee recognition program. It is designed, according to Horoho, to reward Walter Reed staff who goes above and beyond to provide a great therapeutic experience. The service themes of safety, courtesy, competence, compassion and connection to patients provide the basis of this program.

"When you look at compassion, it's a very broad category," Horoho said. Compassion includes everything from housekeepers' understanding that cleanliness improves the patient's experience to medical administrators' understanding that patients want timely service in a customer-friendly, timely manner.

The first Q.U.E.S.T. awards ceremony is scheduled for May 27. This first team members, which is currently estimated at 34, will receive the first awards. Compliments from patients were the key selection factor. —By Craig Coleman, *Stripe Assistant Editor*

## NNMC BRAC Town Hall

The National Naval Medical Center in Bethesda is hosting a series of informational Town Halls, as well. These are aimed at keeping the key leadership representatives involved and informed. They are being facilitated by Mr. "Ollie" Oliveria, with additional input and assistance from Mr. Jeff Miller, NNMC BRAC Transportation Manager. Topics include fencing, the mobilization and placement of construction trailers, how parking will be affected, how gate access will be affected, and a timeline of events, among other things. One of the strongest messages sent to NNMC Key Leadership during the first meeting was this:

**"Our work is not construction. It is not transition. Our job is to take care of patients."**

Walter Reed National Military  
Medical Center, Bethesda



May 14, 2008

*Defining the Future of Military Medicine*

"Today I saw an elderly couple walking through the hallways and they were clearly lost. I helped them get to where they needed to go, but it reminded me to bring the issue up with you (NNMC Leadership). If you see that our patients are struggling throughout this process, we urge you to offer your assistance—and to direct your staff to offer their assistance whenever they can. Customer Service will remain a key focus throughout this process!"

—Mr "Ollie" Oliveria, NNMC Facilities Director and BRAC Program Manager



## USUHS Town Hall



**Joint Task Force  
National Capital Region Medical  
(JTF CapMed)**

### USUHS Town Hall Meeting Brief

**BG Phil Volpe  
Deputy Commander**

**3 JUN 2008**

***"A world-class region, anchored by a world-class Medical Center."***

*The Honorable Gordon England  
Deputy Secretary of Defense*





## JTF CapMed Staff Ride



Memorial Day is an important time to remember that we as a Nation celebrate this holiday because of the heroic sacrifices of so many great Americans who bravely gave the greatest sacrifice in order to protect the many freedoms we enjoy. Each Memorial Day, many celebrations take place in the Nation's capital to remember the sacrifices of these individuals and the sacrifices made by their families and friends. These are sacrifices that Soldiers, Sailors, Airmen and Marines, and the people who support them, continue to make during current conflicts around the world. These men and women are America's heroes, and their ultimate sacrifice of laying down their lives for our country is memorialized on this special day.

To commemorate this special day, personnel from the Joint Task Force National Capital Region Medical (JTF CapMed) participated in a staff ride to the The Vietnam Veterans Memorial. At the Memorial, which consists of three separate sections: the

Three Soldiers statue (also known as The Three Servicemen statue), the Vietnam Women's Memorial, and the Vietnam Veterans Memorial Wall, a number of events and activities were held to commemorate the significance of the day.

Colonel John S. Murray, J7 – Director of Education, Training & Research, JTF CapMed, was a featured speaker at an event early in the day. Colonel Murray spoke about providing compassionate and ethical care during war. He reflected upon the experiences of military personnel who continue to strive to provide only the very best of compassionate care for troops who are deployed and those who have returned home after serving courageously in very demanding environments. Colonel Murray asserted, “Men and women in uniform epitomize America’s proud history of compassionate care, strong Service values and ethics. Holding fast to these principles, we will serve our great country, provide incomparable care to all those who need it and prepare for tomorrow’s challenges.”



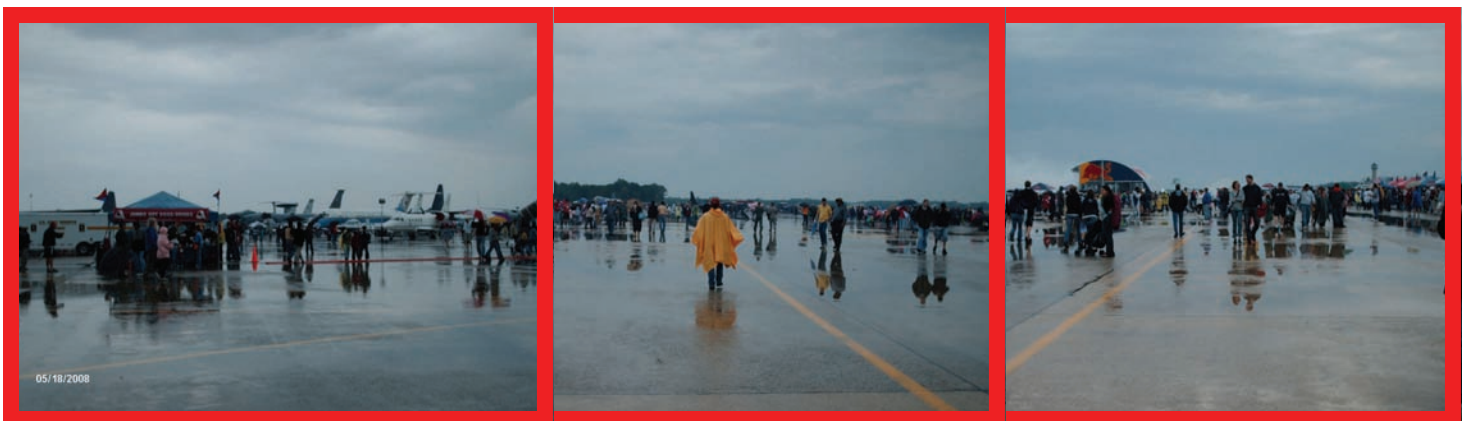
A short time later, Loretta Aiken, a nurse from National Naval Medical Center addressed a group of visitors at the Vietnam Women's Memorial. Ms. Aiken spoke about her 39 year career as a registered nurse and how she has spent those years working in the Veterans Administration Hospital and the National Naval Medical Center. She shared her experiences of working with young veterans during the Vietnam era and her experience working with the Soldiers, Sailors, Airmen and Marines of the current conflict.

Later in the day, Major General Carla G. Hawley-Bowland, Commanding General, North Atlantic Regional Medical Command and Walter Reed Army Medical Center spoke at the Vietnam Veterans Memorial Wall. MG Hawley-Bowland spoke on the significance of the Vietnam Women's Memorial being part of the Vietnam Veterans Memorial. She commented, “The Vietnam Veterans Memorial Wall of Names stands as a reminder for all Americans that many brave Soldiers, Sailors, Airmen and Marines served their country nobly during a war that divided our country politically and socially. The Vietnam Women's Memorial forever stands as a reminder that women served just as bravely, not just as women but as Americans.”

## *Joint Service Open House Air Show*



The Joint Service Open House on Andrews AFB was very well attended, despite inclement weather on the last day. It was very well supported by medics from through out the JOA. The above photo is of the opening day crew staffing the main aid station and medical control center in true Joint fashion: Army, Navy, Air Force, and Civilian!





## *Site Prep for NICoE*



Groundbreaking for The National Intrepid Center of Excellence (NICoE) for Traumatic Brain Injury (TBI) and Psychological Health (PH) occurred on June 5th. The NICoE is a new facility being donated to the DoD by a most generous gift from the Intrepid Fallen Heroes Fund, chaired by Mr. Arnold Fisher. The NICoE is designed to provide state of the art diagnostic capability, treatment, and research supporting Warriors with mild to moderate or complex PH/TBI issues.







*Construction workers from Arlington County office of Turner Construction Co. and Gilbane Building Co. of Providence, R.I., erect the first steel column of Fort Belvoir's new hospital July 9. The ceremonial event marked the start of vertical construction on the \$747 million state-of-the-art community hospital.*

*(Pictures and story courtesy of Jennifer Albert, DeWitt Health Care Network Public Affairs)*

## Construction of Belvoir hospital reaches milestone

FORT BELVOIR, Va. – Signifying the strength of "one team," military and civilian leaders among the medical and construction communities ceremoniously erected the first steel column of the new \$747 million state-of-the-art community hospital here Wednesday.

The event marked the start of vertical construction on the 1.2 million-square-foot facility, which is part of the Base Realignment and Closure 2005.

"This is an exciting day for not only JTF CapMed, the DeWitt Health Care Network and our partners, but for our beneficiaries as we all come together as one world-class team to support them," said Col. Daniel Gall, deputy commander for administration at DeWitt Army Community Hospital. "Our success depends on the support of our active, reserve, civilian and contract personnel, and we are committed to providing the best medical treatment possible to our beneficiaries. The new hospital embodies that effort."

Brig. Gen. Todd Semonite, U.S. Army Corps of Engineers North Atlantic Division commander, echoed those sentiments, telling attendees that construction of the Fort Belvoir Community Hospital is a "team effort."

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## Construction of Belvoir hospital reaches milestone (cont)

"Each and everyone involved in this project from the Corps team to the garrison to the JTF Cap-Med, Tricare Management Activity, and DeWitt Army Community Hospital to the Army Health Facilities Planning Agency to HDR/Dewberry and Turner/Gilbane joint ventures is a significant member of the team," the general said. "It will take everyone working together to build this hospital."

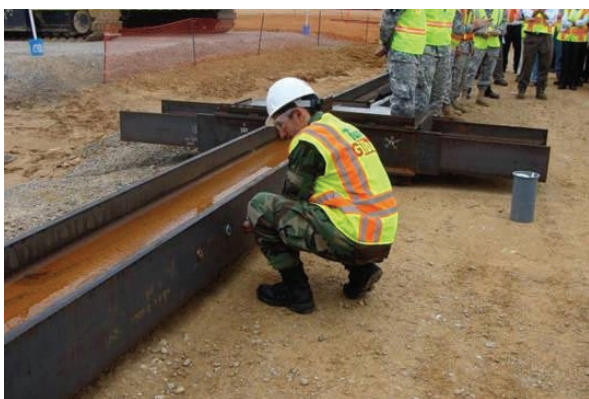
Semonite manages five engineer districts in the North Atlantic region, four of which are executing nearly \$4 Billion of BRAC 2005 projects at Fort Belvoir. "We must never forget that we are building this hospital for our heroes," said Col. Dan Anninos, U.S. Army Corps of Engineers Norfolk District commander. "It's all about taking care of our wounded and making sure our heroes have the highest quality of medical care we can give them."

Norfolk District is the Corps entity executing the hospital project at Fort Belvoir. The new hospital and its 120 inpatient beds will replace the 50-year-old DeWitt ACH and its 45 beds. Congress appropriated additional funds to accelerate construction of the facility in December.

Groundbreaking took place Nov. 8, and construction officials expect to be finished by late summer 2010.

The new facility will be part of an integrated health care network providing world-class medical care to service members, veterans, and military families, and includes the realignment of Walter Reed Army Medical Center and the Naval National Medical Center in Bethesda, Md.

Using a combined "design-bid-build" process for the hospital, the Army Corps of Engineers is accelerating design and construction while keeping costs and schedules under control, according to Corps officials. A joint venture of architectural engineering firms HDR of Alexandria and Dewberry of Fairfax is overseeing design, costs and scheduling. In turn, the joint venture hired the Arlington County office of Turner Construction Co., along with Gilbane Building Co. of Providence, R.I., to perform actual construction.



*JTF CapMed J-4 Director, COL John Bulick, affixes the JTF CapMed Commander's coin to the first vertical beam to be installed at Fort Belvoir's new hospital. The event marked the start of vertical construction on the 1.2 million-square-foot facility.*



*Commander's and unit coins from supporting medical and construction communities signify the strength of "one team" as they line the first vertical beam to be installed at Fort Belvoir's new hospital July 9.*

## *JTF CapMed* *Decision Brief* **APPROVED!**

### **Competency Based Orientation Program for Enlisted Medical Personnel**

On June 18, 2008 the J7 (Education, Training & Research Directorate) presented a decision brief to the Joint Transition Planning Board (JTPB) on a competency based orientation program for enlisted medical personnel in the Joint Operating Area (JOA). The purpose of this briefing was to obtain a decision on a Joint competency based orientation program for the non-licensed Army (68W), Air Force (4NO) and Navy (Corpsman/Basic Skills) enlisted personnel. Under the leadership of CMSgt Celia Dowers, J7 Chief, Enlisted Training, she and the J7 Enlisted Training Cell set forth over the past several months on reviewing and approving the use of this training program for enlisted medical personnel in alliance with similar efforts which have been developed and implemented at Landstuhl Regional Medical Center (LRMC), Germany. CMSgt Dowers noted, “the desired effect of this program is to standardize the scope of practice for this in garrison environment at all medical facilities in the JOA with Joint enlisted medical personnel and/or supporting Joint rotations for enlisted personnel.”

According to Colonel John Murray, J7 – Director of Education, Training & Research for Joint Task Force National Capital Region Medical (JTF CapMed), “with each Service’s unique training requirements, culture, medical delivery systems and enlisted medical scope of practices, it is evident from the start of this new TriService partnership that joint collaboration, training and medical enlisted competencies need to be established and promulgated to facilitate interoperability and maximize cooperation between the three Services.” Additionally, this program meets all of the JTF CapMed Commander’s priorities of casualty care, care for the caregiver, be ready now, regional healthcare delivery and common standards and processes (Figure 1).

A unanimous decision was made by all three Services to implement the competency based orientation program at all medical facilities in the JOA with Joint personnel and/or supporting Joint rotations for enlisted medical personnel. Over the coming months the Education, Training & Research Directorate and J7 Enlisted Training Cell, in collaboration with nursing subject matter experts from each Service, will coordinate implementation of this program with military treatment facility Education & Training Departments, establish a Joint training plan and create a Joint training record for documentation of competencies.



## JTF CapMed Picnic (Hail and Farewell)



June 4th marked both a happy and a sad milestone for JTF CapMed. It was the day of our first Command Picnic, and also our first Farewell Ceremony.



With great sadness, JTF CapMed bids Farewell to:

COL John Morse

COL Nadja West

Lt Col Judith Schulik

CDR Cathi Culver

Maj Jeffrey Ball

HMC Brian Wenzel

You will be missed!



# From the Deputy's Desk

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Greetings!

As you can read in this issue of our JTF CapMed Newsletter, there is a lot going on throughout the Joint Operational Area (JOA). One thing is for sure, what you do on a daily basis at our 4 hospitals and 33 clinics is a testament to your professionalism, commitment and selflessness. And thus, what you do is very much appreciated by our headquarters in Bethesda. You do us all proud and we are thrilled to be a part of your team!

Recently, we had the Groundbreaking Ceremony for the new construction (Phase 1) of the Walter Reed National Military Medical Center at Bethesda. This was huge news and is historic, not only because the President was the Guest Speaker, but because it is the FIRST truly joint military hospital in US history.

Many exciting initiatives are shaping up within the JTF CapMed. Soon we will have decisions made as to the type of authorization documents and civilian personnel system to staff our hospitals at Bethesda and Belvoir. It is important to understand that we are currently on a path to go from 4 Service hospitals in the NCR (1 Air Force, 1 Navy and 2 Army) to 2 large joint hospitals (Bethesda and Belvoir). Since these hospitals will be the hubs of our NCR healthcare system --- and be very large, modern and complex facilities --- and will serve Airmen, Sailors, Marines and Soldiers, and their families, and veterans --- it only seems natural and appropriate that they be jointly staffed, jointly operated, jointly managed, jointly led and jointly governed.

To quote a recent discussion among military leaders: *"IT IS TIME TO CREATE JOINT HOSPITALS IN THE MILITARY HEALTH SYSTEM IN THE 21<sup>ST</sup> CENTURY AND GET BEYOND THE INDIVIDUAL SERVICE HOSPITALS OF THE PAST CENTURY!"*

Personally, after visiting 33 of our 37 MTFs, we understand the many challenges and issues that our hospitals, clinics and clinicians face on a daily basis. We are paying attention to what you tell us. Clearly, the lack of medical department integration of systems, policies and procedures among our separate Service "medical departments" is negatively impacting you. We have got to fix that; and we will! In the next issue of our Newsletter I will elaborate further detailing the areas of inefficiency and ineffectiveness of having 3 separate "silo" medical departments and what we have discovered from the site visits. Then over the course of future Newsletters to come, we hope to reveal some of the initiatives we are heading-up in order to solve these challenges. The trick is getting to common processes and procedures. We cannot accept anything less if we desire to be better tomorrow than what we are today.

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# From the Deputy's Desk

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The JTF HQs is now at 55% staffing and we are rapidly moving to fill our vacancies and get to full operating capability by 30 Sept 2008.



As we work toward making this happen, and being better positioned to be value-added to all our MTFs, we know the *true* daily work of military medicine occurs — in our hospitals, clinics and patient care departments throughout the National Capital Region and the Joint Operational Area. We will not lose focus on the prize --- a quality, comprehensive, integrated, effective and efficient healthcare system.

Thank you for what you do for those patriots who have taken that sacred oath to serve our Nation and defend our Liberties. Never lose sight of what military medicine is truly about --- service and selflessness --- and that you play a vital role in all your actions and activities, everyday.

Enjoy the Summer; be safe; and take care of each other.

Proud to be one of you!

— BG Phil Volpe, Deputy Commander, JTF CapMed

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We want your stories and submissions! Send your news, photos, and advance notice of upcoming events to [JTF-PAO@med.navy.mil](mailto:JTF-PAO@med.navy.mil). Also, don't forget to check our website periodically for updates: [www.JTFCapMed.mil](http://www.JTFCapMed.mil).

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