

WORKFORCE TRANSITIONAL NOTIFICATIONS

By Rhonda M. Baxter
J1 Admin Assistant

The workforce of Walter Reed Army Medical Center (WRAMC), National Naval Medical Center (NNMC), and Dewitt Army Community Hospital (DACH) are essential to the future of Walter Reed National Military Medical Center (WRNMMC) and the Fort Belvoir Community Hospital (FBCH).

All permanent civilian employees at WRAMC, NNMC, and DACH will receive written notification of their future job assignments in writing no later than mid June 2010. The notification will state the position, organization, and location for civilian employee placements which is effective no later than September 15, 2011, or when the work transfers to the new medical treatment facilities.

The initial placement mapping is decided during the Workforce Mapping process in which department chiefs supported by subject matter experts, manpower and human resources experts work to staff their future departments.

Once employees receive their initial placement notification, they will have an opportunity to accept the assignment, request a change in the location, or indicate they do not intend to continue working when the transition occurs.

Their responses will be collected and tracked by the Civilian Human Resources Council (CHRC) who will be overseeing the maintenance plan for the placement process. If employees have requested a change, they will be considered for their preferred location as vacancies occur and they will receive an update notification letter when a change can be made. Additional information on the process for updating assignments will be provided soon.

The CHRC will also be making sure all recruitment done until the new facilities open will not affect placements of current permanent employees.

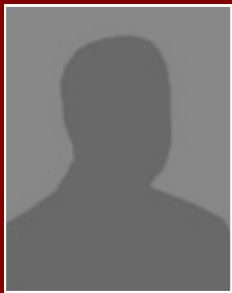
Stay tuned for more original source updates about the workforce transition process to WRNMMC and FBCH, and visit our website at http://www.jtfcapmed.mil

NEW SLEEP CENTER OPENED

Malcolm Grow Medical Center opened a new 10 bed Sleep Center March 1, 2010. The Sleep Center is under the clinical direction of Dr Mark Miller, Sleep Specialist at the National Naval Medical Center. This unit represents a joint venture between National Naval Medical Center (NNMC) and Malcolm Grow Medical Center and will provide sleep study services during renovation of the NNMC Sleep Center over the next 18 months. The Sleep Center is located on the second floor of the main hospital building (1050) in space vacated when the Labor and Delivery unit closed. The unit is solely staffed by NNMC sleep & admin technicians.



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CSM BROCK CSEL

JTF CAPMED LEADERSHIP

505 Days to a new era in regional healthcare

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JTF CAPMED Deputy Commander Announced

BG Steve L. Jones was born in Fort McPherson, Ga. He graduated from Vanderbilt University in 1974 and Vanderbilt University School of Medicine in 1978. He completed his training in Internal Medicine and Cardiology at Walter Reed Army Medical Center. He earned a master's of science degree in National Security Studies from the National War College.

Previous assignments include Assistant Surgeon General for Force Projection, U.S. Army Medical Command; Command Surgeon, U.S. Army Cadet Command; Command Surgeon, Multi-National Force-Iraq; Command Surgeon, Combined/Joint Civil Military Operations Task Force-Bagram, Afghanistan; Commander, Blanchfield Army Community Hospital; Command Surgeon, United States Southern Command; Medical Director, TRICARE Northeast; Commander, DeWitt Army Community Hospital; University Physician, National Defense University; Deputy Commander for Clinical Services, Womack Army Medical Center; Commander, Medical Element, Joint Task Force Bravo, Honduras; Division Sur-



geon, 25th Infantry Division (Light); Director, Coronary Care Unit, Director, Cardiology Clinic, and Assistant Chief, Cardiology Service, Tripler Army Medical Center; and Director, Cardiology Clinic, Walter Reed Army Medical Center.

BG Jones is a graduate of the U.S. Army Command and General Staff College, Armed Forces Staff College, and National War College. He is a Fellow of the American College of Cardiology, a member of the American College of Phy-

sicians, and American College of Physician Executives.

His awards and decorations include the Defense Superior Service Medal with oak leaf cluster, Legion of Merit with second oak leaf cluster, Bronze Star Medal with oak leaf cluster, Defense Meritorious Service Medal with oak leaf cluster, Meritorious Service Medal with third oak leaf cluster, Joint Service Commendation Medal with oak leaf cluster, Army Commendation Medal with oak leaf cluster, Army Achievement Medal with oak leaf cluster, Afghanistan Campaign Medal, Iraq Campaign Medal, Global War on Terrorism Service Medal, Korean Defense Service Medal, Humanitarian Service Medal, National Defense Service Medal, Joint Meritorious Unit Award with oak leaf cluster, Army Superior Unit Award with oak leaf cluster, Combat Medical Badge, Ranger Tab, Air Assault Badge, Parachutist Badge, and Expert Field Medical Badge.

ANTI-TERRORISM CORNER

By Jerry L. Vignon
J5 AntiTerrorism Planner

You may have noticed recently at many DOD installations random checks of bags and ID cards as you approach entrances. These random checks are a very good example of what is called enforcement of Force Protection Conditions (FPCON). FPCON is a DOD-approved system that standardizes the Departments' identification and recommended preventive actions, and responses to terrorist threats against U.S. personnel and facilities.

This system is the principle means for a commander to apply an operational decision on how to protect against terrorism and facilitates, inter-Service coordination, and support for anti-terrorism activities. (DOD O-2000.12-H)

There are a number of prescribed actions that we can take as FPCON levels go up. In future editions of the JTF CAPMED Newsletter, we will discuss some of these actions in order to

educate and raise awareness of protective measure, both passive and active.

Force Protection Conditions Descriptions:

NORMAL Applies when a general threat of possible terrorist Activity exists but warrants only a routine security posture.

ALPHA Applies when there is a general threat of possible terrorist activity against personnel and installations, the nature and extent of which are unpredictable.

BRAVO Applies when an increased and more predictable threat of terrorist activity exists.

CHARLIE Applies when an incident occurs or intelligence is received indicating some form of terrorist action against personnel and installations is imminent.

DELTA Applies in the immediate area where a terrorist attack has occurred or when intelligence has been received that terrorist action against a specific location is likely. Normally, FPCON DELTA is declared as a localized warning.



SUCCESSFUL CULTURAL INTEGRATION WITHIN THE JTF CAPMED JOA

By Colonel John Murray
J7 Director, Education, Training & Research

Joint Task Force National Capital Region Medical (JTF CAPMED) is tasked with creating a world-class Joint integrated health care delivery system in the National Capital Region (NCR). In order for the JTF CAPMED Joint Operating Area (JOA) integrated healthcare delivery system to fulfill its mission and meet the expectations of multiple stakeholders, including most importantly, the wounded warrior and his or her family, JTF CAPMED must successfully “merge” three or more distinct Service cultures.

Cultural integration presents a notoriously difficult challenge for any large organization. JTF CAPMED faces unique and acute cultural integration challenges as it attempts to integrate deeply embedded military cultures, while managing many moving parts, many diverse groups and interests, and a varying commitment to the envisioned future state.

Long-term cultural cohesiveness requires JTF CAPMED to simultaneously lead, implement, and support three important cultural initiatives:

1. Create culture: define and design a new (integrated/best of) culture.
2. Integrate culture: integrate diverse stakeholders (who currently have strong ties to an existing culture) into a new culture.
3. Embed culture: ensure that newly integrated culture is thoroughly embedded into the organization.

In order for JTF CAPMED to develop and implement timely and relevant strategies and activities to support each of the three

simultaneous cultural initiatives, the following three phases of integration will occur:

Pre-Integration: the phase of work that precedes physical integration—i.e. the official opening of Fort Belvoir Community Hospital (FBCH) and Walter Reed National Military Medical Center (WRNMMC).

Integration: the types of activities and strategies that need attention once the integrated care delivery has begun. In other words—once FBCH and WRNMMC are online and operating.

Post Integration: the strategies that will ensure the cultural integration “sticks” after the initial start-up phase.

Cultural integration and cohesion is not easy and will take several years to achieve. The journey will not take place without some challenges along the way. The strategy highlighted provides a roadmap for achieving an integrated culture—a culture that will support the mission of a Joint military health care delivery system across the JOA that offers the best option for patients, their families, their service providers, and the American taxpayer. It is essential that the JTF CAPMED JOA approach this endeavor thoughtfully and thoroughly—with the appropriate input, support, and resources—from all of its stakeholders. Over the next four months, you can expect to see this cultural integration plan unfold. In the next article in this newsletter, CSM Brock provides just one example of why cultural integration is crucial to success.

COMMAND SENIOR ENLISTED LEADER’S PERSPECTIVE

How To ‘Address’ Your Sister Service Personnel...

In a joint environment, it’s often a challenge to get each Service’s proper address of one another correct. For the Officer ranks, ‘Sir’ and ‘Ma’am’ usually suffice for proper address. But when it comes to the enlisted rank structure, people often get confused.... ‘How many stripes, rockers, stars, something in the middle or not.... Oh brother! I’m so confused!!!’ If you come across a Marine and don’t know his or her rank, addressing them as ‘Marine’ will usually suffice. But the rest of the Services have several addresses, dependent upon your rank.

Here’s a quick guide:

Enlisted---

Army: Private, Specialist, Corporal, Sergeant, First Sergeant, and Sergeant Major.

Navy: Seaman, Petty Officer, Chief, Senior Chief, Master Chief, and Command Master Chief.

Air Force: Airman, Sergeant, First Sergeant, Chief & Command Chief.

Marines: Private, Lance Corporal, Corporal, Sergeant, Staff Sergeant, Gunnery Sergeant, Master Sergeant or Top, First Sergeant, Sergeant Major, & Master Gunnery.

Officers---

Army: Lieutenant, Captain, Major, Colonel, and General.

Navy: Ensign, Lieutenant, Lieutenant Commander, Commander, Captain, and Admiral.

Air Force: (same as Army)

Marines: (same as Army)

****Bottom line is study the rank charts and you can’t go wrong!**

Good luck and happy addressing! Always give the greeting of the day with dignity and respect. (BTW~ don’t forget to salute when appropriate!) For more info about military ranks, check www.militaryfactory.com/ranks/navy_ranks.asp

CSM Donna Brock



PARTNERSHIP TO PROVIDE INPATIENT OB/GYN Services

Joint Base Andrews, MD. – Beginning in February 2010, Malcolm Grow Medical Center (MGMC) will be partnering with the Southern Maryland Hospital Center (SMHC) for obstetric and gynecologic (OB/GYN) services. Inpatient OB/GYN procedures, including major gynecologic surgery and full service inpatient obstetric care for expectant mothers, will be provided by MGMC healthcare professionals using facilities at SMHC.



Due to the decision of the Base Realignment and Closure Commission, the capability for inpatient overnight stays will no longer be available at MGMC as of September 2011. Partnering with SMHC in advance of this date “will allow us to preserve these capabilities and offer enhanced full-service OB/GYN care for military beneficiaries,” notes Maj. Gen. Gar Graham, Commander of the 79th Medical Wing.

“It is indeed a privilege to be of service to the women and families of Joint Base Andrews. SMHC is ready to assist expectant mothers with their childbirth experience in a caring, warm, and highly professional setting,” says Mr. Michael Chiamonte, SMHC Chief Executive Officer.

Lt. Col. Kathryn Tate, commander of the 779th Surgical Operations Squadron, explains that outpatient OB/GYN services will continue to be provided at MGMC. This includes prenatal care, well-women care, specialty GYN consult appointments, same day surgery and fetal testing. Expectant mothers will receive their routine prenatal care with fully credentialed Air Force military and civilian obstetric and gynecologic providers. “And when it’s time for delivery, an Air

Force provider will be at Southern Maryland for the birth of the baby and any other inpatient obstetric services that may be required,” reports Lt. Col. Tate.



SMHC is a full service medical center, recognized for its center of excellence in maternal and child health. The center has eight labor and delivery rooms and 16 postpartum rooms to provide a comfortable environment. When needed, operating rooms dedicated to OB care are located on the unit for Cesarean births or special procedures. Additionally, SMHC has an onsite Level II Special Care Nursery capable of providing high-risk newborn care to infants delivered as early as 32 weeks of gestation.

“We are proud to be of service to the women and men of the United States Air Force, and we will do everything in our power to make these special patients feel comfortable, safe and loved,” says Mr. Chiamonte.

JTF CAPMED THE VOICE



JTF CAPMED embraces Social Media. Visit our site at www.twitter.com/jtfcapmed

J3 cataracts & skin cancer linked to life-time sun exposure. Max protection: hats, sunglasses, long-sleeved shirts & SPF 15 sunscreen.

J7 discussed parameters for a clinical research fellowship with the MEDCOM Director of Graduate Medical Education

J7 presented research on "Meeting the Psychosocial Needs of Siblings of Children with Cancer" at Boston Children's Hospital & Harvard U School of Medicine.

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<i>FACEBOOK</i>	<i>www.facebook.com/pages/Bethesda-MD/JTF-CapMed/88920054179</i>