

LEADERSHIP



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Commander



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Deputy Commander



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The VOICE

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days to a new era in
Military Regional
Healthcare

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Civilian Personnel – 2010 In Review and What's Up For 2011

Debra Edmond, Special Assistant
for Civilian Human Resources

In the January 2010 issue of *The Voice*, I wrote “Change is hard” - a summary of the Civilian Human Resources Council’s experience in 2009, its first full year on the job. It is now January 2011 and I am back again to say that change isn’t getting any easier but it is definitely happening. If you are a civilian employee at Walter Reed Army Medical Center (WRAMC), National Naval Medical Center (NNMC) or DeWitt Army Community Hospital (DACH), odds are that you were affected in some way by the work the Council accomplished in 2010 and you have an exciting 2011 ahead!

You may have been touched by the changes guided by the Council during 2010 if you were one of more than 4,000 employees who received a letter notifying you of your future assignment at Walter Reed National Military Medical Center (WRNMMC) or Fort Belvoir Community Hospi-

tal (FBCH). Or, you may be one of more than 100 employees who received a notice granting your request to change your location because the Council developed a procedure to follow up on employee requests for alternative work locations. If you receive an updated notification in the months ahead, you will see the result of the process created by the Council to continually update notifications as new employees arrive and as organization changes occur. Did you attend one of the Town Hall meetings or briefings featuring CHR Consultants Nory Hagerty and Katie Emery or members of your leadership team talking about the Workforce Mapping process? If you did, then you know about the Council’s commitment to keeping civilians informed.

So, what can you expect in 2011? First, you will hear more about one of the most transformational changes for civilian *(Continued on page 2)*

Follow-up Letters to Beneficiaries Will be Mailed Mid-January

Ann Brandstadter, J1,
Managing Editor, Electronic Media

In December, 38,000 beneficiary reassignment letters were sent to TRICARE Prime and TRICARE Plus enrollees who receive primary care services at the Walter Reed Army Medical Center, Washington, D.C., or the National Naval Medical Center, Bethesda, Md.

In mid-January, approximately 1,900 follow-up letters will be sent out to those patients who are dissatisfied with their new assignment.

Enrollees who expressed their dissatisfaction with their facility assignment will have the opportunity to provide feedback on where they would like to receive their primary care by filling out a form enclosed with the letter and returning it in the postage-paid envelope addressed to JTF CapMed. Beneficiaries will also be able to make comments or ask

questions regarding their projected enrollment site.

Not everyone who was dissatisfied with their assignment will receive this letter. Some beneficiaries’ concerns are of a more personal nature, and will be addressed personally by mail or with a phone call at a later date.

JTF CapMed has not yet received responses from all 38,000 letters, but did ask those who were sent letters in the first mailing to respond by the first week of February.

JTF CapMed would also like to kindly remind its enrollees that the National Naval Medical Center in Bethesda, Md., will be named the Walter Reed National Military Medical Center once the BRAC transition is complete.



COMMAND SENIOR ENLISTED LEADER'S PERSPECTIVE

GONE is 2010 and HERE we are...2011!!

CSM Donna Brock

This past year has flown by so fast that it has been tough to keep up with all the changes and planning going on! During 2010, the JTF Cap Med in concert with all the service components, has worked hard making plans for the new hospitals, writing and creating new joint policies and issuances, working on integration of the three service components, joined together to create joint training and work platforms, and joined together for our second, Joint Medical Holiday Ball and had a blast! We've identified personnel who have filled in as Transitional/Integration Department Chiefs and SEL's; we held our first joint training event for the enlisted in standardizing the way we pass medications; and we continued to bring our senior officers and enlisted leaders together to share their knowledge and expertise with each other in preparation for the opening/integration of WRNMMC and FBCH.

2011 will be a busy, BUSY year! With less than 250 days until the BRAC deadline, believe it or not, there is so much that still needs to be done! Not only must we continue to monitor and push forward with the completion of the construction of both hospitals, we must also concentrate on many things such as the proper manning and movement of our personnel. For our military personnel, that means lots of permanent change of stations/base movements will happen this year to fill the open slots at both hospitals. Although we would LOVE to keep every Soldier, Sailor and Airman that we can, we have to be realistic and know that some personnel will be departing the DC area and replacements will be reassigned. This will be a major undertaking and a huge learning curve/culture change for the new folks who haven't been living this process during the past

couple of years. We will need each and every one to assist in making this change smooth and painless for all. For our civilian workforce, the moves/changes of personnel as well as the adaptation to the new 'joint' environment will be a challenge as well. For the Navy civilian personnel, you'll be working closely with Army personnel and vice versa for the Army civilian personnel. We just have to work closely together to ensure that we are sensitive to each other's cultures and needs and work as 'One Team'!

So many things to do... So little time... Well, time to break out your checklists and start looking at all the little details and things that must be done in your area to help make this a successful year for the medical NCR! But also, while you start checking things off at the workplace, don't forget the important things that you need to concentrate on aside from your 'business day':

Take time out to be with family. Even if it means spending one hour or 15 minutes (hopefully it's more than that) each day with a spouse or child to do something that's important to you.

Take time out to stay healthy and fit. Whether you take a 20 minute run or power walk, go to the gym for an hour, or decide you want to start eating healthier—do it for 'you'.

Take time out to do 'whatever it is' that makes you happy or someone you care about happy. You owe it to yourself!

So . . . Are you ready???? Time to countdown--- 5, 4, 3, 2, 1--- We're off into 2011!! Be safe and have a wonderful start to this New Year!!!

Personnel

employees transferring to WRNMMC and FBCH – we will be DoD, rather than Army and Navy civilians. In December, the Deputy Secretary of Defense delegated the necessary personnel authorities to the Commander, JTF CapMed, to accomplish the transition. That crucial milestone has set the stage for a new round of information that will be coming soon in the form of Town Hall meetings, additional Frequently Asked Questions and orientation sessions. That information will be a part of a

broader cultural integration plan covering everything from hospital tours to upcoming changes in performance appraisals for many employees. We ask that you participate actively in every opportunity to learn more about your future as a DoD civilian and that you continue to ask questions and contribute to the conversation that will take us forward. Please check out previously published information on what the change to DoD will mean on the JTF CapMed website (<http://capmed.mil>) under Civilian Personnel and visit the website often for updates.





JTF CapMed Warrior Transition Division Utilizes Data to Plan Warrior Care

COL Julia Adams, J3, Chief, Warrior Transition Division

Joint Task Force National Capital Region Medical and Department of Defense leaders need real-time data on the Wounded, Ill and Injured population to accurately plan for and provide continuous health care during and after the September 2011 Base Realignment and Closure transition.

In November 2010 we requested information about WII from National Naval Medical Center and Walter Reed Army Medical Center. The information provided by WII Case Managers was analyzed to project Warrior medical treatment facility assignment at Walter Reed National Military Medical Center or Fort Belvoir Community Hospital. Considerations for the projected assignment included Warrior clinical needs, MTF capabilities, and non-medical attendant/Family accommodation requirements.

Naval Medical Center's Casualty Affairs Office, NNMC Case Managers and Walter Reed Army Medical Center's Warrior Transition Brigade Case

Managers provided information on Warriors; both Inpatient and Outpatient Warrior information was included.

Analysis of information indicates that sixty-four percent of NCR Warriors would be assigned to WRNMMC. The top five Primary clinical services utilized by the Warriors included: Ortho (26%), Physical Medicine and Rehab (12%), General Surgery (9%), Neurology (7%), and Trauma Surgery (6%).

Thirty-three percent of NCR Warriors were recommended to receive care at FBCH. The top five Primary clinical services utilized by these Warriors included: Behavioral Health (22%), Ortho (19%), Psych (18%), Physical Medicine and Rehab (8%), and General Surgery (4%).

Recommendations for the remaining three percent (3%) indicated the Warrior could either receive care at WRNMMC or FBCH, or transfer.

JTF CapMed Launches New Website: CapMed.mil

JTF CapMed launched a new website <http://capmed.mil> as a community relations initiative to reach out to patients and their families; beneficiaries, and military and civilian staff members working at hospitals and clinics across the National Capital Region with new information about military health care in the region.

The website includes information about the transition and integration of four hospitals into two by Sept. 15, 2011 when the Walter Reed National Military Medical Center opens on the campus of Bethesda, Md., and the Fort Belvoir Community Hospital opens on Fort Belvoir, Va.

New features include a video of the ongoing construction at WRNMMC and FBCH; and stories about TRICARE beneficiaries who received letters concerning the reassignment of Primary Care Managers and Military Treatment Facilities, and how the DoD continues to enhance world class health care in the National Capital Region.

New website features include links to NCR Hospitals and Clinics; and Patient Care Tools including a Blood Pressure Tracker from the American Red Cross and a Glucose Tracker from the American Heart Association. In the near

future, expect to see Louise Cooper, PAO Employment opportunities posted on the website.

In addition to videos and articles, more information is available in the redesigned left hand side of the website with a special section for Wounded Ill and Injured, including information about comprehensive casualty care, how Warriors will transition to WRNMMC or FBCH, and new lodging on campus.

There is a note to our patients, a map of Military Treatment Facilities in the National Capital Region and Pharmacy refill information.

All the JTF CapMed newsletters for 2010 are listed on the site. The newsletters feature articles about patient health care and new technologies, and a variety of health care topics. Join us as we move forward toward Healing Heroes with world class health care now and in the future as we countdown to a new era in military regional health care.

Note: <http://capmed.mil> replaces the former website known as <http://jtfcapmed.mil>

NNMC CAMPUS

THE DEPARTMENT OF VETERANS AFFAIRS OFFICE HAS RELOCATED TO BUILDING 57A (MEDICAL SWING SPACE) LOCATED NEAR THE NEX STORE AND DIRECTLY ACROSS FROM McDONALDS. THE VA OFFICE IS LOCATED ON THE SECOND FLOOR OF BLDG 57A AND ALL TELEPHONE NUMBERS REMAIN UNCHANGED.

FOR ADDITIONAL INFORMATION, PLEASE CONTACT MS. VERA CAMPBELL AT 301-319-8831, OR E-MAIL: VERA.CAMPBELL@MED.NAVY.MIL.

VISIT COMMUTER SOLUTIONS FOR ALL YOUR COMMUTING INFORMATION NEEDS:

<https://nmmcinfra/SiteDirectory/Facilities/commuter/default.aspx>



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Note from the Editor

Our copy deadline is the 5th of the month. Please remove all copy editing symbols before emailing; also if you are providing photos, please provide captions.

Email your submissions to:
louise.cooper@med.navy.mil, 301-412-2557.



JTF CapMed was established in September of 2007 as a fully functional Standing Joint Task Force reporting directly to the Secretary of Defense through the Deputy Secretary of Defense. The JTF is charged with leading the way for the effective and efficient realignment and enhancement of military healthcare in the NCR.

“A healthcare task force in the NCR capitalizes on the unique multi-Service military healthcare market in the region and provides the DoD with the opportunity to create a system that improves patient care through an integrated delivery system that promises world-class healthcare for beneficiaries. America's Military Health System is a unique partnership of medical educators, researchers, healthcare providers, and their worldwide personnel support.”

~VADM Mateczun

WEBSITE

www.capmed.mil

SOCIAL MEDIA

facebook

www.facebook.com/pages/JTF-CapMed

twitter

www.twitter.com/jtfCapMed

YouTube

www.youtube.com/watch?v=myDNmNgDnU

NSA Bethesda Parking News

- The America Garage, Bldg 63, has reverted to patient parking only.
- Patient Garage, Bldg 55, is now open for all staff to park in the upper levels of the garage.
- Carpool spaces have also moved to Bldg 55 and are located on the upper level, first deck, from the entrance off of RB Brown Drive. Car-pool permits are required for these spaces and are open from 0500-0900.
- NNMC Medical Education spaces have moved to the "G" lot, which is located along North Palmer Road, in close proximity to North Gate.
- Repairs are underway on the Staff Garage, Bldg 54. The repairs will occur floor by floor, will last for 8–9 months, and result in an average loss of 100-300 spaces. Once renovations are completed, repair work will shift to Bldg 55.
- North Gate is currently under construction and has resulted in the temporary loss of roughly 45 spaces in the "G" lot.

Winter Driving Safety Tips

Make sure you have a car emergency preparedness kit. Keep your car's gas tank full for emergency use and to keep the fuel line from freezing. Let someone know your destination, your route and when you expect to arrive. If your car gets stuck along the way, help can be sent along your pre-determined route.

If you do get stuck:

Stay with your car. Do not try to walk to safety.

Tie a brightly colored cloth (preferably red) to the antenna for rescuers to see.

Start the car and use the heater for about 10 minutes every hour. Keep the exhaust pipe clear so fumes won't back up in the car.

Leave the overhead light on when the engine is running so that you can be seen.

As you sit, keep moving your arms and legs to keep blood circulating and to stay warm.

Keep one window (away from the blowing wind) slightly open to let in air.

Read more winter safety tips at <http://www.redcross.org>.