



FOCUS



NORTHERN REGIONAL MEDICAL COMMAND

Stakeholders Report 2013

NORTHERN REGIONAL MEDICAL COMMAND



Total Operating Budget	\$ 1.0 B
Total Supported Beneficiaries	305,629
# of Army Health Centers	26
# of Army Medical Centers	1
# of Army Community Hospitals	2
# of Occupational Health Centers	8
# of Troop Medical Clinics	8



NRMC HISTORY

The U.S. Army Health Services Command was reorganized into regions, known as Health Service Support Areas, in 1992. The support area covering the north-eastern United States was the North Atlantic Health Service Support Area, head-quartered at Walter Reed Army Medical Center.

In October of 1993, the U.S. Army Medical Command (Provisional) was established. The new command, combining Army Dental and Veterinary Commands with general medical commands, was permanently authorized in 1994. The North Atlantic Health Service Support Area became the North Atlantic Regional Medical Command. At the time, NARMC was one of the Army's six regional medical commands, and was responsible for about 25 percent of MEDCOM's patient load in the United States.

Base Realignment and Closure in 2005 prompted a reorganization of the Army Medical Command. Walter Reed Army Medical

Command was closed and integrated with the National Naval Medical Center at Bethesda to create Walter Reed National Military Medical Center. In addition, the Joint Task Force Capital-Medical was established. The reorganization afforded the new Northern Regional Medical Command the opportunity to evaluate its health care delivery processes. NRMC sought to improve access to care for all beneficiaries.

The NRMC now stretches from Maine to North Carolina and from the Atlantic seaboard west to Wisconsin including a medical center, hospitals, clinics, Troop Commands and Warrior Transition Units. Across that broad swath of the United States, we deliver personalized and compassionate healthcare, supporting the Warfighter and their Family, and health care teams of superbly trained professionals.





NRMC CREST

The white field in the background of the crest represents the purity of intention in supporting the treatment of Wounded, Ill and Injured Soldiers as well as the sterile medical environment. The red, white and blue colors refer to the colors of the United States and are arranged in a rainbow to represent the hope of the patients and their Families under Northern Regional Medical Command's care.

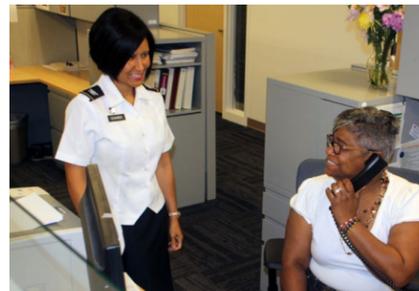
to oversee our Service Members' treatment during both war and peace.

The olive branch and arrows also recall the Seal of the United States of America and refer to the ultimate duty to serve and protect the country. The undulating water at the bottom of the crest refers to the Atlantic Ocean and the Great Lakes that border our region.

The Rod of Asclepius in the center is a historic symbol of the medical profession and is surrounded on either side by an olive branch and a bundle of arrows. The olive branch symbolizes peace, with the 13 olive leaves denoting the 13 original colonies whereas the arrows symbolize war, with the seven arrows representing the seven Medical Treatment Facilities under NRMC.



Together they refer to the duty of the Regional Medical Command



Welcome to the Northern Regional Medical Command 2013 Stakeholders' Report.

It is my great pleasure to inform you that our region, the most complex in Army Medicine, made great strides in 2013 in becoming the nation's premier military system for health. As we protect the health of the force and support the care of our Army Family, we continue to stress maintaining wellness rather than focusing primarily on healing.

That approach may be seen throughout our operations. In the areas of combat casualty care, the health and readiness of the force, health-care providers who are ready to deploy and our commitment to our families and retirees, wellness and prevention are our priorities. While our focus changed, we continued to provide world class healthcare to the wounded, injured and ill under our care.

The military treatment facilities and subordinate commands of the

Northern Regional Medical Command mirror that commitment. In the following pages you will learn what each does for our beneficiaries, including health care and medical support to senior commands on their installations, as well as specialty care they offer, enhancements and renovations of facilities and medical education programs that develop Army Medicine's future leaders. Our Patient-Centered Medical Homes are really bringing patients into collaboration with their health care teams in an effort to fight health challenges, while building a healthier Army. These accomplishments and others you will read about in this report, represent our effort to make our Army more resilient while making our nation stronger.

The Northern Regional Medical Command is Medic Strong!

Army Medicine: **Serving to Heal, Honored to Serve.**

MG M. Ted Wong
Commanding General

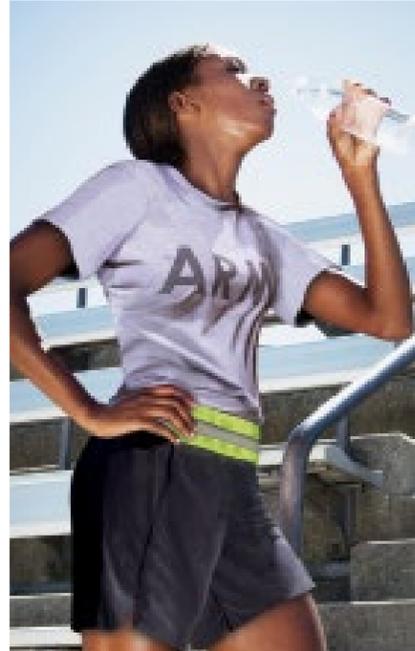


CSM Benjamin H.S. Scott Jr.
Command Sergeant Major



COL Laura R. Trinkle
Chief of Staff





ARMY MEDICINE

2020 CAMPAIGN

“Health for the Army means we have Soldiers who are fit, ready and resilient. For Army Medicine, this means understanding where health happens and the steps we personally must take to influence health.”

» Lt. Gen. Patricia D. Horoho



Healthcare in the United States is at a turning point, and Army Medicine has an opportunity to lead the nation in improved patient outcomes and Army readiness. While the wounds of war have been and will continue to be their to mend and heal, Army Medicine looks forward to transforming from a Healthcare System to a System for Health.

The Army Medicine 2020 Campaign Plan established the framework through which the Army Medicine Department (AMEDD) will achieve its 2020 goals and ensure its forces are ready to meet current and emerging medical support requirements. The key tasks are:

- Create a System for Health
- Influence the Lifespace
- Promote Healthy Lifestyles and Behaviors
- Provide a Consistent Patient Experience
- Strengthen Partnerships and Relationships
- Establish Operating Company Methodology
- Establish Metrics for Health
- Model Healthy Lifestyles
- Transform Reimbursement Systems
- Change the Conversations from Healthcare to Health
- Enable Active Communities

System of Health is a partnership among Soldiers, Families, Leaders, Health Teams and Communities to promote Readiness, Resilience and Responsibility.

Lifespace about one-third of life is spent working, another third with Family and friends and other third sleeping. Providers see patients on average about 100 minutes out of one year (525,60 minutes). Health occurs in the *Lifespace*, or in other words, the 525,500 minutes spent away from the doctor’s office. A person’s *Lifespace* can be shaped by making wise choices.

Maintain, Restore and Improve Health maintaining health describes daily efforts across Army Medicine which help our Soldiers and their Families maintain health. Restoring health describes our efforts once illness or injury occur and improving health describes our efforts throughout Army Medicine to turn the “Health” dial of our patients in the right direction.

Performance Triad is composed of Sleep, Activity and Nutrition and will be the foundation for Army Medicine’s transformation to a System For Health. Outreach and intervention programs based upon these three components will identify gaps and bring together a synchronized action plan to restore and improve the Health of the Force for the Army and Army

Medicine beneficiaries.

Operating Company is an organizational methodology that will enable Army medicine to move toward a System For Health. The framework is designed around integrated, standard processes across the organization; performance metrics and decision-making that are clearly defined for these processes, thereby driving accountability; and a high focus and priority given to process quality, repeatability, and standards to drive a better, more consistent patient experience while also containing costs.


LTG Patricia Horoho
 U.S. Army Surgeon General
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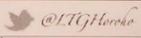

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 30 minutes this afternoon.
 30 minutes in the morning.

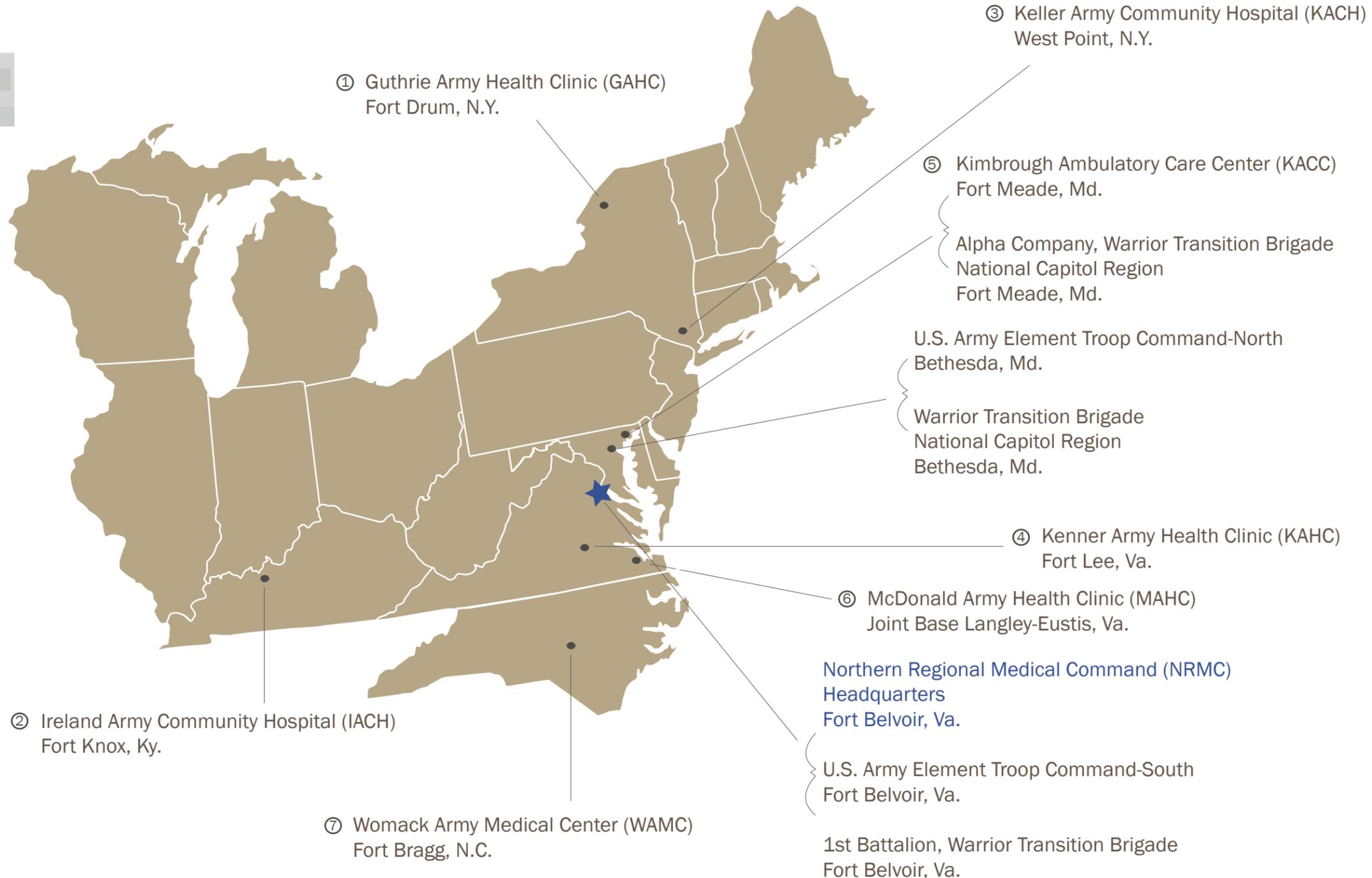
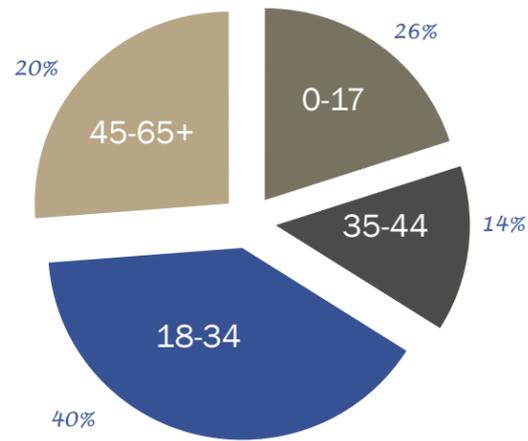
Nutrition:
 Eat your calories, don't drink them.
 No more caffeine until tomorrow a.m.

Sleep:
 Remove electronics from bedroom.
 Get 7 uninterrupted hours.

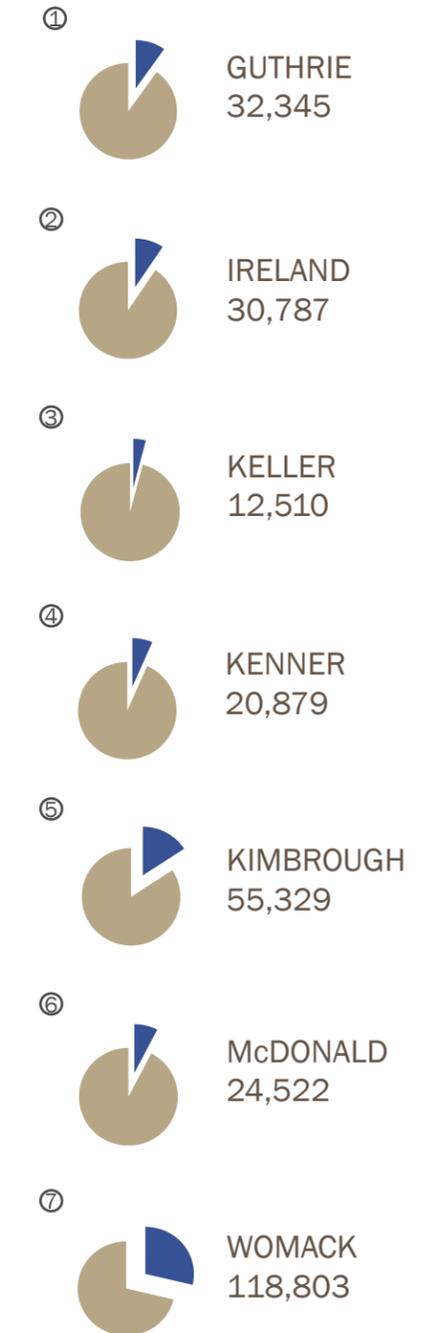
Refills: Lifespace

Signature:  @LTGHoroho

Population By Age



Tricare Prime Enrollment





COMBAT CASUALTY CARE

The NRMHC healthcare team saves lives and supports the health of Soldiers in combat environments. NRMHC residency programs and treatment facilities produce professionals who are leading Army Medicine into a future where training and technology combined with skill and personal courage to enhance battlefield survivability.

COMBAT CASUALTY CARE

NRMC is committed to providing the highest quality and standard of care. This is accomplished by producing skilled health care professionals ready to meet the demands of caring for wounded and ill Soldiers in challenging and austere environments.

Training and evaluation is the key and regional headquarters and military treatment facility staffs have facilitated training opportunities for both new and skilled doctors, nurses and medics.

Guthrie Army Health Clinic oversaw the clinical development and supervision of post-doctoral psychology residents from Walter Reed National Military Medical Center supervising nearly 900 visits of complex specialty care evaluations in 2013.

The Same Day Surgery team at Ireland Army Community Hospital provided valuable tactical combat casualty care for National Guard medics helping them sharpen their skills

prior to deployment.

Warrior Care — A wounded, injured or ill Soldier has, until his or her recovery is complete, a single mission: to heal. Northern Regional Medical Command's seven Warrior Transition Units (WTUs) and three Community-Based WTUs provide care, support and leadership.

Each WTU is a subordinate command of a NRMC military treatment facility (MTF.) These MTFs apply all the lessons learned in more than a decade of continuous war to help Soldiers transition — either back to their units, or as Army veterans valued as leaders in their communities.

Since the formation of the first warrior transition brigade at Walter Reed Army Medical Center in 2007, NRMC has helped more than 11,000 wounded, injured or ill Soldiers.

IDES— Through the Integrated Disability Evaluation System (IDES), the Department of Defense and the De-

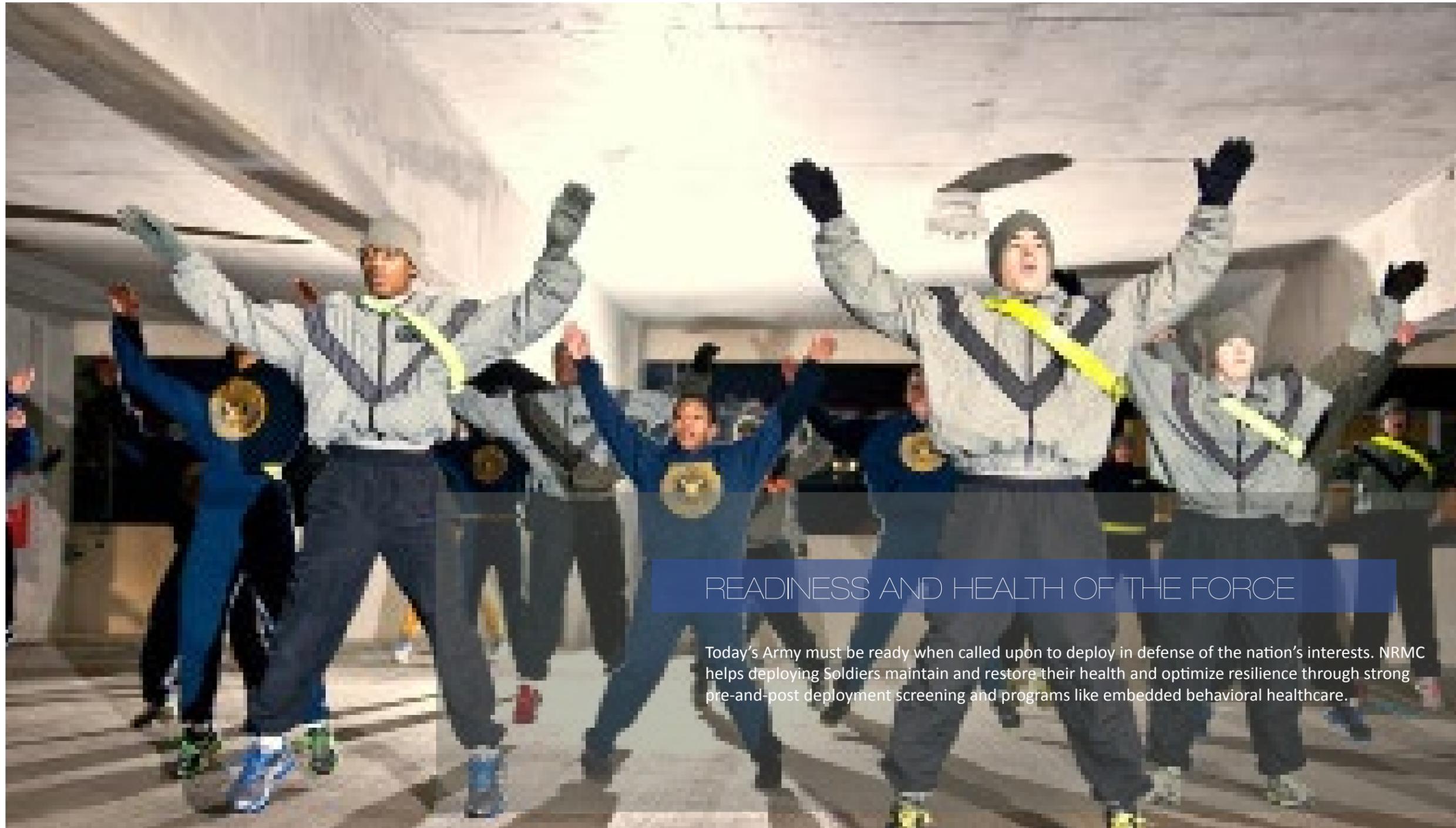
partment of Veterans Affairs work together to provide a seamless transition from military service to civilian life for wounded, ill or injured Soldiers. NRMC has been at the forefront of Army Medicine's efforts to streamline the process.

IDES continued to evolve in 2013 with a focus on standardizing narrative summary preparation and reporting throughout the region. The IDES Clinic at Kimbrough Ambulatory Care Clinic is among the region's leaders in managing the Modified Complexity-Based Medical Evaluation Program, which reduces the time Soldiers with less complex wounds spend in the medical evaluation board (MEB) process. This "fast track" enables Soldiers to complete the MEB phase without any sacrificing access to needed medical care. The Army Medicine goal is 100 days. At Kimbrough it takes 60 days or less.



Providing people and services to save lives and maintain health





READINESS AND HEALTH OF THE FORCE

Today's Army must be ready when called upon to deploy in defense of the nation's interests. NRMCM helps deploying Soldiers maintain and restore their health and optimize resilience through strong pre-and-post deployment screening and programs like embedded behavioral healthcare.

READINESS AND HEALTH OF THE FORCE

America's Army is a highly-trained and well-equipped force. However, the individuals in our Army are not immune to the stresses and the challenges of combat, family separations, illness and injury. These challenges, along with high risk behaviors, can adversely impact individual and unit readiness.

Through the Ready and Resilient Force (R2C) Campaign, the Army is enhancing readiness through its focus on resiliency at the unit and individual level for Soldiers, civilians, and family members. It's about changing culture of how the Army defines readiness and total fitness. R2C brings together several programs that encourage resiliency in the force by approaching the subjects like suicide and suicide ideation, sexual harassment and sexual assault, substance abuse and domestic violence in a holistic manner.

NRMC contributes to the R2C goals through behavioral health assets at our military treatment facilities, as well as behavioral health personnel

embedded within units, behavioral telehealth services and pre-and-post deployment health screenings.

In 2013, NRMC Clinical Operations Behavioral Health Section continued its expansion and became part of an overall resiliency program throughout the region. In addition to face-to-face visits, the region has increased use of tele-behavioral services (TBH). The primary goal for the tele-behavioral health service is to meet the needs of soldiers, retirees and their families where there is limited direct care and/or limited TRICARE network capacity. TBH provided cost-effective, high-quality access to outpatient behavioral healthcare for regardless of the patient's location. The TBH department completed approximately 30,000 patient interactions in 2013.

NRMC developed a regional pain management program to establish a comprehensive pain management team dedicated to safely treating patient pain, providing education, and restoring function in an effort to

empower patients and their families to maximize their quality of life. The resiliency of Soldiers, family members, retirees and civilians was also addressed through the Performance Triad, an Army Medicine program that stresses maintaining health habits of proper sleep, nutrition and activity to optimize performance.

At Fort Drum, N.Y., a Guthrie Army Health Clinic dietician developed a company level nutrition health campaign for 10th Mountain Division units. Sixty percent of the combat infantry units in the division learned ways to make better food choices.

Through behavioral health care, Performance Triad, and wide array of programs, NRMC is an integral partner in the creation of a more resilient Army.



An Army unit is stronger and more resilient than the sum of its individual parts.





READY AND DEPLOYABLE MEDICAL FORCE

NRMC is ready to deploy at a moment's notice with well-trained, resilient medical professionals who maintain the health and readiness of the force. NRMC is a true combat multiplier, whether deployed in combat or humanitarian operations. We keep Soldiers in the fight.

READY AND DEPLOYABLE

MEDICAL FORCE

NRMC continues to provide the resources to support the highest level of healthcare in all operational environments by providing personnel and equipment to meet the medical needs of units during all phases of mobilization and deployment.

Mobilization and medical readiness clinics at Fort Dix, N. J., Fort McCoy, Wis., and Camp Atterbury, Ind., continue to support contingency operations which include the Civilian Expeditionary Forces effort. Our occupational and public health clinics in Camp Atterbury; Rock Island Arsenal, Ill.; Detroit Arsenal, Mich.; and the Bluegrass Army Depot in Ky. provide daily support to the Soldiers and civilian workforce. In addition, we provide annual training site support to Camp Grayling, Michigan, throughout the summer months.

Through its Professional Filler System (PROFIS) and other individual augmentees, NRMC completed 140 tasking requests for critical support for Operation Enduring Freedom,

United States Southern Command (Guantanamo Bay, Cuba), United States Africa Command and Kosovo, as well as the transfer of the Leader Development Assessment Course from Joint Base Lewis-McChord, Wash. to NRMC.

NRMC coordinated with senior leaders, PROFIS managers and military treatment facilities in support of worldwide missions for a total of 112 nurses in 2013. Of those, 38 nurses deployed in direct support of Operation Enduring Freedom and Ulchi Freedom Guardian, one of the largest computersimulation exercises in the world.

In 2013, clinical operations focused on increasing Post Deployment Health Reassessment compliance within the 90-180 day window for Active Component Soldiers and Department of the Army Civilians, improve Periodic Health Assessment completion rates within the region and ensure 100% of profiles are entered in the electronic profile system through monthly statistical

reporting.

Training - Soldiers sharpened their combat edge through volunteer participation in physically and mentally demanding courses and completion, such as the Expert Field Medical Badge, Best Warrior and Air Assault Course to better balance the skills practiced in a clinical environment with the rigors of field medicine.



Influencing combat power through medically ready Soldiers and well-trained medical professionals





HEALTH OF THE FAMILIES AND RETIREES

A system for health benefits the entire Army Family. NRMCC's patient-centered approach to healthcare means that Soldiers, family members, retirees and other beneficiaries can count on wellness plans based on their own needs.

HEALTH OF THE FAMILIES AND RETIREES

Army Medicine continues to lean forward in becoming a system of health designed to address the individual healthcare needs of our beneficiaries.

Construction upgrades in operating rooms, patient rooms and pharmacies are increasing patient care capabilities and allowing for expansion of services throughout the region.

Patient Centered Medical Homes - NRMC has been actively engaging their clinics in the transformation to Patient Centered Medical Homes (PCMH.) In 2013, seven NRMC clinics achieved National Committee for Quality Assurance (NCQA) Level 3 recognition. NCQA's PCMH Recognition program drives improvement in the primary care setting. NCQA has a set of standards with specific criteria about becoming patient-centered through a coordinated team approach to care.

The medical home emphasizes accountability and partnership of both the military treatment facility and

the patient in holistic, integrated care. The goal is to improve both patient and provider satisfaction and the general health of the population through a focus on wellness and preventive services.

Community Based Medical Homes (CBMHs) are primary care clinics located off-post in the communities where Army Families live. CBMHs provide healthcare the way it should be – easy to access, patient-centered and team based. Currently, NRMC has two CBMHs at Fort Bragg, N.C., managed by Womack Army Medical Center.

Army Wellness Centers - The region's five Army Wellness Centers (AWCs) promote, enhance, and sustain healthy lifestyles to improve the overall wellbeing of Soldiers, family members, retirees and DOD civilians. The centers are integrated with the Patient Centered Medical Home as part of the Comprehensive Care Plan.

Along with improving fitness, AWC

programs can directly impact readiness by reducing lost or limited duty time and the number of Soldiers on physical profile.

Healthy Base Initiative - The military treatment facilities at Fort Bragg and Fort Meade are among 13 sites selected in 2013 to participate in the Healthy Base Initiative (HBI) demonstration project. HBI is aimed at increasing the health and wellness of the total force—Soldiers, civilians and family members. As part of this year-long demonstration project, participating installations will be examined for their ability to create environments that enable sustainable healthy lifestyles.

Programs like Kids Move at McDonald Army Health Center combine child-friendly nutrition education and physical activity with parenting classes to improve family communication and support reducing obesity, increasing physical activity, and preventing tobacco use.



A patient-centered approach to healthcare



GUTHRIE

ARMY HEALTH CLINIC



Fort Drum, NY

The U.S. Army Medical Department Activity (MEDDAC) Fort Drum and Guthrie Ambulatory Health Care Clinic (GAHC) provides high quality healthcare and leadership to maximize medical readiness of the force and improve, restore, and sustain the health of our patients.

Guthrie's improvements in 2013 include a Magnetic Resonance Imaging (MRI) for GAHC at a projected cost of \$2.7 million and a Soldier Family Care Clinic (owned by Garrison?) with a projected cost of \$15.7 to be completed in June 2015. Guthrie modernized its pharmacy in 2013 and renovated and relocated Clinical Operations, Laboratory, Radiology, Physical Therapy, Ortho-Podiatry, and the Immunizations Clinic, including Q-Flow KIOSK system.

In February 2013, Guthrie's Patient

Centered Medical Home (PCMH) received Level 3 National Committee for Quality Assurance Accreditation for the Joint Commission. This accreditation represents our strong commitment to the health of our beneficiaries and the Fort Drum community.

The Army Wellness Center (AWC) officially opened its doors to clients on October 1. Active duty Soldiers, family members, retirees, and DA civilian employees are able to benefit from the services provided at the AWC. There are a wide variety of services offered including fitness and metabolic testing, body composition analysis, and biofeedback sessions. Classes are also offered at the AWC include Up-ping Your Metabolism, Stress Management, and Healthy Sleep Habits. With the program offerings focusing on Sleep, Activity and Nutrition,



the AWC is a place where clientele can put the principles of the Performance Triad to practice.

Guthrie's footprint on Fort Drum includes: Wilcox Behavioral Health Clinic, Connor Troop Medical Clinic which received a major renovation restoration with a projected cost of \$7.5 million on September 2012 and estimated completion date of April 2015; Occupational Health, Neuro-Cognitive Assessment Testing Center, and the Preventive Medicine clinics, on north and south Fort Drum.

Wilcox Behavioral Health Clinic established an Embedded Behavioral Health team for 1CBT and relocated the team within the 1CBT footprint. Wilcox also established an off-post satellite clinic to provide increased behavioral health access for Soldiers. Wilcox received full accreditation during the full Joint Commission Survey in May 2013.

The MEDDAC also has an Obstetrics and Gynecology Clinic off-post in

addition, the MEDDAC has a satellite Occupational Health clinic at Watervliet Arsenal in Albany, NY. The new Company Headquarters and barracks complex of the 3rd Battalion, 85th Mountain Infantry Warrior Transition Unit provides state-of-the-art facility to the Fort Drum Warrior Transition service-members.



IRELAND

ARMY COMMUNITY HOSPITAL



Fort Knox, KY

Ireland Army Community Hospital's (IRACH) mission is to optimize wellness and military readiness of those entrusted to our care by providing exceptional holistic patient-centered health services with caring, compassion, and skill. Our vision is the premier regional system of health, exceeding patient expectations. In 2013 there were many significant accomplishments, particularly in Business Operations, the Department of Nursing and Pharmacy.

Ireland Army Community Hospital operated within the annual funding program despite significant reductions associated with the federal budget. The total execution for the year was \$135.4 million for medical operations supporting the six-state region that includes northern and central Kentucky, Ohio, Indiana, Michigan, Illinois, and Wisconsin. The hospital's Department of Nursing moved Customer Service into the Quality Management Division to improve customer satisfaction. This change had a significant positive

impact in the hospital's satisfaction rate.

In February 2013, the \$400,000 Main Pharmacy renovation was completed. This allowed for reorganization of workflow and patient perspective of the pharmacy process. A Lean Six Sigma, a managerial process to improve efficiency, project to reduce pharmacy wait times was also completed. Both the renovation and LSS project have had great success. Average

pharmacy wait times were below the target of 20 minutes for every month from March-September as a result of the renovation and LSS project. In addition, the pharmacy's Army Provider Level Satisfaction Survey score increased from 55.3% in August 2012 to 74.7% in September 2013. Ireland also opened a new Pharmacy at The Exchange doubling the space



of the former pharmacy.

Overall, our dedicated team of professionals works to provide our beneficiaries the highest quality healthcare and preventive services available throughout a six-state region. In addition to northern and central Kentucky, we serve Ohio, Indiana, Michigan, Illinois, and Wisconsin. FY13 was a solid year for workload and productivity improvements.



KELLER

ARMY COMMUNITY HOSPITAL



West Point, NY

The West Point Health Service Area (WP-HSA) and Keller Army Community Hospital (KACH) mission is to provide high-quality, patient centered care with a focus on health and wellness to improve readiness of the Force and enhance the lives of all beneficiaries.

The WP-HSA is comprised of Keller Army Community Hospital, an 18-bed community hospital located at West Point, N.Y.; Walson Medical Support Element, a medical clearance center for mobilizing and demobilizing service members, located at Joint Base Mc-Guire-Dix-Lakehurst, N.J.; four outlying occupational health clinics; and two Warrior Transition Units. The occupational health clinics are located at the following sites: Ainsworth Occupational Health Clinic, Fort Hamilton, N.Y.; Picatinny Occupational Health Clinic, Picatinny Arsenal, N.J.; Tobyhanna Occupation-

al Health, Tobyhanna Army Depot, Pa., and Natick Occupational Health Clinic, Natick Soldier Systems Center, Natick, Mass. The WP-HSA Warrior Transition Units are located at West Point, N.Y., and Joint Base Mc-Guire-Dix-Lakehurst, N.J.

Keller Army Community Hospital provides world-class medical services to the U.S. Military Academy, the Nation's wounded, active duty servicemembers, retirees and family members. Keller is proud to serve approximately 30,000 eligible beneficiaries.



The past year brought several important changes and enhancements to medical care and services.

Keller unveiled two renovated operating rooms with new flooring and walls, a humidity generator with control functions, and operating tables with hip and shoulder positioning devices. These operating rooms are equipped with Stryker In-

tegrated Operating Room System's high definition display monitors and surgical lights—one with a surgical camera embedded in the light. The two operating rooms can handle approximately 1,200 cases annually with the surgical team performing everything from arthroscopic repairs to knees and shoulders to hip arthroscopy, tonsillectomy and septoplasty surgeries.

In support of the Ready and Resilient Campaign (R2C), Keller partnered with the West Point Garrison to stand up the West Point Community Health Promotion Council (CHPC). This council integrated garrison, medical and mission efforts in support of the synchronization of health promotion, risk reduction, and suicide prevention programs. The CHPC identified goals, objectives and an implementation plan for the West Point community to meet requirements established by Army Health Promotion. Working groups were established for physical, social, emotional, spiritual and cadets. The CHPC is co-chaired by the MED-DAC and Garrison Commanders.

Construction on the \$28.5 million (53,100 square-foot) three-story clinic addition adjacent to the current hospital continues. Once completed, projected to open in early 2015, the clinic will enhance efficiencies in departmental workflows, centralize outlying clinic services and improve the delivery of care for patients.

Keller currently ranked first in the region for Overall Patient Visit Satisfaction according to the Army Provider Level Satisfaction Survey (APLSS) and is the leading Medical Treatment Facility in MEDCOM for patient satisfaction. For the last nine years, Keller has continued to exceed the civilian, Army, and Military Health System benchmarks for overall hospital rating.



KENNER

ARMY HEALTH CLINIC



Fort Lee, VA

As the heart of a system for health at Fort Lee, Kenner Army Health Clinic (KACH) is committed to promoting, sustaining and enhancing the wellness of the Fort Lee community, keeping our patients' trust through quality and compassion.

Kenner aspires to be Fort Lee's health care provider of choice and the DoD's premier integrated system for health.

Kenner is a multi-specialty outpatient clinic supporting over 20,656 Tricare Prime beneficiaries and an average daily student load of approximately 9,000 Soldiers in training. Services include Primary Care (Family Medicine, Pediatrics, Internal Medicine), Specialty Care (Orthopedics, Optometry, Physical Therapy, and Dermatology), and Ancillary Services (Laboratory, Radiology, Pharmacy, and Immuni-

zations). Inpatient and additional specialty care services are provided by a combination of civilian Tricare network partners, the VA Medical Center in Richmond, Va., and by other Military Treatment Facilities,



such as Portsmouth Naval Medical Center or Walter Reed National Military Medical Center, Bethesda, Md.

Kenner hosted a Joint Commission Survey team May 2013 and received accreditation for three years. Kenner is the only facility within MEDCOM to achieve zero findings by the Joint Commission in successive review periods. The other inspection occurred in 2010.

The past year has brought several important changes and enhancements to the care and services provided at KACH. These changes included implementation of the Performance Triad, Patient-

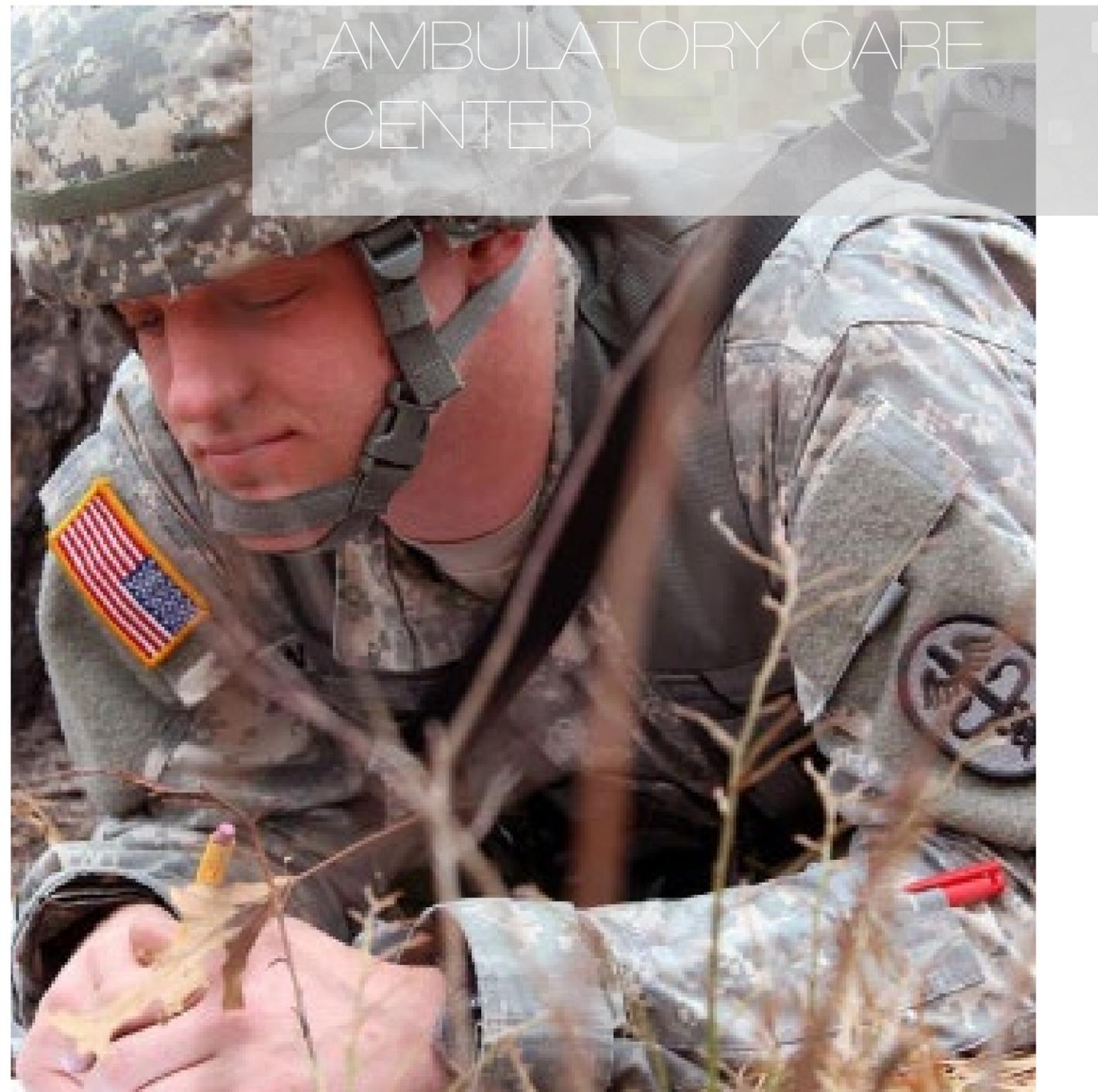
Centered Medical Home model (receiving level three recognition from the National Commission on Quality Assurance (NCQA)); enhanced focus and engagement with our patients on the importance of health screenings; and improved communication emphasizing the importance of health screenings through Kenner's website and use of social media.

Kenner implemented a new marketing campaign to capture feedback from its patients in regards to customer satisfaction through the Army Provider Level Satisfaction Survey (APLSS.) Included in the marketing effort included a new slogan, "Kenner Army Health Clinic is committed to the core!"

The clinic started several construction projects, valued at \$1.8 million, the creation of a lactation room for nursing mothers; renovation of several corridors on the first floor with a complete renovation of the reception/lobby desk area; and a restoration of the restrooms at the main entrance.



KIMBROUGH AMBULATORY CARE CENTER



Fort Meade, MD

Fort Meade Medical Activity is comprised of 10 subordinate clinics in Maryland, Pennsylvania, and Virginia; Dunham US. Army Health Clinic (USAHC), Carlisle Barracks, Pa., Kirk USAHC, Aberdeen Proving Grounds (APG), Md., Barquist USAHC, Fort Detrick, Md., Rader USAHC, Fort Myer, Va., and Fillmore USAHC, New Cumberland Army Depot, Pa. The three remaining clinics are a Troop Medical Clinic (TMC) at Fort Indiantown Gap, Annaville, Pa., Letterkenny Occupational Health Clinic, Letterkenny Army Depot, Chambersburg, Pa. and the Fort McNair USAHC at Fort McNair, Md. In addition, the MEDDAC has a TMC in Edgewood, Md., a subordinate installation of APG. The MEDDAC is also responsible for the medical clinic at Raven Rock Mountain Complex - known as Site R.

The need to expand the Kimbrough's clinical and behavioral health services to increase patient access to care resulted in the transition of six different administrative

services from building 2481 on Fort Meade and the 100 staff members who worked in these areas into four new semi-permanent buildings. The buildings house personnel of the Warrior Transition Unit, the Integrated Disability Evaluation System, Plans, Training, Mobilization, Security & Education, and Kimbrough's Medical Company. Renovations to expand the first floor of Building 2481 began in September adding 16 more offices for providers and support staff. The completion date is tentatively scheduled for August 2014.

Relocation of the OR and Same Day Surgery in 2012 provided additional space in wings 2A and 2B of Building 2480. Kimbrough capitalized on the opportunity to expand services in the Specialty Clinic by adding an Infectious Disease Clinic and a General Surgery Clinic. In addition, KACC created and expanded

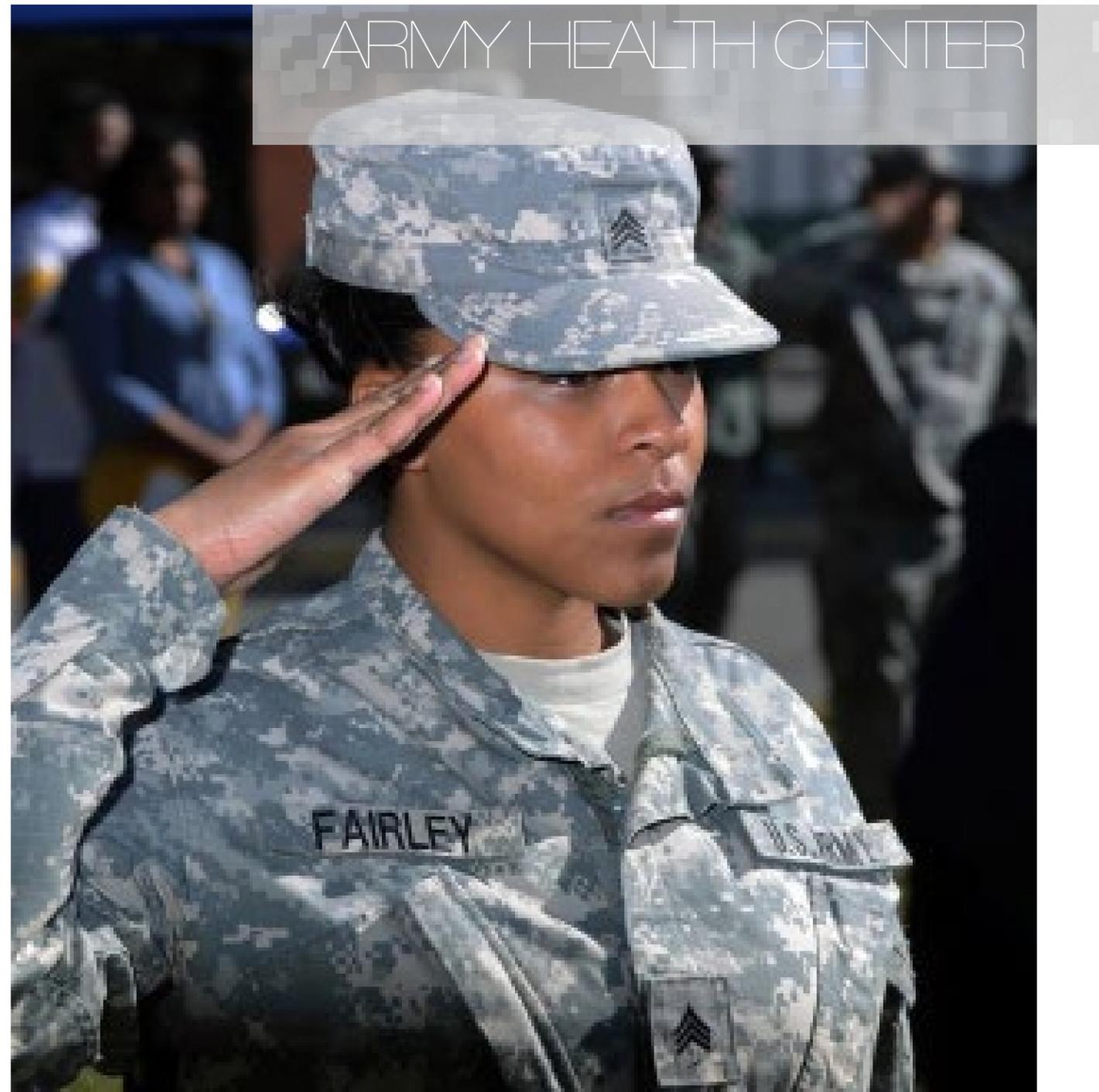
the Hand, Pain, and GI services and opened a new "Multi Service Clinic." Simultaneously, KACC received funding from NRMCM to stand up a Pain Management Augmentation Team (PMAT), which began seeing patients in June.

The center opened its new refill pharmacy in May 2013. The new location provides faster and more efficient service to beneficiaries, decreasing the normal wait time for refills by approximately 30 minutes.

In coordination with the Army Air Force Exchange Services (AAFES) and Fort Meade, funds for a full service Satellite Pharmacy are included in the design and construction of the new AAFES Shopping Center, scheduled to open either late summer or early fall of 2014.



McDONALD ARMY HEALTH CENTER



Fort Eustis, VA

McDonald Army Health Center (MCAHC) is located in the Hampton Roads area of Virginia at Joint Base Langley-Eustis. Major services include Family Health and Pediatric Care, Specialty Services, and Ambulatory Surgical Care Services for Active Duty service members, dependents, and military retirees and their Family members. MCAHC staff provide care in facilities on Fort Eustis and Fort Story, and support annual training site support at Camp Dawson, W.V.

MCAHC is also a joint member of the Tidewater enhanced Multi-Service Market. As military medicine has integrated among the branches of service and cost reduction has become a primary goal, MCAHC has renewed its commitment to optimize healthcare by partnering with Langley Air Force Base Hospital and Naval Medical

Center Portsmouth. Along with the Veterans Administration Hospital in Hampton, Va., these three military treatment facilities are now operating as one entity.

With fiscal uncertainty looming, 2013 proved to be quite tumultuous for the health care industry. Despite such obstacles as budget constraints, civilian furloughs, and a government shutdown that lasted several weeks, MCAHC focused on its ability to continue providing quality healthcare.

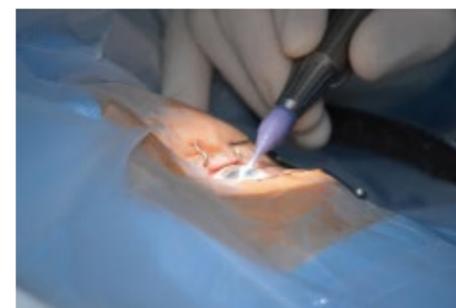
Modernization of its facilities included implementation of the Patient Centered Medical Home mode which improved quality of care by giving Soldiers a steady line of medical treatment from doctors and staff who know their patients, not just their records. Construction of two state-of-the-art operating rooms also increased patient care

capabilities, giving medical professionals new patient care capabilities, faster recovery times and additional services. Additional improvements included renovations to the Sleep Lab, G.I. Clinic and Family Health Clinic.

COL Glenda J. Lock assumed command of the health center in July 2013. As the MCAHC commander, she is also responsible for the Warrior Transition Unit at Fort Eustis, the Community Based Warrior Transition Unit at Camp Pendleton, Virginia Beach, Va., and three subordinate clinics – Troop Medical Clinic One and Troop Medical Clinic Two -- both at Fort Eustis, and Fort Story Health Clinic located at Joint Expeditionary Base Little Creek. Together, with 842 total staff members comprised of active duty military, Department of Army civilians, contractors, Red Cross volunteers, and students, MCAHC serves a population totaling 42,031 eligible beneficiaries.

MCAHC's mission is to provide

a system of health assuring the readiness of Warfighters and the wellness of Family Members and Veterans of the Armed Forces. Its vision is to be the Department of Defense health care facility of choice.



WOMACK

ARMY MEDICAL CENTER



Fort Bragg, NC

Womack Army Medical Center's mission is to provide the highest quality health care, maximize the medical deployability of the force and sustain exceptional education and training programs. In support of the Global War on Terror, Womack has deployed significant numbers of healthcare providers to overseas contingency operations. Womack serves all branches of the military: Army, Air Force, Navy, Marines, and Coast Guard, both Active Duty and Reserve. Womack's eligible patient population of 225,000 TRICARE beneficiaries is one of the largest in the Army. This includes active duty Soldiers, their Families, retirees and their families.

Womack Army Medical Center has five primary care clinics that include: Clark Health Clinic, Joel Health and Dental Clinic, Robinson Health Clinic, Troop and Family Medical Clinic and the Womack Family Medicine Residency Clinic that provide comprehensive primary care services. The clinics are open Monday through Thursday

until 9:00 p.m. with regular clinic hours on Fridays. We have added a consolidated clinic on Saturdays for our patients.

Womack also has two community based medical homes that provide primary care to Family Members of Active Duty Soldiers. These two clinics are the Fayetteville Medical Home and the Hope Mills Medical Home.

Womack will add a new Fisher House on the campus in the near future. The new Fisher House will be 10,000 square feet and will have 12 rooms all on the ground floor. This new facility is within walking distance of Womack Army Medical Center and the Warrior Transition Complex and is scheduled to open in February of 2015.



The Fort Bragg Blood Donor Center added a mobile unit. The 1,000-square foot mobile bus will allow the donor center on and off post locations.

The Fort Bragg Intrepid Spirit Center is a new facility that will specialize in caring for the wounded warriors in uniform suffering from traumatic brain injury. This facility will also include: psychiatric testing, chiropractic treatment, acupuncture, neurological psychology testing, physicaltherapy center, central park and a family room. It is scheduled to open in October 2015.



NORTH

U.S. TROOP COMMAND

During calendar year 2013, U.S. Army Troop Command-North continued to execute its mission of supporting Soldier's assigned/attached to Walter Reed National Military Medical Center (WRNMMC), the Dilorenzo Tricare Health Clinic and the Joint Pathology Center by providing leadership, command and control, accountability, readiness, administration, and training within a joint environment while managing the pre-deployment and post-deployment for Soldiers deployed in support of Overseas Contingency Operations and other world-wide missions.

Zielske was named the MEDCOM Equal Opportunity Advisor of the Year. Going forward, the Troop Command-North will continue to support WRNMMC with the best trained medical professional Soldiers in an effort to assist Army and Navy Medicine. Troop Command-North provides responsive and reliable health services to improve readiness, save lives, and advance wellness in support of the Fighting Force, Military Families, and all those entrusted to our care.

Additionally, the Battalion's Career Counselor, Sgt. 1st Class Danielle Archer, was named the NRMCC Career Counselor of the year for the second year in a row, Staff Sgt. Daniel Abeyta was named MEDCOM's 2013 Equal Opportunity Leader of the Year and Sgt. 1st Class Jason



Bethesda, MD



SOUTH

U.S. TROOP COMMAND

Troop Command-South (TCS) is an organization composed of three elements, Headquarters, Northern Regional Medical Command, Battalion Headquarters and U.S. Army Element-Fort Belvoir Community Hospital, consisting of more than 1,111 personnel assigned and attached at Fort Belvoir, Va. Troop Command-South's mission is to provide premier, world class administrative, operational, logistical, and legal support to our Soldiers and Civilians. TCS strives to create a culture of excellence, inspiring leaders to be an elite team speaking with one voice.



TCS serviced 670 personnel actions, 978 awards, 1,183 evaluations and hosted 12 Semi Centralized Promotion Boards, promoting 143 Soldiers. Operationally, 71 Soldiers deployed to theatre; TSC conducted seven M16/M9 ranges, qualifying

286 personnel and 164 Soldiers collectively graduated from the Warriors, Advanced and Senior Leaders Courses. TCS championed the Army G-1 Directives by promoting the Suicide Prevention, Risk Reduction and Leader Led Sexual Harassment/Assault Reporting Program training improving trained personnel by 67percent in

17 days, resulting in 100 percent compliance for 983 personnel.

Troop Command-South led the region in re-certification in the National Registry of Emergency Medical Technicians, achieving 100 percent re-certification 66 Combat Medics (68Ws) in Emergency Medical Technicians-Experienced in five months.

The Army Civilian Wellness Program was promoted within the guidelines of the Army Campaign Plan

for Health Promotion for assigned civilian personnel, permitting time for employees to participate in the installation activities. Participating personnel improved their fitness, resulting in a 10 percent loss of their collective body weight within our months and participated in Fort Belvoir Community Hospital health screening activities and nutrition classes.

During the June 2013 Non-Commissioned Officers (NCO) Induction Ceremony, 65 Soldiers were inducted into the NCO Corps.



Fort Belvoir, VA



WARRIOR TRANSITION BRIGADE

NATIONAL CAPITOL REGION

The Warrior Transition Brigade-National Capital Region (WTB-NCR) assists our Nation's most seriously wounded, ill, and Injured Soldiers as they work to transition back into the force or into the veteran community with dignity, respect and self-determination.

Emphasis is on rehabilitation and transition from the Soldiers in WTB-NCR. Partnerships with the federal, state, and local agencies continue to develop. This initiative has successfully provided our Soldiers with exceptional internship opportunities through the Operation War Fighter Program. As a result over 180 Soldiers were offered or received employment upon transition to civilian life during 2013.

To further develop connections with work sites, several occupational therapists (OT) participated in multiple tours of federal agencies to facilitate expansion of available internship sites, including National Parks Service, Smithsonian, NASA, etc. These tours and introductions

served to maximize Soldier participation in internships to almost 65 percent of eligible Soldiers. The internship program supports Soldier's individualized Comprehensive Transition Plan (CTP). OTs continued

close collaboration with the installation Education Center, and met with a representative at least once each month to review every Soldier assigned/attached to the WTB-NCR to discuss each Soldier's progress in education. The WTU-NCR's Rehab Department hosted the first Transition Checkpoint event, which included an all-inclusive transition fair. The event hosted 17 colleges, 30 federal agencies and 10 adaptive sports organizations.

The WTB-NCR Service Dog Training Program (SDTP) continues to develop and progress as a viable avenue to provide meaningful Career Edu-

cation Readiness (CER) preparatory intervention. SDTP greatly benefits Soldiers with Post-Traumatic Stress Disorder and Traumatic Brain Injuries heal through interaction and training with the dogs. The Uni-

form Services University of Health Sciences initiated inquiries as to the potential for conducting some aspect of research in looking at outcomes of Soldier intervention through this program.

The WTB-NCR supported 178 visits by general/flag officers, members of the U.S. Congress and Senate, foreign dignitaries and heads of federal departments and other distinguished visitors. Soldiers were able to explore activities such as: adaptive cycling, kayaking, fly fishing, swimming, horseback riding, hockey, trail walks, and others. Participation in these activities supported a positive healing en-

vironment and allowed Soldiers to participate in meaningful leisure activities to support and maintain their health and wellness throughout their attachment to the WTB-NCR.



Fort Belvoir, VA

Fort Meade, MD

Bethesda, MD





NRMC GET IN TOUCH

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