

Naval Medical Force Development Center (NMFDC)

Monthly Newsletter

August 2022 | Volume 3, Number 8

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FEATURE: MHQ/MOC REALIGNMENT

Bureau of Medicine and Surgery (BUMED), Naval Medical Forces Atlantic, and Naval Medical Forces Pacific are standing up **Maritime Headquarters (MHQ)** and **Maritime Operations Centers (MOC)**. The MHQ and MOC will enhance Navy Medicine's ability to provide ready Medical Forces, while simultaneously monitoring requirements for effective employment by Naval and Joint Force Commanders and improving support for the Chief of BUMED and the Navy Medicine mission.

MHQ

- Functional
- Programmatic
- Focused by Subject Matter
- Facilitate faster decision making and help Echelon 3 commands succeed
- Enhance, develop, and sustain ready Medical Forces for current and future operational requirements
- Align Navy Medicine processes with the Fleet for more effective and efficient coordination

MOC

- **Cross-Functional**
- Operational
- Focused by Time

GRAPHIC OF THE MONTH

Tools to Track and Enhance Readiness Proficiency

Navy Medicine enhances readiness proficiency tracking and reporting through web-enabled, on-demand tools, including the Naval Knowledge, Skills, and Abilities Proficiency Dashboard and MEDRED App (Featured in July NMFDC newsletter).



Schedule a Dashboard Demo with the NMFDC Team!

Email us at usn.ncr.bumedfchva.mbx.nmfdc---navy-ksa@health.mil

MEDIA HIGHLIGHT

Surgeon General: Future of Navy Medicine



Click here or the video above to listen to RADM Bruce L. Gillingham's (U.S. Navy Surgeon General and Chief of BUMED) message about Navy Leadership's implementation of the Distributed Maritime Operations Concept and the associated strategic organizational and platform changes (e.g., MHQ and MOC (described in the "Feature: MHQ/MOC Realignment" section above) within Navy Medicine.



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SPOTLIGHT: 2022 DHITS

On 17 AUG 2022, Mr. Steve Johnson (Army), CAPT Christopher Lucas (Navy), Mr. John Zarkowsky (Navy), and Col. James Sampson (Air Force) attended the 2022 Defense Health Information Symposium (DHITS) and conducted a panel (pictured in the bottom right) entitled "Technological Solutions to Track Joint Readiness Proficiency".*

Key Takeaways:

- Interoperable, actionable readiness reporting poses a complex challenge – there is no comprehensive solution to track direct patient care, training, and competency assessments (outside of providers within the Military Treatment Facilities)
- The Services need more robust IT support to collect and document clinical experience and training, and need to better capture and filter data for readiness assessments
- There needs to be a balance between the science and art of how data is used and collected to inform readiness

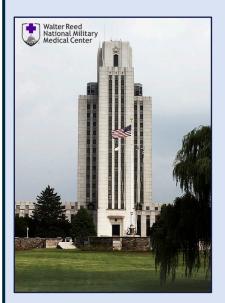
*Check out the "Graphic of the Month" to learn more about Navy Medicine's readiness proficiency tools.



Above Photo from Left to Right: Mr. Steve Johnson, Col. James Sampson, Mr. John Zarkowsky, CAPT Christopher Lucas



WRNMMC RECIEVES QVP STATUS



The American College of Surgeons (ACS) recognized Walter Reed National Military Medical Center (WRNMMC) as one of the first 25 hospitals verified through its inaugural Quality Verification Program (QVP). WRNMMC was the only Department of Defense facility to achieve the ACS quality verification.

To receive verification, a facility self-reports information and undergoes a confirmatory site visit to demonstrate commitment to the ACS' 12 QVP standards*. These standards include, among others:

- Leadership commitment and engagement to ensure surgical quality and safety
- A designated Surgical Quality Officer
- A Surgical Quality and Safety Committee
- · Continuous, data-driven quality improvement
- A formal peer-review process to monitor and address quality and safety issues at the individual surgeon level

*Click here to read more about WRNMMC's quality standards.

