



Navy and Marine Corps Public Health Center (NMCPHC)

Fiscal Year (FY) 2014
Command Annual Report

Unclassified // For Official Use Only (FOUO)



NAVY AND MARINE CORPS PUBLIC HEALTH CENTER
PREVENTION AND PROTECTION START HERE





NAVY AND MARINE CORPS PUBLIC HEALTH CENTER

PREVENTION AND PROTECTION START HERE

NMCPHC FY 2014 Command Annual Report

Unclassified // For Official Use Only (FOUO)

620 John Paul Jones Circle, Suite 1100
Portsmouth, VA 23708-2103

www.nmcphc.med.navy.mil

TABLE OF CONTENTS

LETTER FROM THE COMMANDING OFFICER	ii
EXECUTIVE SUMMARY	1
INTRODUCTION	2
Purpose	2
Background	2
NMCPHC Strategic Management System	4
Mission, Vision, and Strategic Goals.....	5
FISCAL YEAR 2014 YEAR IN REVIEW	7
Enhancing Communication and Coordination.....	7
FISCAL YEAR 2014 SUCCESS	8
Strategic Goal 1: Institutionalize Use of NMCPHC’s Products and Services	8
Strategic Goal 2: Optimize Navy and Marine Corps Public Health Programs and Services	13
Strategic Goal 3: Improve Communication of Priorities and Tasks with Leadership	17
COMMAND RESOURCES	20
Personnel	20
Financials.....	21
WAY FORWARD	22



Captain Scott R. Jonson

LETTER FROM THE COMMANDING OFFICER

The Navy and Marine Corps Public Health Center (NMCPHC) is dedicated to providing worldwide Force Health Protection services to Naval and Joint forces in support of the National Military Strategy. We offer health surveillance, epidemiology, and analysis; disease and injury prevention; and public health consultation and support capabilities to the Department of Defense (DoD) Public Health Community to improve the lives of our Sailors and Marines around the world.

As the Commanding Officer of NMCPHC, it gives me great pride to submit our Fiscal Year 2014 (FY14) Command Annual Report. This report highlights the significant accomplishments of our command during the past year and the impact of the accomplishments on the Fleet. It is a testament to the hard work and dedication of our talented staff members across the enterprise, and a key reference for us to review as we plan for the future.

At NMCPHC, we continually focus on ways to improve and optimize the way we operate in a lean fiscal environment. Our Strategic Management System continues to mature with support throughout all levels of the command. In FY14, we improved communication and coordination internally to ensure the entire command is aligned and driving toward a common vision. We also worked closely with the Navy's Bureau of Medicine and Surgery to ensure our mission, functions, and tasks meet our valued customers' needs, support Navy Medicine's goals and objectives, and align with higher authority requirements.

NMCPHC has defined and communicated a standardized list of capabilities, product lines, and products and services that demonstrate a focus on the Fleet and its constantly evolving requirements. Our continued efforts to establish structured process management and process improvement frameworks demonstrate a commitment to providing "best-in-class" public health products and services.

In FY15, we will maintain our commitment to addressing ever-emerging public health concerns, while protecting the health and well-being of our Nation's Sailors and Marines. Our focus will center on effective communication, coordination, and collaboration with our internal and external customers and partners to re-validate NMCPHC as an invaluable Navy Medicine and Defense Health Agency asset.

The future holds many challenges for NMCPHC, but I am confident our great staff will meet them "head on" with continued professionalism, enthusiasm, and dedication. The accomplishments of this past year are a preview of the mission-critical products, services, and innovations we will provide in the coming year to enhance the operational readiness and health of our deserving warfighters.

Very respectfully submitted,

Scott R. Jonson

Captain, Medical Service Corps
United States Navy
Commanding Officer



EXECUTIVE SUMMARY

This FY14 Command Annual Report provides a comprehensive account of NMCPHC activities and accomplishments throughout FY14. As a fundamental element of NMCPHC's Strategic Management System, it captures command successes, achievements, and communicates the performance and outcomes of the NMCPHC Strategic Plan.

In FY14, NMCPHC made considerable efforts to improve operations both internally and externally. The focus was to optimize efforts and actions, in support of Navy Medicine Goals, and align with customer needs; to provide the greatest value and impact to the public health community.

As stated in the command's strategic goals, NMCPHC is striving to validate itself as the "go-to" resource for public health products and services, optimize command programs to address customer needs and feedback, and align resources to requirements to operate efficiently and effectively. This cannot be accomplished without enhanced communication and coordination with NMCPHC stakeholders and partners.

During the past year NMCPHC has:

- ▶ Proactively engaged customers and partners to identify opportunities that enhance and improve the command's portfolio of products and services to best address emerging requirements; maximizing the use of resources to increase value and impact to customers

- ▶ Enhanced and expanded the Strategic Management System to improve command operations through identification and management of critical performance measures
- ▶ Engaged internal and field activity staff in the identification, implementation, and management of strategic initiatives to drive NMCPHC strategy and support Navy Medicine strategic goals of Jointness, Value, and Readiness

Moving forward, NMCPHC will continue to focus efforts on further shaping responsive, evidence-based programs by building a collaborative network to effectively address emerging public health concerns. NMCPHC will continue to leverage its' Strategic Management System to build on the successes achieved, and find new and innovative ways to drive mission execution within the confines of Navy Medicine's financial structure and standard operating procedures. Command activities will continue to identify lessons learned and best practices, and integrate them into standardized business processes to ensure NMCPHC is prepared for the future.



INTRODUCTION

PURPOSE

This annual report provides a comprehensive account of NMCPHC activities and accomplishments throughout FY14. As a fundamental element of NMCPHC's Strategic Management System, it is a means to capture command successes and achievements for the year and communicate the performance and outcomes of the NMCPHC strategy. This report is a critical component of the Strategic Management System process as it will guide any required course corrections to the NMCPHC Strategic Plan.

BACKGROUND

NMCPHC provides leadership and expertise to ensure mission readiness through disease prevention and health promotion in support of the National Military Strategy. It is a fully-operational Echelon III shore activity serving the Department of the Navy (DON) with leadership and subject matter expertise.

NMCPHC provides direct support of 42 product lines and more than 300 unique products and services to Navy and Marine Corps customers in the fields of occupational medicine, environmental health, disease surveillance, prevention monitoring, public health

emergencies, and risk communication. Products and services are primarily targeted to public health providers and policy makers that support readiness for all Sailors and Marines by surveying, consulting, developing, and shaping public health for the Navy and Marine Corps. All NMCPHC product lines, products, and services fall into one of its three capability areas as displayed in Figure 1.

The programs designed to support these core public health capabilities are executed by NMCPHC's 10 operational Echelon IV activities:

- ▶ **Navy Drug Screening Laboratories (NDSL) in Great Lakes, Illinois; San Diego, California; and Jacksonville, Florida**



NDSLs ensure warfighter readiness by deterring illegal drug use through providing accurate and timely forensic drug testing.¹

¹ NDSL Home Page : <http://www.med.navy.mil/sites/nmcphc/navy-drug-screening-labs/Pages/default.aspx>

Figure 1: NMCPHC Capabilities and Product Lines

Navy and Marine Corps Public Health Center		
Capabilities & Product Lines		
Health Surveillance, Epidemiology & Analysis	Disease & Injury Prevention	Public Health Consultation
<ul style="list-style-type: none"> • Advanced analytics • Bloodborne Infection Management • Cancer Surveillance • Clinical Performance Measurement • Deployment Health Assessment • Drug Demand Reduction • Epidemiology Data Support • Epidemiology Studies • Epidemiology Study Support • Healthcare-Associated Infections • Injury Surveillance • Investigation Review Board (IRB) Support • Medical Surveillance and Medical Reporting • Public Health Surveillance Support • Research Support Services 	<ul style="list-style-type: none"> • Audiology and Hearing Conservation • Defense OCC Environmental & Health Readiness System (DOEHRS) • Forward Deployable Preventive Medicine Unit (FDPMU) Program • Field Preventive Medicine • Food, Water, and general Sanitation • Health Promotion and Wellness Tools and Resources • Immunizations and Chemoprophylaxis • Industrial Hygiene Surveys & Consultation • Medical Entomology • Multi-drug Resistant Organism Consulting • OCC Environmental & Health Site Assessment (OEHS) • Occupational and Environmental Medicine • Operational Preventive Medicine • Radiation Health • Ship Sanitation Control 	<ul style="list-style-type: none"> • Environmental Health and Safety • Environmental Health Risk Assessment • Hazardous Materials Information Resource System (HMIRS) • Human Health Risk Assessment • Outbreak Response • Public Health Assessment • Public Health Emergency Officer (PHEO) Program • Public Health Policy Advocacy and Drafting • Public Health Program Evaluation • Public Health Program Management • Risk Communication • Toxicology

► **Navy Environmental and Preventive Medicine Units (NEPMU) in Norfolk, Virginia (NEPMU-2); San Diego, California (NEPMU-5); Pearl Harbor, Hawaii (NEPMU-6); and Rota, Spain (NEPMU-7)**



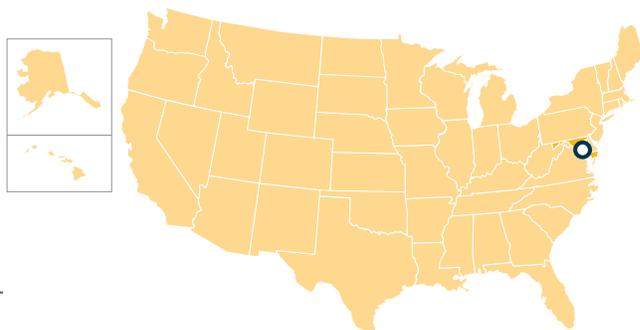
NEPMUs assist the Navy and Marine Corps operational forces by providing specialized consultation, advice, training, and recommendations in matters of occupational health, health promotion, preventive medicine, environmental health, and deployment medical surveillance.²

NEPMU-2 and NEPMU-5 provide oversight support for two addition services:

- [The Forward Deployable Preventive Medicinal Units \(FDPMU\)](#) are capable of meeting force health protection needs, in theater, from small humanitarian assistance missions to full scale war.³
- [The Comprehensive Industrial Hygiene Laboratories \(CIHL\)](#) in Norfolk, Virginia and San Diego, California identify and quantify occupational exposures of Navy and Marine Corps personnel, both military and civilian, to chemical substances.⁴

► **Naval Dosimetry Center (NDC) in Bethesda, Maryland**

NDC serves as the Navy’s ionizing radiation dosimetry center of excellence for radiation protection programs and provides naval commands worldwide with radiation dosimetry processing and consultation services.⁵



2 NEPMU Home Pages: NEPMU-2 (<http://www.med.navy.mil/sites/nmcphc/nepmu-2/Pages/default.aspx>), NEPMU-5 (<http://www.med.navy.mil/sites/nmcphc/nepmu-5/Pages/default.aspx>), NEPMU-6
 3 FDPMU Home Page: <http://www.med.navy.mil/sites/nmcphc/expeditionary-platforms/fdpmus/Pages/default.aspx>
 4 CIHL Home Page: <http://www.med.navy.mil/sites/nmcphc/comprehensive-industrial-hygiene-labs/Pages/default.aspx>
 5 NDC Home Page: <http://www.med.navy.mil/sites/nmcphc/ndc/Pages/default.aspx>

INTRODUCTION

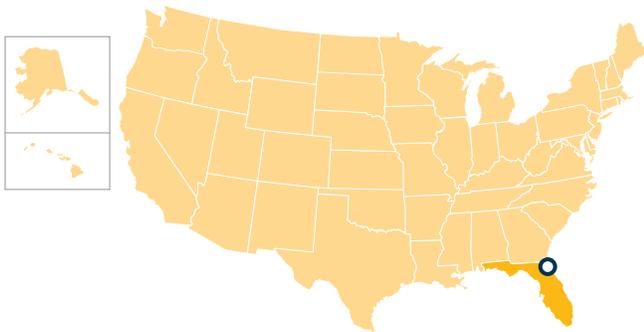
➤ **Navy Bloodborne Infection Management Center (NBIMC) in Bethesda, Maryland**

NBIMC provides expertise to ensure mission readiness by overseeing the administration and aid in the development of policies concerning the Human Immunodeficiency Virus, Hepatitis B, and Hepatitis C screening for the DON, as directed by BUMED for the Bureau of Navy Personnel.⁶



➤ **Navy Entomology Center of Excellence (NECE) in Jacksonville, Florida**

NECE develops and evaluates novel products and application technologies to better protect deployed forces from blood-feeding insects and other arthropods that transmit human diseases. It also provides force health protection through operational disease vector surveillance, control and training to enhance Navy and Marine Corps mission readiness.⁷



NMCPHC STRATEGIC MANAGEMENT SYSTEM

NMCPHC maintains a Strategic Management System to focus and align activities and inspire innovation within the command. NMCPHC's Strategic Approach, as shown in Figure 2, is a flexible methodology that focuses on four key documents—a strategic plan, an annual business plan, quarterly performance review briefs, and an annual report. Combined, these provide the foundation for NMCPHC's Strategic Management System.

NMCPHC Strategic Plan — The Strategic Plan communicates strategic goals and focuses the NMCPHC Enterprise with a three to five year strategic horizon. It ensures the NMCPHC's enterprise resources and tactical efforts are aligned to the operational goals and objectives of BUMED and Navy Medicine Support Command. The Strategic Plan is reviewed and revised annually based on the past year's results to ensure planning assumptions and mission analysis remain applicable

NMCPHC Business Plan — The Business Plan provides the means to translate and execute the Strategic Plan. As the cornerstone of the Strategic Management System, it establishes performance accountability and communicates the desired outcomes and performance drivers by which NMCPHC will achieve its mission and strategic goals. The Business Plan is developed annually, based on the inputs from the annual review of the Strategic Plan and direction from BUMED.

NMCPHC Quarterly Performance Review Briefs — Critical to the Strategic Management System is monitoring and managing performance against NMCPHC's Strategic Goals and Business Plan. Each quarter throughout the year, NMCPHC leadership meet to discuss the health and progress of the command. Key performance measures are captured across the enterprise and presented to command leadership to drive data-based decision making and maintain momentum.

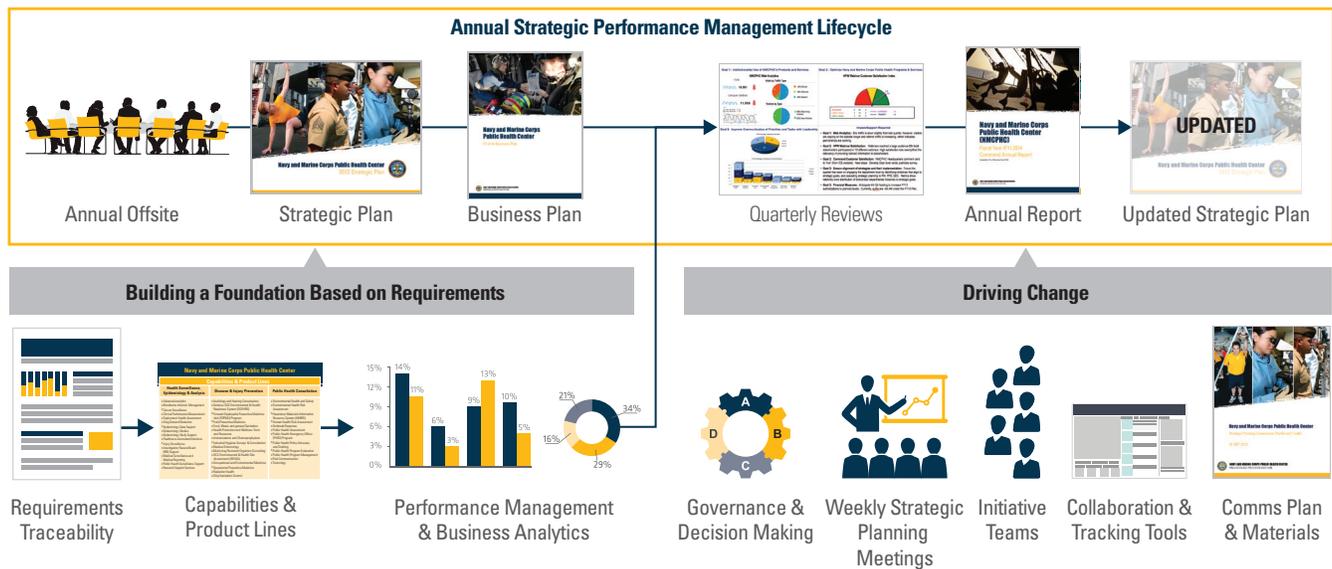
NMCPHC Annual Report — As previously noted, the Annual Report provides a comprehensive account of NMCPHC's activities and accomplishments throughout the year; demonstrating tangible operational accomplishment against the Strategic Plan and prudent fiscal stewardship.

Goal Champions, comprised primarily of NMCPHC directors and field activity Officers in Charge (OICs), responsible for the promotion and management of initiatives aligned with each strategic goal were identified and weekly meetings were established to communicate with command leadership on a regular basis. Goal Champions were charged with translating strategy to action while command leadership promoted the importance and value of the strategy both up and down the chain of command. The combination of strategic vision and planning with operational performance management has enabled NMCPHC to optimize its programs and maximize the value and impact to its customers and stakeholder.

⁶ NBIMC Home Page: <http://www.med.navy.mil/sites/nmcphc/nbimc/Pages/default.aspx>

⁷ NECE Home Page: <http://www.med.navy.mil/sites/nmcphc/nece/Pages/default.aspx>

Figure 2: Strategic Management System



MISSION, VISION, AND STRATEGIC GOALS

In early 2012, the NMCPHC conducted its first strategic planning offsite to develop the initial NMCPHC Strategic Plan. Since then, the command has held annual strategic leadership off-sites to review the current strategy and discuss emerging issues in an effort to identify any strategy course corrections. While some minor changes at the initiative level have occurred, the strategic goals have endured; validating and emphasizing the importance of NMCPHC’s mission and vision. The NMCPHC mission and vision are:

MISSION Navy and Marine Corps Public Health Center (NMCPHC) provides worldwide Force Health Protection services to Naval and Joint forces in support of the National Military Strategy.

VISION Protection through Prevention



The NMCPHC Strategic Goals displayed in Figure 3 have endured, validating the command strategy.

Figure 3: NMCPHC Strategic Goals

Goal 1:

Institutionalize Use of NMCPHC’s Products and Services

NMCPHC will be recognized by leadership and customers for its unique specialized products, services and capabilities. It will be the primary source of Navy Medicine Public Health programs.

How will we accomplish this?

- Increase awareness of capabilities
- Influence policy to channel customers to NMCPHC
- Increase standardization and uniformity of our products and services

Goal 2:

Optimize Navy and Marine Corps Public Health Programs and Services

NMCPHC will proactively increase the quality of public health products and services and enhance deployment health.

How will we accomplish this?

- Evaluate customer needs and feedback, and meet those needs
- Promote evidence-based best practices to enhance operational forces and clinical practice
- Customize programs based on data and targeted to specific customers

Goal 3:

Improve Communication of Priorities and Tasks with Leadership

NMCPHC will target resources to requirements and articulate the value of its efforts to leadership.

How will we accomplish this?

- Ensure alignment of strategies and their implementation
- Align tasking to requirements
- Capture stakeholder demands
- Communicate resource needs



FISCAL YEAR 2014 YEAR IN REVIEW

ENHANCING COMMUNICATION AND COORDINATION

In FY14, NMCPHC made considerable efforts to improve operations and communications both internally and externally. The focus was to ensure efforts and actions were optimized, in support of Navy Medicine Goals, and aligned with customer needs; providing the greatest value and impact to the public health community.

During this past year, NMCPHC assessed its functional and organizational characteristics to ensure optimum use of resources by reviewing and updating the NMCPHC MFT and Organizational Manual. This positioned the command to clearly communicate the capabilities, products, and services it provides for service members worldwide and to proactively engage in the establishment of the Defense Health Agency.

As the NMCPHC Strategic Management System continued to mature and grow, staff became increasingly engaged in strategy implementation and promotion. Several directorates within the command developed directorate-level strategic initiatives to align resources and efforts to the command goals. Additionally, participation in the NMCPHC Annual Strategic offsite was expanded to include not only directors, but also department heads;

ensuring broader representation while promoting awareness and understanding of the strategic plan. Increased staff engagement is critical to effectively communicate NMCPHC's value proposition and role in Navy Medicine.

NMCPHC has placed an emphasis on business analytics and performance measures that inform the decision-making process and enable the command to act quickly and proactively to emerging customer demands and a continually changing environment. Command leadership has stressed the importance of audit readiness across the command to enable timely and accurate response to any data calls. The adoption of systems and applications, including updated financial management tools, enhanced portal capabilities, and expanded strategic planning structures, all designed to facilitate the flow of information up and down the chain of command has increased transparency and accountability throughout NMCPHC. Strategic Initiative teams were established and assumed responsibility for driving initiatives and reporting status and progress to leadership at quarterly reviews.

NMCPHC made significant progress during FY14 in maximizing the use of limited resources and improving operations, while growing and expanding the market in key areas that include Health Analysis, Health Promotion and Wellness, and Epidemiology Data Center capabilities. As the DoD, Navy, Marine Corps, and public health environment continue to change and adapt to new customer demands so will NMCPHC.



FISCAL YEAR 2014 SUCCESS

As stated in the command's strategic goals, NMCPHC is striving to validate itself as the "go-to" resource for public health products and services, optimize command programs to address customer needs and feedback, and align resources to requirements to operate efficiently and effectively. This cannot be accomplished without enhanced communication and coordination with stakeholders and partners.

During the past year, NMCPHC has focused on organizational and operational efficiency in support of deployed forces prosecuting the global war on terror and engaging in worldwide humanitarian assistance and partnerships. The following NMCPHC FY14 accomplishments are examples of the efforts to further shape responsive, evidence-based programs through accomplishment of strategic goals:

STRATEGIC GOAL 1: INSTITUTIONALIZE USE OF NMCPHC'S PRODUCTS AND SERVICES

The first strategic goal establishes NMCPHC as the premier provider of public health products and services through increased customer engagement and effective stakeholder communications. In order to promote the unique impact of NMCPHC products and services to the overall well-being of the Naval Community and Joint Forces, NMCPHC implemented initiatives to raise awareness

of, and access to, command capabilities. These efforts, along with increasing standardization and uniformity of products reinforce NMCPHC relationships with both customers and stakeholders.

Goal 1 Accomplishments:

1 Leveraging training opportunities to build awareness and understanding of NMCPHC capabilities



Tri-Service Food Code & Food and Water Vulnerability Assessment Training: The NMCPHC Preventive Medicine Directorate has trained over 300 Fleet and medical staff on the Tri-Service Food Code (TSFC) via web-based training. Participants included Environmental Health Officers, Preventive Medicine Technicians, Independent Duty Corpsmen,



Culinary Specialists and civilian food service directors/managers as well as representatives from Navy Exchange Command, Marine Corps Exchange, and other DoD services. The training focused on the substantive changes to the Navy food safety program as delineated in the TSFC (NAVMED P-5010, chapter 1). The “train-the-trainer” approach has allowed NMCPHC to maximize the audience receiving the training and ensure the right information is disseminated to the appropriate audience. To date, the TSFC training has been delivered to over 600 participants by either NMCPHC directly or an instructor trained by NMCPHC. It has become the model the command will operate by in the future to increase impact to the Fleet and maximize the use of limited resources. Additionally, the Preventive Medicine Directorate provided Food and Water Vulnerability Assessment training to the NEPMUs to better equip the units to provide this service to the Fleet. Typically a service provided by the Army, this increases the value and impact of the units within their area of operations and expands the scope of products and services we are able to provide. Together the TSFC training and Food and Water Vulnerability Assessment training represent command efforts to promote products and services, increase NMCPHC value to stakeholders and partners, and institutionalize the command as the premier provider of public health products and services.

Naval Justice School Support: The NMCPHC Laboratory Services Directorate supported Naval Justice School training by providing lectures on the capabilities and services of the Navy Drug Screening Labs. Through this training NMCPHC was able to promote awareness and understanding of the Navy Drug Screening Labs and the services they provide as well as build confidence in the results that the labs are providing back to their customers. The training also enables command leadership to establish efficient and effective urinalysis programs within their command.

Substance Abuse Awareness: The Health Promotion and Wellness (HPW) Department within the Population Health Directorate coordinated with the Center for Personal and Professional Development (CPPD) on the upcoming FY15 Navy General Military Training (GMT). HPW provided expert consultation and review of application and practices of Navy alcohol and tobacco policies. Specifically, the staff worked with the CPPD Program Manager and their instructional design team to ensure training curriculum was appropriate and aligned with training objectives. When released, the alcohol, drugs, and tobacco GMT will be part of the 16 core Navy training requirements and will be completed by all uniformed active duty and reserve component Navy personnel, approximately 433,000 service members. An ongoing process between NMCPHC and CPPD, this collaboration emphasizes the excellent partnership between the two organizations.



NO DIPS. NO BUTTS. MORE GLORY.

Tobacco Free Living

Tobacco fights dirty. It's a dangerous addiction that's expensive, deadly, and has a serious impact on readiness. Sailors who smoke get sick more often, which translates into more lost workdays and hospitalizations than nonsmokers. Equally as bad are the effects of secondhand smoke on your shipmates and friends. To help you win the battle, the Health Promotion and Wellness Department of the Navy and Marine Corps Public Health Center offers you effective resources to end tobacco use and learn about the harmful effects of secondhand smoke.

To learn how our programs can help keep you fit for service and improve your overall health, visit us at WWW.MED.NAVY.MIL/SITES/ANMCPHC/HEALTH-PROMOTION

NAVY AND MARINE CORPS PUBLIC HEALTH CENTER
PREVENTIVE MEDICINE DIRECTORATE

2 Branding Communications to Customers



Navy Chikungunya Communication:

With a focus on providing products and services specifically tailored to the needs of its customers, NMCPHC released several communications in FY14 targeted toward emerging requirements. In developing a Navy Public Health response to the Chikungunya virus, the NMCPHC Preventive Medicine Directorate and NECE managed coordination and standardization of messaging to the Fleet. Chikungunya communications included procedures for preventing and handling cases of the virus. The NMCPHC served as the lead agent for coordinating input from various stakeholders across the public health community, developing communications content, and providing quality assurance support on all materials produced for distribution to the Fleet. NMCPHC's involvement ensured accurate and consistent messaging regarding the virus was provided in a timely and effective manner. As a result of coordinated Chikungunya communications, the Preventive Medicine, Programs and Policy Support webpage realized a 34% increase in web traffic over a 3 week period when compared to the previous 18 day period. The information has been viewed 2,674 times, shared a total of 22 times on the NMCPHC Facebook site, and has been made available to more than 13,700 people via Twitter.



Middle East Respiratory Syndrome Technical Guidance: The Occupational and Environmental Medicine (OEM) Department within the Environmental Health Directorate developed and published Technical Guidance concerning Middle East Respiratory Syndrome (MERS). Prior to release of the document, there was no technical guidance for occupational health providers concerning MERS. NMCPHC MERS information was viewed more than 250 times on Issuu, a digital publishing platform, and was featured in a local news story covering the virus. Additionally, the MERS Technical guidance was distributed on the Navy Occupational Health Listserv to all Navy Occupational Health nurses and physicians. Additionally, NMCPHC published guidance regarding Operation Tomodachi Registry, and how to field questions regarding the health of service members involved. With an increase of requests for information from smaller clinics across the country, this guidance is a critical source of information for physicians treating patients involved with the effort.

3 Adopting technology to increase accessibility to NMCPHC’s innovative and creative solutions



Educational Webinars and Online Sessions: Recognizing growing restrictions on travel and the globalization of NMCPHC’s customer base and in an effort to expand the command’s ability to reach those customers, NMCPHC conducted a series of webinars during the past year. In total, NMCPHC delivered 27 webinars in FY14 that were attended by more than 1,800 participants.



Specifically, the Preventive Medicine Directorate designed, marketed, and hosted five webinar presentations on public health topics throughout the fiscal year. The webinars were designed to improve the knowledge of preventive medicine staff on topics including Food Safety, Public Health Aspects of Drinking Water, Lead in Priority Areas, Recreational Water Inspections and Child

Youth Programs; more than 400 attendees participated in these webinars. NMCPHC also worked with the Army and Air Force to design presentations for, market, and host nine webinars on public health surveillance topics this fiscal year. The webinars educated preventive medicine staff on topics including Installation Pest Management, Chikungunya Control, Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE) updates and Water Medical Surveillance. More than 900 attendees participated in these webinars.

The HPW Department conducted 15 webinars from October through September attended by 670 participants, on topics including:

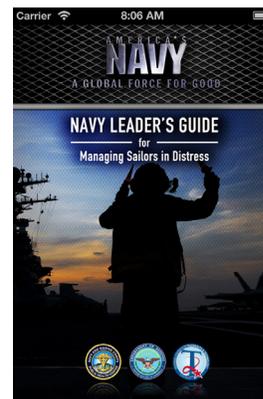
- ▶ Tools to enhance psychological and emotional well-being
- ▶ Conducting tobacco cessation programs when resources are restricted
- ▶ HIV in the Navy and Marine Corps
- ▶ Tri-Service Military Nutrition Environment Assessment Tool (m-NEAT) training and sharing of best practices
- ▶ Weight loss strategies
- ▶ Promoting sexual health, provider engagement, and unplanned pregnancy prevention in military populations
- ▶ Blue H overview for four key audiences: Navy Operational Support Centers (NOSC), Medical Treatment Facilities, Aircraft Carriers and Surface Ships, and Leaders
- ▶ Suicide prevention tools and best practices

On a 5 point scale these webinars received an average customer satisfaction rating of 4.06.



Navy Leader’s Guide Mobile App: In partnership with the National Center for Telehealth and Technology, NMCPHC Population Health Directorate released a mobile app edition of the Navy Leader’s Guide for Managing

Sailors in Distress online handbook to support Navy leaders in recognizing and assisting Sailors displaying distress-related behaviors. The app is available on iTunes, Google Play, and the Amazon Marketplace. Between the release in January 2014 and the end of August 2014, the app has been downloaded 2,594 times.



4 Enhancing NMCPHC Entomology Capabilities

World Health Organization Collaborating Center: NECE was invited to become a World Health Organization (WHO) Collaborating Center, making it one of only three in all of the DoD and the only one in the continental United States. NECE is working with the other Services as the field testing hub of a unique consortium of federal agencies including the US Department of Agriculture (USDA), Centers for Disease Control and Prevention (CDC), US Agency for International Development (USAID), and the US President's Malaria Initiative. The consortium is working with academe and industry to develop products that better protect deployed war fighters and global public health practitioners from blood-feeding insects that transmit diseases. In its new role, NECE is the only lab and WHO Collaborating Center of its type in the world providing public health insecticide application technology and training. By becoming a WHO Collaborating Center, NECE has access to additional funding for global health engagements and increased exposure to industry and international organizations working in the field of insecticide technology. Additionally, health practitioners working with the NECE staff will gain invaluable experience from working on-site in Africa to address the issues and challenges associated with controlling disease carrying insects in developing countries and societies.

Camp Blanding Memorandum of Understanding: NECE established a critical memorandum of understanding (MOU) with Camp Blanding Joint Training Center in Clay County, Florida. Camp Blanding Joint Training Center is the primary military reservation and training base for both the Florida Army National Guard and Florida Air National Guard. It also serves as a main training site for Marine Corps and Army troops prior to deployment to the Middle East. NECE's ability to use Camp Blanding's 76,000 acres of protected land has greatly increased field testing capabilities for the DoD, USDA, CDC, US President's Malaria Initiative, and the WHO. This MOU grants NECE permanent full use of three buildings that will serve as a satellite field headquarters to include office and classroom space, secure storage, showers, and valuable overnight lodging. As a result, Camp Blanding staff receives the benefit of Navy entomologists and technicians embedded with visiting Marine Corps and Army troops to protect them from blood-feeding insects while on the facility. This in turn serves as a valuable training opportunity for new Navy entomologists and Preventive Medicine Technicians under actual field conditions.

Insecticide Technology Patents: NECE secured three new patents for advances in entomology. The first is a new formulation of mosquito hormone used as a mosquito control method that is automatically disseminated by other mosquitoes to expose even greater population numbers. The second is a new insecticide spraying machine that uses sound vibrating technology to produce



a cloud of droplets that are attracted to the static charge of flying mosquitoes. The third is a new bed netting material made of fiberglass mesh and treated with insecticide making it stronger and more effective than the current woven fabrics used in the over 500 million bed nets worldwide to prevent malaria transmission via blood-feeding insects.

5 Providing best in class Force Health, Operational Readiness, and Health Assessment programs



Naval Medical Center Portsmouth (NMCP) Boice Sleep Lab Sleep Study Referral Guidelines: NMCP Boice Sleep Lab requested NMCPHC, Health Analysis Department (HA)

assist in development and implementation of an evidence-based referral process to guide primary care providers (PCP) in determining merit for sleep study evaluation and to decrease the percentage of negative diagnostic sleep studies. As a result, the Sleep Study Tool was developed. It is an algorithm-based, interactive web tool that evaluates degree and timeframe of symptoms and incorporates other potential causes of sleep disturbance, such as medications and preexisting conditions. Using this information the tool determines likelihood of Obstructive Sleep Apnea (OSA). Patients receiving a probable OSA diagnosis



FISCAL YEAR 2014 SUCCESS

are referred to the Sleep Clinic or other specialties for further consult. Based on FY13 statistics, the referral guidelines allowed NMCP's Boice Sleep Lab to avoid a \$400K monthly cost, saving Navy Medicine approximately \$5M in just one year. The initial tool, utilized only by PCPs at NMCP, improved efficiencies in clinical care and referral patterns for patients with potential sleep disorders, and sleep study patient acceptance is more selective, allowing 100 percent of referred active duty Sailors and marines to receive care.

Defense Advisory Committee on Tobacco: The HPW Department supported the Defense Advisory Committee on Tobacco, which is comprised of a senior level steering committee and a working group. HPW staff supporting the working group provided a comprehensive list of options to the Secretary of Defense and senior military and civilian leadership which address tobacco use prevention and cessation. HPW also supported numerous tasks and data calls on tobacco use in the military, access to cessation services and medications, and terminating the sale of tobacco products at Navy and Marine Corps installations. Subject matter expertise and input on Navy-wide tobacco policy and implications was also provided by HPW staff.



Deployment Health Assessment: The Epidemiology Data Center (EDC) Department within the Population Health Directorate continued its critical role in the deployment, implementation, and maintenance of the DoD Deployment Health Assessment program. The program ensures that all service members deployed for more than 30 days in a host country are monitored periodically for both physical and mental health concerns. In support of the Deployment Health Assessment program, the EDC developed and maintains the electronic Deployment Health Assessment (eDHA) database. Five health assessments are currently in use in the eDHA database;

1. Pre-deployment Health Assessment (DD2795),
2. Post-deployment Health Assessment (DD2796),
3. Post-deployment Health Reassessment (DD2900),
- 4-5. Two Mental Health Assessments (NAVMED 6100/8)

EDC provides technical expertise in the lifecycle management, laptop configuration, server configuration, and standardized process for collecting deployment health assessments successfully.

Behavioral Health Care Analysis: In support of the Wounded, Ill, and Injured (WII) Program, the Health Analysis (HA) Department received a request from BUMED Deputy Chief — WII (M9) to follow up two previous reports on child behavioral health care with a third analysis to further examine behavioral healthcare utilization among children of Navy or Marine Corps beneficiaries.



The project aims to identify what factors influence location of care and identify opportunities to recapture visits from purchased care.

Post-Traumatic Stress Disorder Analysis: At the request of Headquarters Marine Corps, the EDC Department conducted a post-traumatic stress disorder (PTSD) analysis to identify incident cases of PTSD among active duty Marines and determined the distribution of service members' ranks between 2002 and 2013. This analysis was used to answer questions and concerns posed by the Assistant Commandant of the Marine Corps regarding treatment of PTSD among Marines.



Medical Event Reporting: The Preventive Medicine Directorate's Program and Policy Support (PPS) Department continued to lead Navy Medicine's reportable events program. An update of BUMEDINST 6220.12C was drafted and provided to BUMED for formal staffing along with the companion NMCPHC technical manual laying out procedures for disease reporting and surveillance. Extensive research and informal staffing ensured alignment of Navy policy and practices with current DoD policy as well as civilian and sister Service practices. NMCPHC staff across multiple directorates completed the extensive DoD Information Assurance Certification and Accreditation Process (DIACAP) certification process for the Disease Reporting System Internet (DRSi), ensuring documentation of all system related processes as well as addressing all IA and security vulnerabilities. This effort led to the securing of a three-year Authority to Operate from the Office of Designated Approving Authority. As the DRSi Program Manager, the PPS Department continued to support all activities associated with maintaining DRSi as a Navy CIO Program of Record. The success of this system, designed by the Navy and used by the Coast Guard and Army, is underscored by the Air Force's January 2014 adoption



of the system thus making it the sole existing Armed Forces reportable events system. This adoption has already promoted standardization of disease surveillance and reporting practices for emerging public health threats.

4 Increasing standardization within the command and across the public health community to provide a single message to customers and stakeholders

NMCPHC and NEPMU Coordination: In FY14 NMCPHC and the NEPMUs improved the operational relationship between the organizations. In the past year the NEPMU OICs have increased their participation at the NMCPHC Board of Director's meetings held on a bi-weekly basis. NMCPHC and the NEPMUs collaborated on the development of a standardized list of NEPMU products and services across the four field activities in an effort to provide accurate and consistent messaging to stakeholders. To assist NEPMU OICs in staff development and ensure staff is adequately trained to provide consistent support in all areas of operation, NMCPHC has begun efforts to establish a structured standardized unit-level training model based on core specialty capabilities and associated training. The model includes job qualification requirements associated with each specialty to monitor staff development and ensure staff is capable of providing best in class public health support to the Fleet. Additionally, the NMCPHC's Preventive Medicine Directorate secured the Centers for Disease Control and Prevention (CDC) Operational Parasitology training for all NEPMU microbiology component members free of charge. This high quality training addresses training deficiency gaps and ensures 100 percent readiness to meet operational requirements. The intent of these efforts is to ensure all NMCPHC and NEPMU staff are coordinating and collaborating to support the NMCPHC goals to improve readiness, flexibility, and increase value to stakeholders.



NEPMU Training Enhancement: The NMCPHC's Preventive Medicine Directorate coordinated with the Centers for Disease Control and Prevention (CDC) to provide parasitology training for all NEPMU microbiology component members free of charge. This high quality training is a 2 week session covering intestinal organisms and arthropods and bloodborne and tissue parasites. The training is not part of the existing curriculum that Microbiologist Lab Techs receive at



Military Treatment Facilities (MTFs). It addresses a critical training deficiency gap and ensures 100 percent readiness to meet operational requirements. The training is set to be available to NEPMU staff in FY15.



STRATEGIC GOAL 2: OPTIMIZE NAVY AND MARINE CORPS PUBLIC HEALTH PROGRAMS AND SERVICES

The focus of NMCPHC's second strategic goal is to leverage experience and expertise, customer input, and lessons learned to deliver quality public health products and services. The objective is to increase the quality and impact of NMCPHC products and services through customized and targeted products and services.

To that end, NMCPHC took steps this year to increase information sharing and coordination, track emerging trends, and customize programs to meet Navy and Marine Corps public health needs. NMCPHC improved communication with customers and partners to increase awareness of products and services, evaluate feedback, and refine products to ensure they are meeting needs. NMCPHC also increased consistency in public health programs and policy through evidence-based best practices that enhance the operational forces and clinical practices.

Goal 2 Accomplishments:

1 Coordinating and collaborating across the Public Health community



Pacific Partnership 2014: NMCPHC and NEPMU-6 supported the ninth iteration of the Pacific Partnership initiative in Southeast Asia, the largest humanitarian and disaster response-preparation mission in the Indo-Asia-Pacific. Invited by various host nations, U.S. Naval forces were joined by non-governmental organizations and regional partners including Australia, Chile, Japan, New Zealand, and Singapore to improve multilateral humanitarian assistance and disaster relief preparedness. In support of Pacific Partnership, NEPMU staff participation in this event included Entomology



support to sites performing cow and water buffalo vaccinations against hoof and mouth disease in Cambodia and training local veterinary students in proper procedure and technique. NEPMU-6 staff provided Corpsman coverage and general support for 10 Construction Battalions at the Engineering Capacity building activity for the Goodwill Center School in Sihanoukville, Cambodia, they also supported the Medical Capacity building activity in Takeo, Cambodia, to include general support of all activities and monitoring of daily environmental heat stress and other safety issues. In Tacloban, Philippines, NEPMU6 staff conducted side-by-side inspections at food establishments, water supply sites, the Eastern Visayas Regional Medical Center (EVRMC), and a food manufacturing plant, reviewing sanitation standards, post-disaster recovery strategies, and inspection best practices. After action reports for Pacific Partnership 2014 were submitted to Medical Component Commander. One of the critical lessons learned during NMCPHC involvement in Pacific Partnership 2014 was the importance of having personnel with global health training as an integral part of the planning team. The Pacific Partnership 2014 missions accomplished their goals of improving interoperability with host nation militaries and improving disaster response. Planning for Pacific Partnership 2015 is underway.

Drug Demand Reduction Program (DDRP): At the request of the Assistant Secretary of the Navy, Manpower and Reserve Affairs, the Population Health Directorate's Health Analysis Department conducted an extensive examination of commonly abused prescription drug use and potential misuse among

active duty Navy and Marine Corps personnel between 2009 and 2013. Results highlighted the use of attention deficit hyperactivity disorder (ADHD) medications, demographic patterns in prescription drug use, and provider practices for dispensing commonly abused medications. This report will directly impact policy recommendations for the Navy and Marine Corps DDRP.

Operation Damayan Support: The NMCPHC Preventive Medicine Directorate and NEPMU-6 supported Operation Damayan in the Philippines. In support of this operation, staff focused on force health protection for members of U.S. Joint Task Force 505 in the wake of Typhoon Yolanda, the deadliest storm to hit the Philippines in recorded history. The team provided health threat assessment, prevention, and control to operational forces already in place. As a direct result of their support, Operation Damayan was able to provide uninterrupted, effective support to the affected people of the Philippines as they recover from this devastating disaster.



WII Support: NMCPHC published the FY13 WII Annual Report to demonstrate the capabilities, accomplishments, and value of the NMCPHC WII Program to stakeholders. NMCPHC also developed a communications materials package for promoting NMCPHC WII Program capabilities and products as well as the FY13 WII Annual Report to increase awareness among Navy Medicine leadership and NMCPHC stakeholders, resulting in more than 6,300 recipients reached and 1.3 million media impressions.

MAINTAIN RELATIONSHIPS. IMPROVE WELLNESS.

Relationships and Intimacy for Wounded, Ill, and Injured Sailors and Marines

Serving as a Sailor or Marine is a great source of honor and pride. While serving, you may have experienced a wound, illness, or injury that impacted your psychological and emotional well-being, disrupted your everyday routine, or interrupted your existing personal relationships and social life. You may find yourself spending less time with your social network or significant other due to the time and energy required for treatment and recovery. You may also experience pain, numbness, fatigue, stress, anxiety, depression, or medication side effects that can impact your relationship with your partner. Communicating and maintaining strong bonds with your partner, family, friends, peers, and your community are essential to long-term psychological and emotional well-being and physical health. The Health Promotion and Wellness Department of the Navy and Marine Corps Public Health Center offers resources for service members and their families that include strategies and suggestions for nurturing personal relationships and achieving physical and mental wellness.

To learn how our programs can help facilitate recovery and strengthen resilience, visit us at <http://www.med.navy.mil/sites/nmcpbc/wounded-ill-and-injured/press/health-promotion.aspx>

NAVY AND MARINE CORPS PUBLIC HEALTH CENTER
PREVENTION AND PROTECTION START HERE

Uniformed Services University of the Health Sciences Support: The HA Department in the Population Health Directorate supported the Uniformed Services University of the Health Sciences (USUHS) graduate medical education program with assistance in evaluating the accuracy of data related to completed mammograms in the DoD. HA staff utilized the Population Health Navigator Dashboard tool to compare the resident’s findings and determine true compliance levels. Upon completion, USUHS personnel were extremely grateful for the assistance and complimented HA staff for their “great work”.

Active Duty Breast Cancer Analysis Report to Congress: NMCPHC provided subject matter expertise input and analysis to develop a report exploring active duty breast cancer within the Armed Forces between 2000 and 2010 in collaboration with the Defense Health Agency, Brandeis University, Armed Forces Health Surveillance Center, Murtha Cancer Center/Walter Reed National Military Medical Center, and the Joint Pathology Center. The report provides information on breast cancer specialists, military service-related risk factors for breast cancer, an assessment of the effectiveness of outreach programs, and recommendations for changes in policy or law to improve the prevention, detection, and treatment of breast cancer in the DoD.

OPNAV Lead Testing Policy Modifications: The Preventive Medicine and Environmental Health Directorates, in coordination with BUMED Deputy Chief, Medical Operations (M3), led efforts in updating the OPNAVINST 5090.1C (Environmental Readiness Program Manual) para 10-5.2(c) regarding priority lead testing in drinking water. Changes were made to reflect risk and evidence based practices. The Preventive Medicine directorate also collaborated with the Navy Medicine Program Manager in revising the Nursing Procedures Manual to require powdered baby formula be re-constituted with sterile water in all Navy hospitals. Tap water was specifically banned for reconstitution. As a direct result of that change, the OPNAV policy was revised to exclude MTFs’ from priority lead testing requirements which will reduce cost and promote efficient use of resources across the Navy Medicine Enterprise.

Navy Overseas Drinking Water System Support: The Preventive Medicine Directorate’s PPS Department staff provided frequent public health advice and consultation to BUMED on emerging Navy policy revision and implementation to elevate the potable water oversight program for Navy Overseas Drinking Water System in response to CNO level attention. Staff served as the public health lead for providing review and comment on Commander, Navy Installations Command’s new policies and procedures via the Navy Installation Water Quality Board. BUMED is one of the principle pillars along with CNIC and NAVFAC to ensure overseas potable water systems maintain the same level of public health protection as required by Federal and DoD requirements in the United States.

2 Optimizing the Command resources to maximize value to NMCPHC stakeholders

Laboratory Services Enhancements: In FY14, NMCPHC Laboratory Services Directorate achieved two significant accomplishments in updating their facilities and capabilities. First, Laboratory Services was intimately involved in the requirements definition and design phases of a new drug lab testing facility in the Great Lakes region which broke ground this year. The second was implementation of Liquid Chromatography-Tandem Mass Spectrometry (LC-MSMS) in the Jacksonville laboratory. After using Gas Chromatography Mass Spectrometry for the past 30 years, LC-MSMS represents the future of forensic drug testing; it is a more efficient technology to detect sophisticated compounds as new designer drugs arise. Since May 2012, the NDSL’s have increased screening from 11 to 21 drugs and this new technology will enable timely response to even more emerging and future drug threats. Furthermore, NMCPHC began

analysis of alternate screening technologies for all DoD drug screening labs to prepare for emerging drug threats.



Audiometer Calibration Services Analysis:

The Environmental Health Directorate's OEM staff members within the Hearing Conservation Program (HCP) are in the process of reengineering business practices for the Calibration Laboratory work center that is located in OEM. To accomplish this task, staff members have conducted in depth data analysis on trends and customer feedback, in addition to touring a local commercial calibration laboratory to establish benchmarks



for the work conducted. NMCPHC was able to create industry standard targets and quality assurance processes, and identify potential equipment vendors for proper Life Cycle Management. Furthermore, at least one result from the data analysis effort is forecasted to reduce turnaround time on audiometer calibrations conducted by NMCPHC for the field activities by 15 percent, or 1.5 days.

Increased Drug Screening Capabilities: By the start of FY14, the NDSLs tested for prescription drugs on their panel at a rate of 100 percent. Previously, only one in five samples was tested for these select compounds. In addition, all DoD drug labs began testing 50 percent of incoming urine samples for synthetic cannabinoids, e.g., Spice or K2. The NDSLs were able



to accommodate this increase in sample screening without any significant increase in personnel or resources. These efforts increased both detection and deterrence of prescription and other designer drug abuse.

3 Optimizing NMCPHC Programs



Partnership Program: The HPW Department within the Population Health Directorate established the Partnership Program to optimize its programs and maximize its value and impact to customers. HPW identified and partnered with organizations working on similar topic areas across the DoD and federal agencies, such as the Office of the Chief of Naval Operations (OPNAV) N171's Navy Suicide Prevention Office, Navy Wounded Warrior — Safe Harbor, Navy Alcohol and Drug Abuse Prevention Program, Marine Corps Semper Fit, and the Centers for Disease Control and Prevention's Million Hearts Campaign. These partnerships have increased the reach among stakeholders, improved awareness, and facilitated the sharing of information and resources across organizations.



ShipShape Program Improvements:

The HPW Department is conducting a comprehensive review and modernization of the ShipShape program to include curriculum updates, enhanced facilitator training, technology advancement in automation for data reporting and metric collection, communication, and program website development. The modified program launch will occur with re-branding efforts featuring a new logo and tagline in FY15. Revisions have already taken place with the implementation of a revised roster and reporting form in August 2014, which now also serves as a comprehensive facilitator tool that will standardize data collection and provide detailed information to better assess program efficacy. The overall program updates address more relevant strategies and barriers to weight loss for the Navy population and provide a new flexible and interactive program delivery; making the program adaptable for Fleet forces, who, with their high operational tempo, are seeking weight loss options.



**Get Ready.
Get Fit.
Get Healthy.**



FDP MU Mission Essential Task and Training Refinement: The Preventive Medicine Directorate's Expeditionary Platforms Department collaborated with Fleet Forces Navy Mission Essential Task List manager

and Naval Warfare Development Command representatives to update and create new FDPMU mission essential tasks. Prior to this initiative, advanced public health tasks did not exist in the Universal Naval Task List. Expeditionary Platforms Department provided specific task definition and sample measures of readiness. As a result, specific preventive medicine capabilities will be measured for readiness in DRRS-N. In conjunction with these efforts, Expeditionary Platforms Department coordinated with BUMED on the development of a formal FDPMU Fleet Response Training Plan (FRTP). The FRTP will be entered into Navy Training Information Management System as assessment points for platform readiness within Readiness and Cost Reporting Program (RCRP) and Defense Readiness Reporting System-Navy (DRRS-N) systems. Expeditionary Platforms also coordinated with the NEPMUs to restructure the Operational Readiness Evaluation (ORE) process. Changes to the process included an east and west coast evaluation rather than a single evaluation; resulting in significant savings due to reduced logistic requirements. In addition, a more robust integration of scenario driven evaluations was implemented across the full spectrum of the ORE. As a direct result of these efforts, Navy Medicine is better equipped to assess its readiness with respect to the advanced public health capabilities that the FDPMU provides.

Sample Collection Process Improvement Effort: The Laboratory Services Directorate has initiated a drug testing improvement effort focused on improving the urine sample collection and submission process to increase efficiency and decrease opportunities for human error. The current system



results in a manual, labor-intensive accessioning process within the drug testing labs. NMCPHC conducted risk analysis of the recommended process improvements to reduce unforeseen negative impacts. As a result of this effort, the Office of the Under Secretary of Defense will be able to make informed business decisions regarding process modifications to the sample collection practices at all DoD Drug Screening Labs. If adopted, these improvements will allow for fewer submission errors and greater efficiencies in the testing process.

STRATEGIC GOAL 3: IMPROVE COMMUNICATION OF PRIORITIES AND TASKS WITH LEADERSHIP

The focus of NMCPHC's third strategic goal is to effectively communicate up and down the chain of command and increase visibility of task alignment to requirements. The intent is to provide transparency to the management of resources and requirements and to increase accountability across the command; maximizing NMCPHC's mission readiness.

Continued implementation and expansion of the Strategic Management System has allowed NMCPHC to operate efficiently and effectively while enabling timely and accurate communications with internal and external stakeholders. NMCPHC is consistently focused on improving decision making capabilities to incorporate business analytics and performance measures aligned with its mission.

Goal 3 Accomplishments:

1 Improving Command Internal Management

Updated Command Documentation: One of the first orders of business for NMCPHC in FY14 was to review and update the Command's MFTs and Organization Manual to ensure alignment with its requirements and capabilities. As the Defense Health Agency continues its establishment, it is increasingly important for NMCPHC to clearly articulate its role in Navy Medicine and the value it provides to customers and partners. Not only were MFTs revised for NMCPHC but MFTs were also reviewed and updated for each NEPMU, including creation of MFTs for the newly established NEPMU-7 in Rota, Spain. The updated documentation also defines command relationships to DON, DoD and other federal agencies, which is considered during Base Realignment and Closure and other fiscal decisions. The updated Organization Manual ensures accurate determination of manpower resources are established and maintained. Eliminating inconsistencies between the MFT and the Organization Manual minimizes the risk of loss of manpower resources.

Strategic Planning Board Establishment: NMCPHC established the Strategic Planning Board (SPB), an advisory body to the Commanding Officer (CO), to effectively monitor progress in achieving its strategic goals, measure the effectiveness of Command actions and the impact of its products, services and programs, and communicate value to customers and stakeholders. The purpose of the SPB is to provide strategic and evidence based data-driven decisions to generate savings and efficiencies across the command and its field activities, adjust performance

to meet customer and stakeholder needs, gauge customer satisfaction, and improve NMCPHC audit readiness. Additionally, SPB expanded staff engagement in driving NMCPHC Strategic Plan and increased transparency of command efforts aligned with goals and objectives. NMCPHC has taken a proactive role in addressing and mitigating challenges and issues in a timely manner to build progress and sustain momentum.

To increase the efficiency and effectiveness of the SPB and decision making, a formalized information flow and three-phased decision making process was developed. Each phase has a formal template and strict business rules for development, content, and briefing timeline. The multi-phased process facilitates unimpeded discussions at the director and supporting levels, followed by a formal recommendation brief to the Executive Officer with several courses of action and associated risk analyses. Following review and approval by the Executive Officer, the CO and Board of Directors conduct a final review and provide direction. All phases of the multi-phase process along with detailed SPB minutes and actions are recorded on the NMCPHC Strategic Efforts SharePoint site for future reference and information management.

NMCPHC Process Documentation and Standardization: NMCPHC has continued its business process documentation and standardization efforts to establish a structured framework for process management, training, execution and improvement that is institutionalized and scalable. As a result, NMCPHC operating procedures have been documented and standardized to establish a consistent and efficient way of conducting business. A web-based repository has been implemented to provide a universal “one-stop shop” for all standard operating procedures, documents, references and systems needed to perform job duties. This repository has become an invaluable resource for command staff in their day-to-day operations and has assisted in training and on boarding of new staff reporting to NMCPHC. To date, we have documented more than 100 processes and developed 20 guides to assist staff.

2014 NMCPHC Annual Leadership Offsite: The 2014 NMCPHC Leadership Offsite marked the beginning of a transition to a more functional focus for the command. As NMCPHC continues to communicate with customers and partners to ensure requirements are being addressed with optimized products and services, it is imperative that we clearly articulate the capabilities the command provides. A key outcome of the offsite was a list of NMCPHC capabilities and product lines. Based on functions, products, and services, the new capabilities and product lines model focuses on function as opposed to organizational structure; eliminating a stove-piped view of the command that did not provide an efficient means to clearly show cross-directorate support of an individual

capability or product line. The new model clearly communicates how NMCPHC supports the Navy and Marine Corps readiness and enhances public health outcomes. A five month review and validation with directors, department heads and subject matter experts resulted in 43 specific product lines across 3 major capability areas, further supported by more than 300 individual products and services.

Moving forward, organizational performance management measures will indicate how well NMCPHC is executing to requirements and aligning resources, while product line performance measures will indicate how effectively the command is optimizing its products and services, and demonstrate the impact. Together, these measures will enable NMCPHC to continue to quantitatively demonstrate command value, improve business practices, and make data-driven decisions to achieve the strategic goals.

2 Increasing the command’s ability to respond timely and accurately to audit requests

Financial Management Tools and Systems: NMCPHC has become more structured and organized in managing financial data through the implementation of new tools, systems, and processes to improve reporting and tracking procedures, and provide easier analysis and consolidation of materials. New Excel products assisted in formulation, monitoring, and execution of current and future budgets increasing flexibility and accuracy, while the automation of civilian pay processes reduced preparation time from 12 hours to 1 hour. These systems, including the Defense Medical Logistics Support System program and Command Level Testing audits, facilitate the flow of data from the source directly into financial reports and up the chain of command; enhancing and streamlining communications and providing timely and accurate information to data calls. Quarterly reports have been updated to ensure a more accurate picture of current events and status are provided to directors and command leadership.

3 Ensuring NMCPHC resources are optimized and managed effectively to maximize the command’s value to its customers and stakeholders

NEPMU-7 Re-establishment: Prior to FY14, there were three NEPMUs providing public health support to the Fleet. With an increased demand in EUCOM and AFRICOM, the reestablishment of NEPMU 7 in Rota, Spain was necessary to enhance NEPMU’s support and provide timely responses and adequate capabilities in the area of operation. NEPMU-7 serves as an effective instrument of U. S. Foreign Policy by initiating and continuing action programs which promote positive relations between the command and



foreign nationals, and assist individual naval personnel and their families to work effectively and function as positive representatives of the U.S. Navy while overseas. Throughout the establishment of NEPMU-7, NMCPHC conducted several training sessions, including one on Occupational and Environmental Health Site Assessment, to enable the incoming field activity staff to provide products and services within their area of operation.

Facilities Coordination: To proactively and effectively manage NMCPHC facilities, regular meetings were implemented with facilities managers of all NMCPHC physical locations to discuss status and any facilities-related issues, challenges, and upcoming events. These meetings provide increased visibility and communications between the command and BUMED Deputy Chief, Installations and Logistics (M4) and allow NMCPHC to proactively manage its facilities.

4 Supporting the establishment of the Defense Health Agency

Defense Health Agency Establishment Support: As with FY13, NMCPHC has continued to support the establishment of the Defense Health Agency (DHA). NMCPHC staff has coordinated

with BUMED Deputy Chief, Medical Operations/Future Operations (M3) to clearly articulate the role of NMCPHC within Navy Medicine and the value the command brings to the overall DoD Public Health community. The steps the command has taken during the past year has positioned us to clearly articulate the command's importance within the DHA environment and provide invaluable subject matter expertise, lessons learned, and best practices in ongoing process of DHA establishment.





COMMAND RESOURCES

PERSONNEL

Each NMCPHC directorate is supported by active duty service members, Government Service Civilians, and contractors. The supporting manpower mix is directly influenced by the need to deploy and sustain Fleet readiness. The directorates predominately executed at home station (Environmental Health, Laboratory Services, and Population Health) are largely supported by Government Service Civilians. In addition to conducting environmental and population health, preventive medicine, and laboratory services functions, NMCPHC Enterprise Support Services has the additional functions of providing administrative, material, information technology, logistics, and resource management to all its subordinate field activities. Each activity is assigned the workforce mix best suited to accomplish its mission. Table 1 displays the personnel assigned to each directorate and field activity.

Table 1: NMCPHC Directorate Staffing Support

NMCPHC DIRECTORATES	ON-BOARD FY14 PERSONNEL
Command Suite	4
Environmental Health Support Services	62
Population Health Support Services	107
Preventive Medicine Support Services	37
Laboratory Services	5
Administration	45
Resource Management	23
Total NMCPHC Staff	283
NMCPHC FIELD ACTIVITY	ON-BOARD FY14 PERSONNEL
NEPMU-2	37
NEPMU-5	92
NEPMU-6	37
NEPMU-7	9
NECE	25
NBIMC	9
NDC	29
NDSL Jacksonville	73
NDSL San Diego	72
NDSL Greater Lakes	63
Total Field Activity Staff	446
Total NMCPHC and Field Activity Staff	729

FINANCIALS

NMCPHC receives and manages two types of funding appropriations, Defense Health Program (DHP) 0130 and Counter Narcotics (CN) 1804. The DHP appropriation provides funding to support four different programs for the NMCPHC: Standard Program of Record (POR) funding, the Post Deployment Health Risk Assessment (PDHRA) program, the OCONUS Contingency Operations (OCO), and the WII program. Counter Narcotics funding directly supports the operation of three drug labs: NDSL San Diego, NDSL Jacksonville, and NDSL Great Lakes. Table 2 provides a breakdown of funding by appropriation and associated program.

The difference between the planned and actual appropriations is primarily the result of three new programs established during FY14: Comprehensive Pain Management, Healthy Connection Healthy Community (formally Global Population Health), and Carbenicillin Anti-biotic Resistant Bacteria. Initially funded as “year of execution” programs, NMCPHC Resource Management anticipates them to become baseline-funded items in the future.



Table 2: Yearly Financial Appropriations

APPROPRIATIONS		FY14 PLAN	FY14 ACTUAL	FY15 PLAN
DHP 0103	Program of Record	\$30,889,700	\$53,949,800	\$39,665,900
	Post Deployment Health Risk Assessment	\$1,200,000	\$700,000	\$794,000
	Overseas Contingency Operations	\$120,000	\$120,000	\$0
	Wounded, Ill, and Injured Program	\$5,518,000	\$6,410,800	\$6,861,900
CN 1804	Navy Drug Screening Labs	\$25,676,000	\$25,238,000	\$24,344,000
Total		\$63,403,700	\$86,418,600	\$71,665,500



WAY FORWARD

In FY15, NMCPHC will continue to focus efforts on further shaping responsive, evidence-based programs by building a collaborative joint-focused network to effectively address emerging public health concerns. NMCPHC will continue to leverage its Strategic Management System to build on its successes and find new and innovative ways to drive mission execution within the confines of Navy Medicine’s financial structure and standard operating procedures. Command activities will continue to identify lessons learned and best practices and integrate them into standardized business processes that demonstrate transactional excellence and ensure NMCPHC is prepared for the future.

In FY15, NMCPHC’s primary focus will be on:

- ▶ Structured outreach to stakeholders and partners
- ▶ Improved collaboration with Echelon IV activities and other internal partners
- ▶ Optimizing deployable capabilities to satisfy emerging customer demands
- ▶ Standardization and increased awareness of products and services

Figure 4: NMCPHC FY 15 Strategic Initiatives



As NMCPHC continues to optimize its products and services and the way it does business, further refinements to the Strategic Management System will build on the command’s ability to proactively identify course corrections and manage limited resources while maximizing value to the Fleet. The command Strategic Planning Board will continue to coordinate with NMCPHC leadership in driving strategic initiatives toward realization of goals



and objectives; establishing the command as the “go-to” resource for public health products and services that are optimized to provide maximum impact and value.

Staff engagement in the promotion and implementation of command strategy will continue to be a focus as NMCPHC looks to ensure consistent and coordinated communications to customers and partners across the public health community. Furthermore, NMCPHC will continue the transition to a more functional image for the command to facilitate awareness and understanding of the Command’s capabilities, product lines, and products and services; always keeping the needs of the Fleet as a priority for everything NMCPHC does.



NAVY AND MARINE CORPS PUBLIC HEALTH CENTER
PREVENTION AND PROTECTION START HERE

NMCPHC FY 2014 Command Annual Report

Unclassified // For Official Use Only (FOUO)

620 John Paul Jones Circle, Suite 1100
Portsmouth, VA 23708-2103

www.nmcphc.med.navy.mil