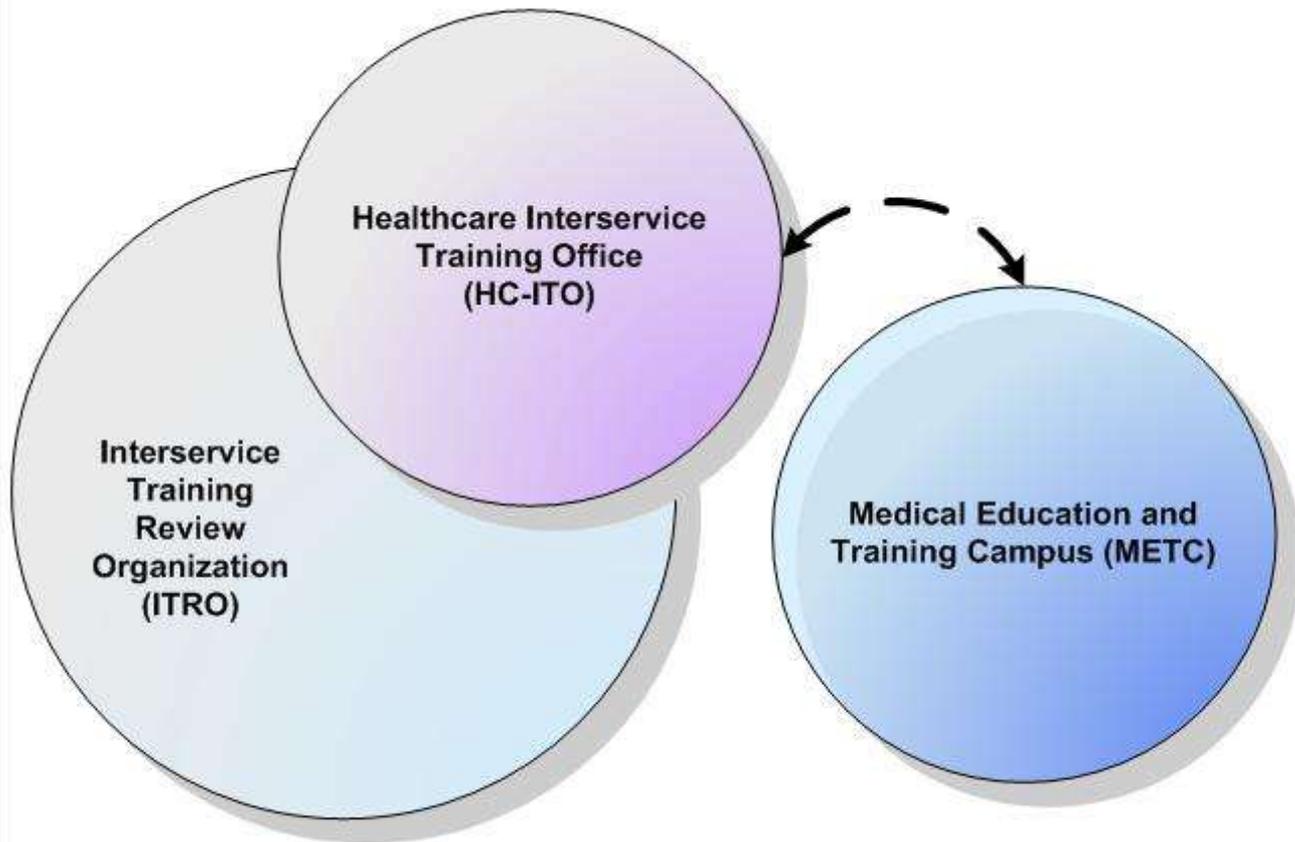
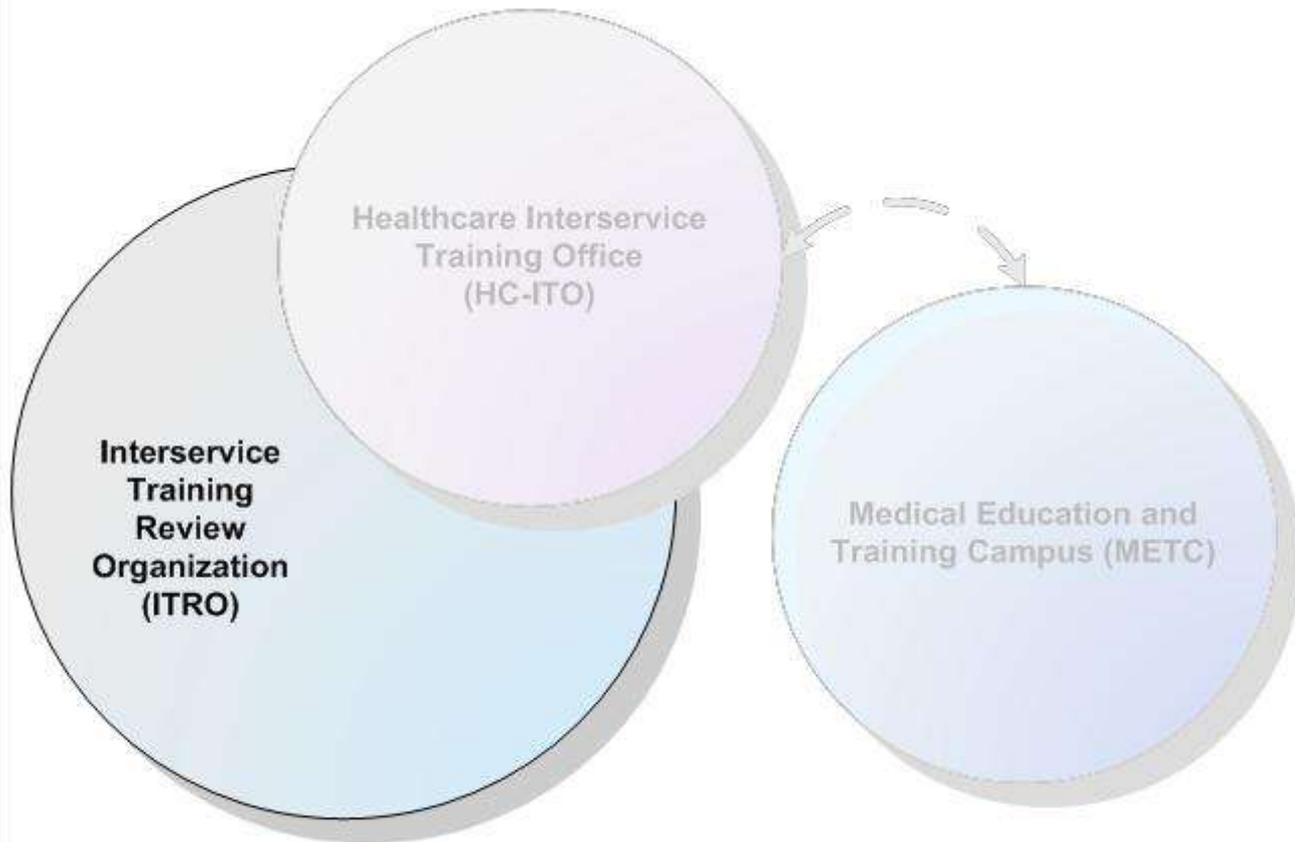




ITRO 101







ITRO



Historical Background

- Voluntary organization of the military Services formed in 1972 (now includes U.S. Coast Guard and Health Care)
- Authority: Interservice Training Regulation
 - Army: AR 351-9
 - Navy: OPNAVINST 1500.27E
 - Marine: MCO 1580.7D
 - Air Force: AFI 36-2230(I)
 - Coast Guard: COMDTINSTR 1580.1
- Comprehensive procedures manuals



Vision and Mission

- Vision
 - Service professionals working together to ensure the United States military gets the best return on its individual training investment
- Mission
 - Improve the effectiveness and efficiency of individual training, consistent with Service requirements, by standardizing instruction, eliminating duplication and reducing costs



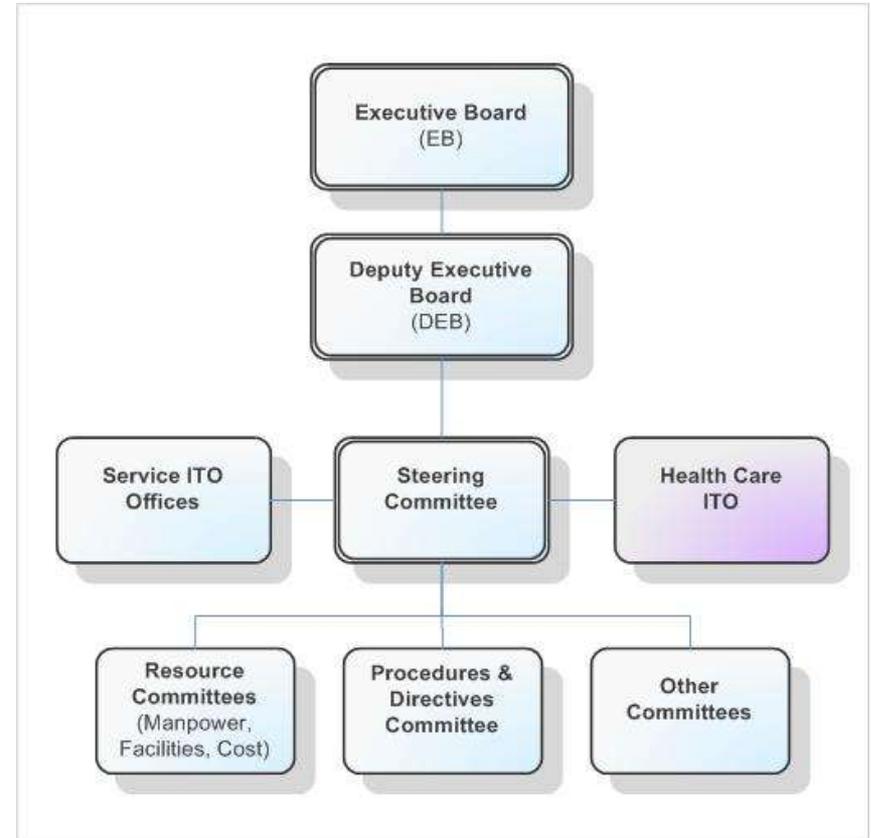
Mission (con't)

- ITRO fulfills its mission by
 - Providing policy and guidance for interservice training
 - Reviewing training and related activities to increase effectiveness and efficiency
 - Performing special studies as directed
 - Serving as a POC and providing a forum for the free interchange of ideas, information and technology related to interservice training
 - Meeting service requirements through proactive Life Cycle Management of ITRO courses



ITRO Organization

- ITRO guided by structure of boards and committees





ITRO Organization

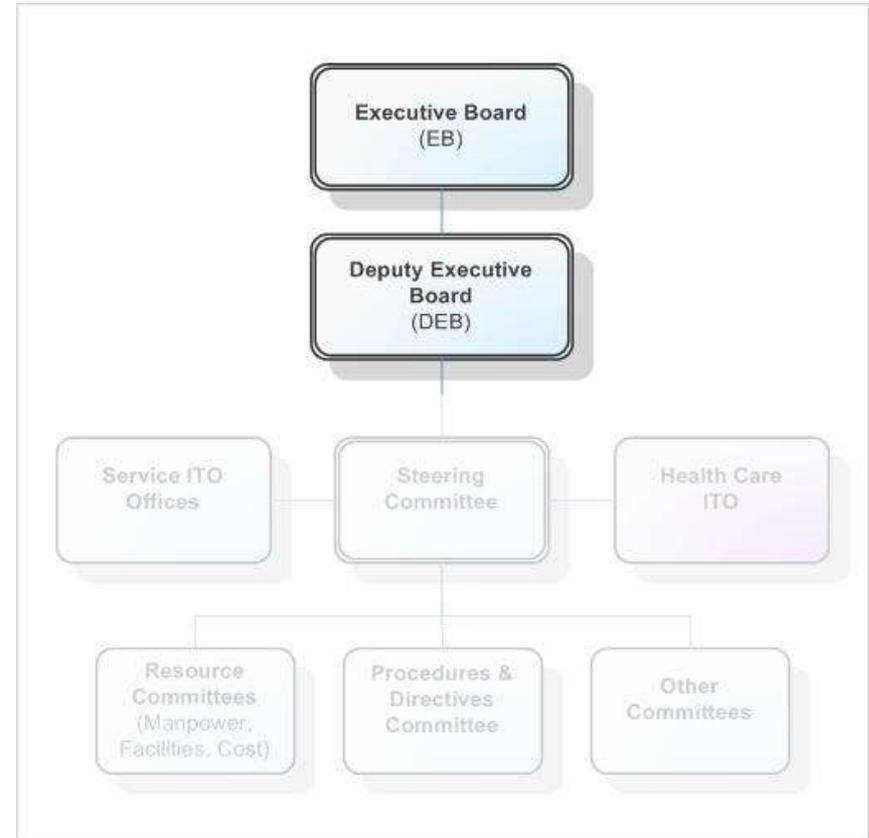
- Six ITO offices
 - Four Services
 - Coast Guard
 - Health Care, Navy is Executive Agent
- ITRO Secretariat
 - Rotates annually among four Services
 - Serves as central POC for ITRO matters
 - Staffs ITRO actions and chairs ITRO committees





Governing Boards

- Executive Board (EB): Last met in FY 2000
 - Consists of commander/director from each of the Service training commands
 - Delegated decision-making authority to the Deputy Executive Board (DEB)
- DEB: Meets semi-annually
 - Consists of principal deputy to EB member
 - Exercises decision-making and policy implementation authority on behalf of EB





Steering Committee (SC)

- Meets quarterly
- Consists of Directors from each of the ITO offices
- Coordinates day-to-day ITRO activities
- Identifies requirements and formulates policy recommendations to DEB
- Provides oversight of ITRO committees





ITRO Committees

- Resource Committees
 - Manpower Committee
 - Facilities Committee
 - Cost Analysis Committee
- Procedures and Directives Committee
- Other Committees
 - Training Technology Committee
 - Ad Hoc Committees





Interservice Training Defined

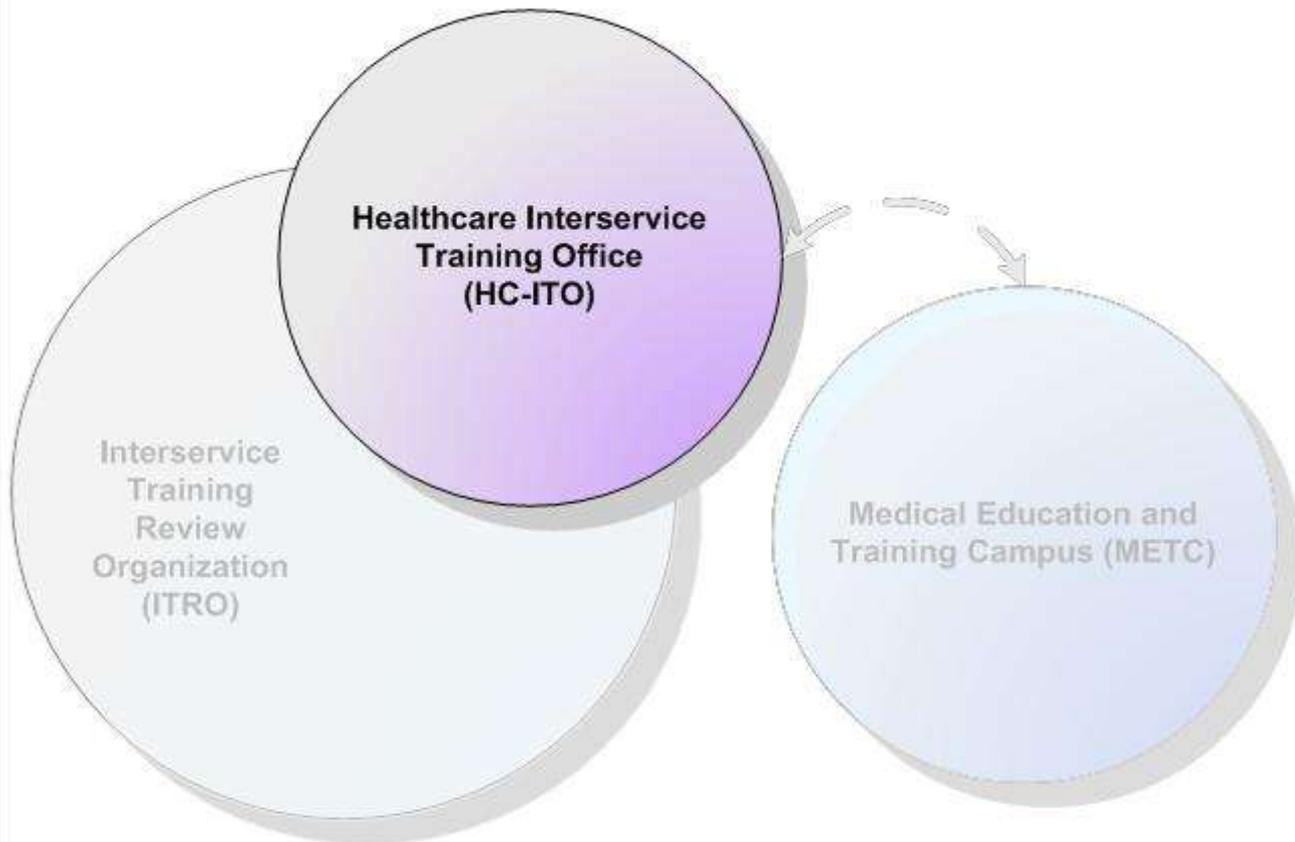
- Two or more military Services mutually agreeing to train together on individual skills in an institutional setting
- NOT “joint” training, which is training conducted in an operational setting, the purpose of which is to perform a joint mission
- ITRO does NOT have its own funding resources





ITRO Training Study Process

- Training study phases
 - Quick Look Phase
 - For a proposed consolidation, training requirements of each Service are analyzed to determine level of commonality
 - Detailed Analysis Phase
 - Develop notional POI for proposed consolidation
 - For proposed collocation, review POI and training requirements to determine supportability
 - Resource Analysis Phase
 - Determines resource requirements (manpower, facilities, funding) necessary to implement proposed training



HC-ITO



Historical Background

- ITRO established Medical/Dental Committee with Navy Flag chair in 1974
- Renamed Health Care Committee (HCC) in 1980
- Established HCC Office in 1994; Services asked to provide members in support of office
- In 1998
 - Changed name from HCC to HC-ITO
 - Reconfirmed advisor remains Navy medical department Flag Officer
 - Established Interservice Training Advisory Board (ITAB)



HC-ITO Responsibilities

- Develop policies for health care interservice training
- Facilitate health care training studies
- Support DoD Training Transformation initiatives
- Provide a neutral forum for resolution of Service concerns/issues and training information exchange
- Partner with METC to implement BRAC initiative
- Meet changing Service requirements through proactive Life Cycle Management of ITRO courses
- Maintain a repository of study information



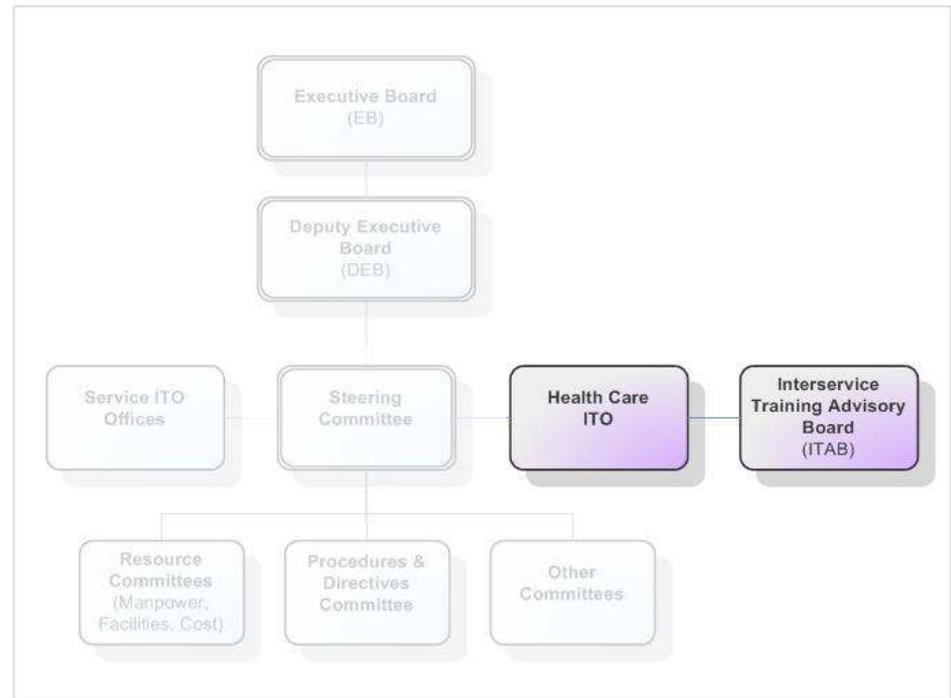
ITRO Advisor for Health Care (AHC)

- Senior Leader for HC-ITO
- Navy medical department flag officer
- Member of ITRO EB and DEB
- Chair for HC Interservice Training Advisory Board (ITAB) - Principal deliberative body



ITAB

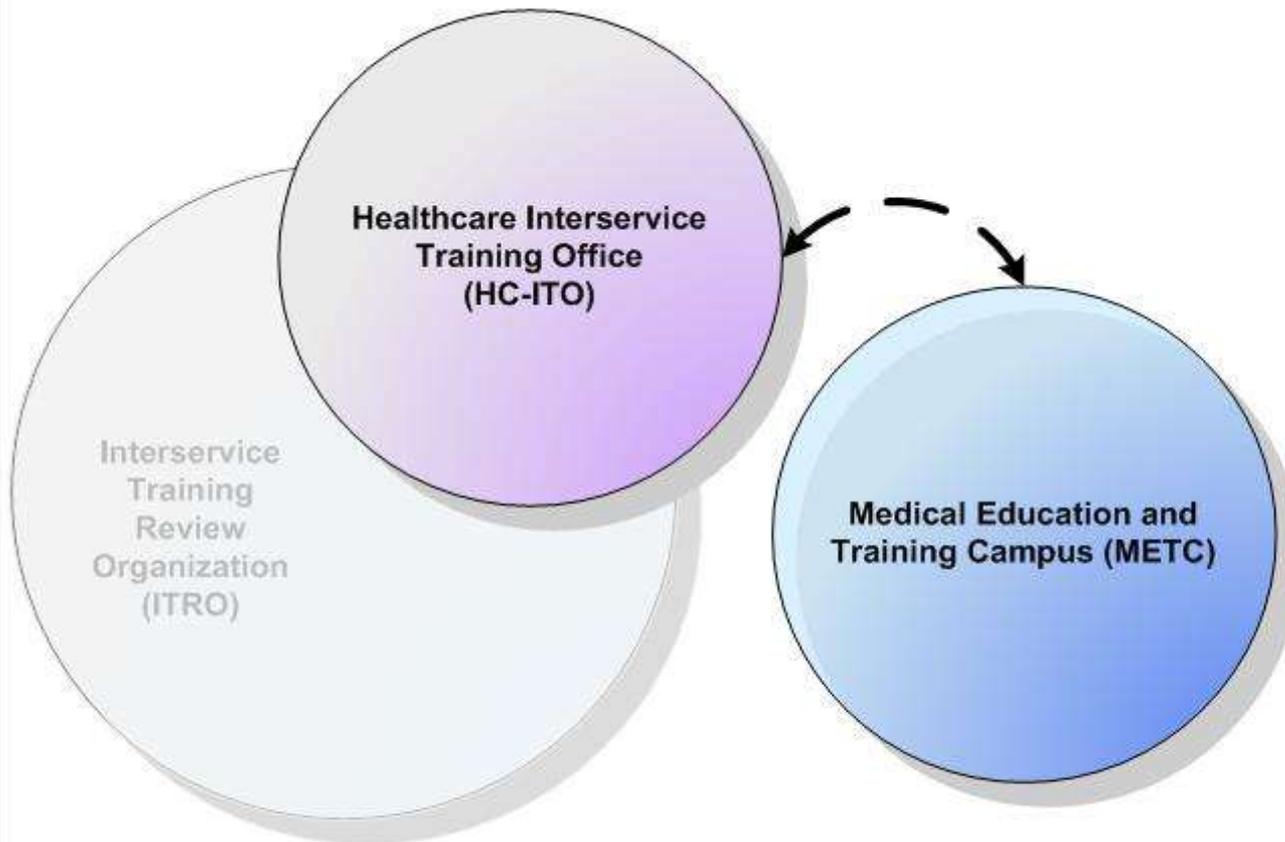
- Chaired by ITRO Advisor for Healthcare
- Consists of one voting member per Service and other members as needed
- Identifies and prioritizes areas with potential for consolidation/collocation
- Coordinates and formulates Service positions





Established ITRO Programs

Program	Participating Services	Program	Participating Services
Allergy & Immunization	A/N/AF	Occupational Therapy	A/N
Biomedical Equipment	A/N/AF	Optician	A/N
Cytotechnology	A/N	Orthopedic	A/N/AF
Dental Laboratory	A/N/AF	Physical Therapy Assistant	A/N
Flight Medic	A/N	Physician Assistant	A/N/AF
Histopathology	N/AF	Respiratory Therapy	A/N
Maxillofacial	A/N	Urology	N/AF
Nuclear Medicine	A/N/AF		



HC-ITO and METC

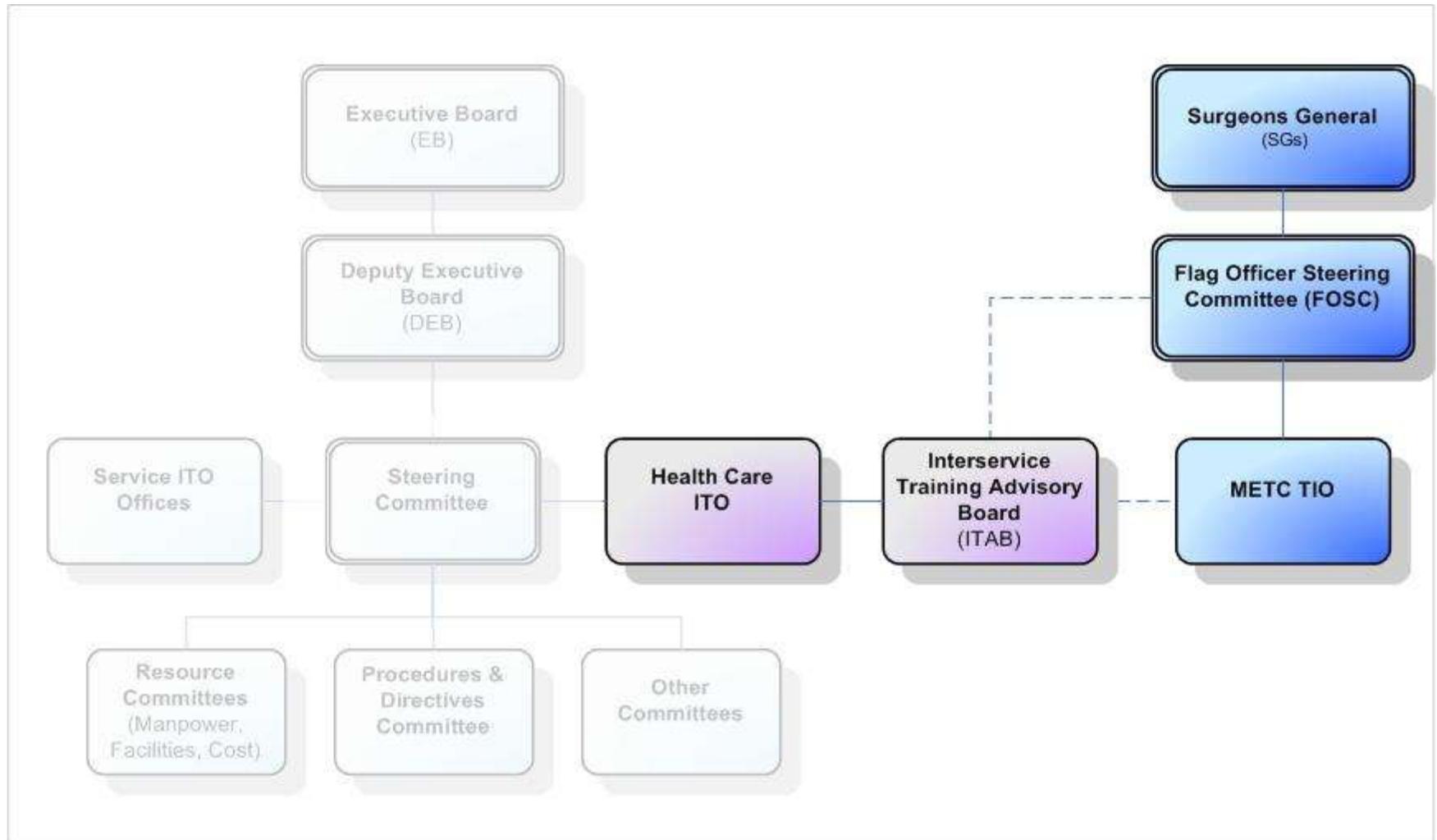


HC-ITO Support of METC

- HC-ITO moved to Fort Sam Houston in support of BRAC and Transformation initiatives
- METC Flag Officer Steering Committee (FOSC) tasked HC-ITO to conduct all consolidation studies using the ITRO methodology
- FOSC agreed to have Services share costs of contract to augment the HC-ITO staff



HC-ITO Partnership with METC





FOSC Policy Guidance

- Consolidate where feasible
- Develop a single capability set identified by a single title consistent with Service requirements
- Meet accreditation and certification standards
- Adopt best practices
- Maintain Title 10 authority
- Utilize ITRO process



METC Developmental Strategy

- METC will be the “Host” for all enlisted medical training except aerospace medicine
- METC will be the largest military medical education and training institution in the world
 - Average Daily Student Load (ADSL) of 8706
 - Estimated throughput of 44K annually (enlisted and officer basic & specialty training and education)
- Program design and development
 - Design programs based upon ITRO study process
 - Utilize a single METC standard for programs



Consolidation Challenges

- Differences among Services
 - Capability sets across the Services
 - Training philosophies among the Services (Apprentice versus Journeyman)
 - Entry level knowledge
- Not all programs meet accreditation/certification standards
- Resource constraints



HC-ITO Milestones

- Completed consolidation studies for all MOS/NEC/AFSC/SI non ITRO programs
- Identified 15 new consolidations
 - Identified manpower, facility, & equipment requirements
 - Most programs will have both consolidated and service unique components
 - Percentage of curriculum consolidated varies
- Iterative process in response to changes



New Program Consolidations

Program	Participating Services	Program	Participating Services
Cardiovascular Technology	A/N	Ophthalmic Technician	A/AF
Dental Assistant	A/AF *	Patient Administration	A/AF
Otolaryngology Technologist	A/AF	Pharmacy Technician	A/N/AF
Medical Laboratory Technician	A/N	Physical Therapy Assistant	A/N/AF
Medical Logistics	A/AF	Preventive Medicine	A/N
Armed Forces Basic Medical Technician	N/AF	Radiography	A/N/AF
Behavioral Health Technician	A/N/AF	Surgical Technologist	N/AF
Nutrition and Diet Therapy	A/AF		

*Future consolidation planned





Types of Interservice Training

- Consolidated Training
 - Curriculum developed by two or more Services
 - Faculty includes fair-share instructor representation
 - Follows ITRO training policies, directives, & rules
 - Materials and personnel requirements are determined by mutual agreement
- Collocated Training
 - Course taught by one Service on another Service's installation; facilities and equipment may be shared
 - Training policies, curriculum and instructor requirements are the responsibility of the Service conducting the training; follows ITRO process



Types of Interservice Training (cont'd)

- DoD Executive Agent (DoD EA)/Single Manager Responsibility (SMR) Training
 - Training provided to two or more Services by a Service or agency under the authority of SECDEF
 - Participation is mandatory
 - May use ITRO processes
- Quota Training
 - Training conducted by one Service and attended by another Service on a space-available basis
 - Instructional plan is designed by the owning Service
 - Participating Services may be required to provide instructors if student throughput is beyond host capacity



ITRO Acronyms

ADSL	Average Daily Student Load
AETC	Air Education And Training Command (Air Force)
AMEDD	Army Medical Department
BES	Budget Estimate Submission
BOS	Base Operating Support
BT	Basic Training
CBA	Cost Benefit Analysis
CRB	Curriculum Review Board
DAG	Detailed Analysis Group
DEB	Deputy Executive Board
EA	Executive Agency
EB	Executive Board



ITRO Acronyms

FHPC	Force Health Protection Council
HC ITAB	Health Care Interservice Training Advisory Board
HC-ITO	Health Care Interservice Training Office
IEO	Interservice Executive Order
IPT	Integrated Process Team
ISA	Installation Support Agreement
ISEERB	Interservice Environmental Education Review Board
ISLERC	Interservice Legal Education Review Committee
ITRO	Interservice Training Review Organization



ITRO Acronyms

MIPR	Military Interdepartmental Purchase Request
MOA	Memorandum Of Agreement
MOS	Military Occupational Specialty (Air Force and Army)
MTT	Mobile Training Team
NEC	Navy Enlisted Classification
POI	Plan Of Instruction (Army), Program of Instruction (Air Force)
QLG	Quick Look Group
ROE	Rules Of Engagement
RRA	Resource Requirements Analysis



ITRO Acronyms

SAF	Staff Action Form
SC	Steering Committee
SEAC	Senior Enlisted Advisory Council
SME	Subject Matter Expert
SMMAC	Senior Military Medical Advisory Council
SMR	Single Manager Responsibility
SSI	Speciality Skill Identifier (Marine Corps)
TRADOC	Training And Doctrine Command (Army)
TECOM	Training And Education Command (Marine Corps)
TTC	Training Technology Committee
USCGCMDT	U.S. Coast Guard Commandant



ITRO Training Study Process

