



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
7700 ARLINGTON BOULEVARD
FALLS CHURCH VA 22042

IN REPLY REFER TO

BUMEDINST 11110.8B

BUMED-M41

29 May 2018

BUMED INSTRUCTION 11110.8B

From: Chief, Bureau of Medicine and Surgery

Subj: HEALTH FACILITY PLANNING AND PROJECT OFFICER PROGRAM

Ref: (a) DoD Instruction 6015.17 of 13 January 2012
(b) OPNAVINST 11010.20H
(c) NAVMED P-5132

Encl: (1) Sample Project Site Officer Appointment Letter

1. Purpose. To establish the authority and duties of health facility planning and project officers (HFPPO). This instruction has been revised and should be reviewed in its entirety.
2. Cancellation. BUMEDINST 11110.8A.
3. Scope. Applies to all Navy Medicine activities.
4. Background. The programming and construction of healthcare facilities is a lengthy, complex process that spans several years from the initial identification of construction requirements to the transition and occupancy of a complete and usable facility. Medical military construction (MILCON) projects funded through the Defense Health Program (DHP) and large recapitalization projects funded through operations and maintenance, Navy (O&MN) may include new construction, major renovation, additions to existing facilities, or a combination of these construction types. The HFPPO serves as the designated Navy Medicine end-user representative during health facilities planning, design, construction, initial outfitting, transition, and new facility activation. HFPPOs are commissioned officers in the Medical Service Corps (MSC) and are appointed by the Chief, Bureau of Medicine and Surgery (BUMED).
5. Discussion. Per reference (a), the Defense Health Agency (DHA) establishes the Military Health System (MHS) facility investment strategy and is accountable for standards, criteria, funds advocacy, and program oversight of MHS medical MILCON programs in consultation with the Service medical activities. DHA is responsible for programming O&M, other procurement funds for initial outfitting and transition (IO&T) for furniture, fixtures and equipment (FF&E) and medical equipment in consultation with the Service medical activities. Service medical activities must plan O&M-funded sustainment, restoration, and modernization (SRM) repair projects for DHP facilities. DHA is charged with the execution of MILCON design and activation projects in consultation with the Service medical activities. The Services are responsible for the consultation of the construction agents and oversight on behalf of the

DHA for MILCONs and SRM projects. HFPPOs serve as the Navy health facility activity's end-user representative for the planning and execution of the DHA health facility and research facilities MILCON investment strategy.

6. Duties and Responsibilities

a. Chief, BUMED. Designate the MSC 1804 HFPPO as the subject matter expert on issues relating to healthcare facility planning, programming, and MILCON execution. HFPPOs will be assigned to DHA facilities staff, BUMED staff, Navy Medicine echelon 3 commands, and MILCON detachments. Appoint HFPPOs in writing as MILCON detachment project site officers utilizing enclosure (1).

b. Navy Medicine Echelon 3 Commanders must:

(1) Utilize assigned HFPPOs to plan, coordinate, and execute DHP MILCONs; and consult on large SRM and recapitalization projects during planning and design, equipment coordination, construction, execution and resolving change order modifications, and transition phases of new or altered medical spaces throughout their area of responsibility per reference (b).

(2) Provide support services to the HFPPO, such as administrative staffing support, office space, equipment, office utilities, and appropriate funding for travel and required training.

(3) In consultation with HFPPO Specialty Leader, provide recommendations to Chief, BUMED for HFPPO assignments as MILCON detachment project site officers utilizing enclosure (1).

c. Commander, Commanding Officer (CO), or Officer in Charge (OIC) must:

(1) Become thoroughly knowledgeable on the MILCON and SRM processes.

(2) Designate appropriate subject matter experts to assist in the design of the project and develop technical equipment requirements.

(3) Provide the HFPPO with a Defense Medical Logistics Standard Support (DMLSS) report and a maintenance report on existing equipment eligible for reuse and relocation to the project area(s), assuring all plant property not relocated is properly examined, condition coded, and reported for redistribution or disposal per reference (c), Equipment Management Manual.

(a) MILCON. Any medical equipment beyond 50 percent of life cycle is eligible for replacement through use of the IO&T program.

(b) SRM. Any medical equipment beyond 75 percent of life cycle within the project scope is eligible for replacement through the use of the IO&T program.

(c) FF&E (systems furniture). Is eligible for replacement through the use of the IO&T program.

(4) Provide the HFPPO with the resources for the procurement, storage, and necessary installation of equipment to include testing, maintenance, and acceptance turnover.

(5) Provide a command representative as the transition officer to work with the assigned HFPPO for coordination and execution of the new collateral equipment procurement; planning for the relocation of identified existing re-use equipment; and staff transition and activation planning for the new facility.

(6) Ensure appropriate staff members identified by the HFPPO and CO attend MILCON contract closeout planning meetings. Make appropriate staff members available to receive building system and maintenance training necessary to activate and operate newly delivered facilities.

d. HFPPO must:

(1) Be responsible for the planning, design, construction, and initial outfitting of healthcare facilities.

(2) Provide the necessary coordination between DHA; BUMED; Navy Medicine echelon 3 commands; Naval Facilities Engineering Command or United States Army Corps of Engineers; and supporting field offices for end-user matters involving healthcare facility requirements, planning, construction, and IO&T for new facilities.

(3) Prepare and review MILCON supporting documentation, ensuring Department of Defense (DoD) and DHA planning criteria are followed. The HFPPO, in coordination with BUMED Facilities Directorate (BUMED-M41) will provide advice and assistance on medical design criteria and functional aspects of medical and dental design necessary to meet DoD medical design criteria requirements.

(4) Represent Navy Medicine on medical facility project designs and studies. The HFPPO must participate in design reviews and meetings to facilitate communication and information exchange among the design agent, architectural and engineering firm(s), DHA, and Navy Medicine stakeholders and end-user commands. The HFPPO, in coordination with BUMED-M41 will provide advice and assistance on medical design criteria and functional aspects of medical and dental design necessary to meet DoD design criteria requirements.

(5) Coordinate procurement, storage, and installation of collateral equipment in support of medical MILCON and large O&M projects. Maintain close liaison with DHA and BUMED to develop and continuously update necessary equipment requirements to provide the most current cost estimates for initial equipment outfitting.

(6) Provide advice to the stakeholders on project operations during construction. Coordinate orientation of personnel through the local command activity's appointed transition officer in the use of new equipment, concepts of the new facility built-in systems, and planning for the transfer of functions.

(7) Participate in the initial and final acceptance inspection of the facility. Coordinate with the project delivery team and construction agent to identify construction deficiencies with the construction agent and to ensure all MILCON provided medical equipment meets project specifications for end-user acceptance.

7. Records Management. Records created as a result of this instruction, regardless of media and format, must be managed per Secretary of the Navy Manual 5210.1 of January 2012.

8. Review and Effective Date. Per OPNAVINST 5215.17A, BUMED-M4 will review this instruction annually on the anniversary of its effective date to ensure applicability, currency, and consistency with Federal, DoD, Secretary of the Navy, and statutory authority using OPNAV 5215/40 Review of Instruction.

9. Information Management Control. The reports required in paragraph 6c(3), are exempt from reports control per Secretary of the Navy Manual 5214.1 of December 2005, part IV, paragraph 7j.



C. FORREST FAISON III

Releasability and distribution:

This instruction is cleared for public release and is available electronically only via the Navy Medicine Web site: <http://www.med.navy.mil/directives/Pages/BUMEDInstructions.aspx>.

BUMEDINST 11110.8B
29 May 2018

SAMPLE PROJECT SITE OFFICER APPOINTMENT LETTER

(On Command Letterhead)

11110
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From: Chief, Bureau of Medicine and Surgery
To: Health Facilities Planning and Project Officer, [Project Officer Rank/Name](#), MSC, USN

Subj: APPOINTMENT AS HEALTH FACILITIES PROJECT SITE OFFICER FOR THE
CHIEF, BUREAU OF MEDICINE AND SURGERY

Ref: (a) BUMEDINST 11110.8B

1. Per reference (a), you are hereby designated as the Health Facilities Planning and Project Officer for the [Facility Name](#) military construction [replacement or addition/alteration](#) project representing the Chief, Bureau of Medicine and Surgery. This designation is effective immediately for a period of [XX](#) years. In carrying out your responsibilities as project site officer, you must ensure performance of the functions described in paragraph 6d of reference (a).

2. At any time that you anticipate a change in your availability for the responsibilities of this designation (such as extended duty, hospitalization, separation, etc.) you should notify your Medical Service Corps 1804 community specialty leader at the earliest opportunity. In such a case, you would also be expected to provide your recommendation for an appropriate interim replacement or successor.

3. Congratulations! Your designation as project site officer reflects your significant professional accomplishments and the esteem of your community. Your support and dedication to the Navy Medical Department are sincerely appreciated.

Chief, BUMED Signature
(or By direction)

Copy to:
BUPERS (PERS-4415)
COMNAVCRUITCOM (Code 32)
BUMED (M12, M8, M00C)
NAVMED PDC (Code 00)

Enclosure (1)