



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

IN REPLY REFER TO
BUMEDINST 5450.194
BUMED-M1
27 Jul 2020

BUMED INSTRUCTION 5450.194

From: Chief, Bureau of Medicine and Surgery

Subj: MISSION, FUNCTIONS, AND TASKS OF NAVY MEDICINE READINESS AND
TRAINING COMMAND PORTSMOUTH, VIRGINIA

Ref: (a) OPNAVINST 3120.32D
(b) OPNAVINST 6400.1D
(c) OPNAVINST 1000.16L
(d) BUMEDINST 5450.165C
(e) BUMEDINST 5430.8A
(f) BUMEDINST 5450.174

Encl: (1) Functions and Tasks of Navy Medicine Readiness and Training Command
Portsmouth, Virginia

1. Purpose. To publish the functions and tasks of Navy Medicine Readiness and Training Command (NAVMEDREADTRNCMD) Portsmouth, Virginia (VA) and subordinate units under the mission established by references (a) through (e).
2. Mission. Maximize warfighter performance through optimized medical readiness tailored to operational requirements; enhance the readiness of the medical force to sustain expeditionary medical capability; train and develop the Navy Medicine (NAVMED) forces.
3. Status and Command Relationships. NAVMEDREADTRNCMD Portsmouth VA is a shore (field) activity in an active operating status under a commander.

a. Command

Commander
Navy Medicine Readiness and Training Command
620 John Paul Jones Circle
Portsmouth, VA 23708-5000

(SNDL: FH24) (UIC: 00183)
(PLA: NAVMEDREADTRNCMD PORTSMOUTH VA)
(Activity Code: 4190-625)

Echelon

- 1 Chief of Naval Operations
- 2 Chief, Bureau of Medicine and Surgery (BUMED)
- 3 Commander, Naval Medical Forces Atlantic, Portsmouth, VA
- 4 Commander, NAVMEDREADTRNCMD Portsmouth, VA

b. Area Coordination. Commander, Naval Medical Forces Atlantic.

4. Action. The commander, NAVMEDREADTRNCMD Portsmouth will ensure performance of the functions and tasks in enclosure (1) and forward recommended changes via the chain of command to commander, Naval Medical Forces Atlantic per reference (f).

5. Records Management

a. Records created as a result of this instruction, regardless of format or media, must be maintained and dispositioned per the records disposition schedules located on the Department of the Navy (DON) Directorate for Administration, Logistics, and Operations, Directives and Records Management Division portal page at

<https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-Information-Management/Approved%20Record%20Schedules/Forms/AllItems.aspx>.

b. For questions concerning the management of records related to this instruction or the records disposition schedules, please contact the local records manager or the DON Directorate for Administration, Logistics, and Operations, Directives and Records Management Division program office.

6. Review and Effective Date. Per OPNAVINST 5215.17A, Assistant Deputy Chief, Manpower and Personnel (BUMED-M1B) will review this instruction annually around the anniversary of its issuance date to ensure applicability, currency, and consistency with Federal, Department of Defense (DoD), Secretary of the Navy (SECNAV), and Navy policy and statutory authority using OPNAV 5215/40 Review of Instruction. This instruction will be in effect for 10 years, unless revised or cancelled in the interim, and will be reissued by the 10-year anniversary date if it is still required, unless it meets one of the exceptions in OPNAVINST 5215.17A, paragraph 9. Otherwise, if the instruction is no longer required, it will be processed for cancellation as soon as the need for cancellation is known following the guidance in OPNAV Manual 5215.1 of May 2016.

7. Information Management Control

a. The reports required in enclosure (1), paragraph 1 of this instruction are exempt from reports control per SECNAV Manual 5214.1 of December 2005, part IV, subparagraph 7j.

b. The reports required in enclosure (1), subparagraphs 2b(3) and 2c(4) of this instruction are exempt from reports control per SECNAV Manual 5214.1 of December 2005, part IV, subparagraph 7p.

c. The reports required in enclosure (1), subparagraph 2b(15) of this instruction are covered by report control symbol NAVMED 5350-1.

d. The reports required in enclosure (1), subparagraphs 2c and 2d of this instruction are exempt from reports control per SECNAV Manual 5214.1 of December 2005, part IV, subparagraph 7j.



B. L. GILLINGHAM

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>

FUNCTIONS AND TASKS OF
NAVY MEDICINE READINESS AND TRAINING COMMAND PORTSMOUTH, VIRGINIA

1. Key Functions

- a. Provide medical force assets to optimize health, performance, and resilience of operational forces.
- b. Analyze and adjust medical force structure and productivity to meet the tailored-medical readiness needs of the operational units.
- c. Serve as communication platform between commander, line medical assets, and NAVMED leadership.
- d. Utilize information technology (IT), research, and analytics to optimize decision making and readiness (e.g., virtual medical centers, etc.).
- e. Provide support for installation readiness needs and a critical link for communication and tracking of the health readiness of installation, tenant, and area command needs.
- f. Ensure medical force clinical currency and competency.
- g. Ensure operational platform medical currency and competency.
- h. Coordinate clinical currency and force sustainment support to the operational medical force, including non-clinical skills and specialties.
- i. Track and report medical force readiness status to higher echelon authorities.
- j. Manage requests for forces as directed by Chief, BUMED via chain of command.
- k. Maintain and enhance the character and competency of the medical force.
- l. Provide institutional, financial, and personnel support for graduate professional education (GPE) programs and medical professional activities.
- m. Negotiate memorandum of understanding (MOU) with partner institutions to facilitate mission needs and commander's intent.
- n. Provide and coordinate information and contingency taskings with associated Defense Health Agency (DHA) medical treatment facilities (MTF).

2. Functions and Tasks

a. Command Suite

(1) Commander. Solely responsible and accountable for all aspects of the command. Ensures the effective and efficient performance of the functions and operations per U.S. Navy Regulations, the Manual of the Medical Department, and other directives issued by competent authority. Serves as primary medical point of contact (POC) for all commands aligned to the installation. Ensures readiness of all medical personnel and provides oversight of medical readiness of the personnel within the area of responsibility (AOR). When directed, may also serve as Director, Naval Medical Center Portsmouth under the management and administration of the DHA.

(2) Executive Officer (XO). Responsible to the commander and assumes command in the absence of the commander. In the performance of these duties, the XO will conform to and implement the policies and orders of the commander and will keep the commander informed of all significant matters pertaining to the command. Primarily responsible for the day-to-day operation, good order and discipline, provision of healthcare services, graduate professional education standards, performance of duty, and readiness of the entire command.

(3) Chief Staff Officer. Responsible to the commander and assumes command in the absence of the commander. In the performance of these duties, the chief staff officer will conform to and implement the policies and orders of the commander and will keep the commander informed of all significant matters pertaining to the command. Primarily responsible for the day-to-day operation, good order and discipline, provision of healthcare services, graduate professional education standards, performance of duty, and readiness of the entire command.

(4) Command Master Chief (CMC). Enlisted advisor to the commander on the formulation and implementation of policies pertinent to the mission, morale, welfare, job satisfaction, discipline, utilization, and training of all enlisted personnel. CMC reports directly to the commander and works closely with the XO to ensure Sailors are effectively led and developed. Specific duties and authorities are identified in reference (e).

(5) Expeditionary Medical Facility (EMF) Commanding Officer (CO). Solely responsible and accountable for all aspects of the EMF. Ensures the effective and efficient performance of the functions and operations per U.S. Navy Regulations, the Manual of the Medical Department, and other directives issued by competent authority. Subordinate to the NAVMEDREADTRNCMD. The mission of the EMF is to provide standardized, modular, flexible combat service support, and medical and dental capabilities to an advanced base environment throughout the full range of military operations. It is able to support the theater unified commander, joint task force commanders, Marine air-ground task forces, the Naval expeditionary group, and forward elements of the U. S. Navy, U. S. Army, and U. S. Air Force units deployed ashore. Refer to NTTP 4-02-4 for further guidance.

b. Special Assistants. These functions and tasks are performed with direct access to and supporting the commander. The commander may elect to devote a full-time equivalent in performance of the tasks and responsibilities, or may designate the roles be performed as an additional or collateral duty by NAVMEDREADTRNCMD personnel. These roles will be defined appropriately based on the needs of each command (e.g., size, location, etc.).

(1) Command Legal. Provides guidance, advice, and representation in matters relating to civil, criminal, military, and administrative law, ethics, litigation, claims, and legal matters directly to the commander and for component activities. Provides legal advice to staff members regarding questions arising in the performance of their official duties and other matters of legal readiness (e.g., wills, deployment readiness-related legal issues, etc.). This is accomplished either through on site expertise or through coordination with base and higher echelon legal services.

(2) Public Affairs Officer. Administers the public affairs program in consultation with the commander's intent. Prepares and distributes news releases. Coordinates with security and antiterrorism elements of the NAVMEDREADTRNCMD and similar resources, especially with regard to intentional and inadvertent information release concerns and operations security. Supervises the preparation, editing, and final review of information for release. Coordinates photographic coverage of newsworthy and community-building events at NAVMEDREADTRNCMD.

(3) Comptroller. Serves as a special assistant to the commander on all matters pertinent to management, disbursement, and allocation of funds. Per SECNAVINST 7000.27C, discusses budget requirements, submits plans, and provides reports of funding management. Ensures resource management processes are fully audit compliant. Provides oversight to the manager's internal control review program.

(a) Resource Management. Oversees financial and business operations of the NAVMEDREADTRNCMD. Advises the commander on issues pertaining to financial management, business operations, and financial data. Maintains accounting systems including appropriation, civilian payroll preparation, and travel processing. Maintains the official appropriation accounting records for the command ensuring general ledger accounting is performed within the guidelines of the DoD financial management regulations. Formulates and executes the command's expense operating budget.

(b) MOU and Support Agreements Office. Central coordinating function to review MOUs and support agreements (internal and external, reimbursable and non-reimbursable) between NAVMEDREADTRNCMDs, NAVMEDREADTRNUNITs, MTFs, and other agencies. Provides in-depth technical advice and recommends approval or disapproval of renewal agreements. Adheres to requirements of the DoD financial management regulation, Federal appropriation law, or other guidance to ensure reimbursable support agreements meet all financial criteria. Works with accounting and budget to ensure reimbursement methodology and accounting requirements are correctly articulated within the

reimbursable agreements. Adheres to statutory requirements for non-reimbursable agreements requiring institutional review board, Navy assurance, and data sharing involving personally identifiable information and prohibited health information. Provides technical assistance and coordination of cross-agency and cross-organization sharing agreements.

(c) Readiness Workload Collection. Coordinates with human resources and other NAVMEDREADTRNCMD elements to ensure usage of G-codes to capture readiness related time resource allocation, capturing readiness-related workload and cost pools. Transmits civilian time and attendance data per Defense Finance and Accounting System regulations.

(4) Occupational Safety Officer. Coordinates the accomplishment of the objectives of the Naval Occupational Safety and Health Program. Provides technical support including promotion of safety training and education in support of the operational and readiness mission. Maintains required data on accident investigation, analysis, reporting, hazard identification and control, proper use of personal protective equipment, safety instruction, and occupational safety and health surveys. Maintains familiarity with operational risk management.

(5) Pastoral Service. Serves as the direct advisor to the commander on all matters pertaining to religious, moral, ethical and sensitive personal issues regarding command personnel. The pastoral services manages and facilitates the Command Religious Program across all MTF and clinic locations and expeditionary medical platforms in support of maintaining warfighter capability, resiliency and readiness. Pastoral service also oversees the U.S. Navy Chaplain Corps Advance Education Program for residents in clinical pastoral education.

(6) Chief Medical Officer. Principal advisor to the commander for all aspects of clinical quality and patient safety related to non-MTF, readiness-related healthcare operations.

(7) Command Security Manager. Manages the command's personnel, information, and industrial security programs as the commander's direct representative and has cognizance of all command information, personnel, and industrial security functions and ensures that the security program is coordinated and inclusive of all requirements per DON policies. The NAVMED-READTRNCMD will implement the personnel, information, industrial, and operations security programs. Ensures that personnel security investigations, clearances, and accesses are properly vetted and recorded by coordinating clearance adjudication with DoD Central Adjudication Facility and related entities. Ensures proper handling of classified materials, safeguarding classified, and controlled unclassified information released to industry, and denying adversaries access to critical information.

(8) Command Career Counselor. Serves as principal advisor to the commander and CMC on enlisted career development. Plans, develops, and implements career information programs and policies for the immediate superior in command (ISIC), incorporating relevant guidance from Navy Personnel Command, BUMED, and Naval Medical Forces commands.

Provides on-site analysis and evaluation of subordinate command programs, ensuring rating and staffing requirements. Oversees retention and attrition management programs. Reviews and analyzes local application(s) of regional career development and transition assistance management programs.

(9) Sexual Assault Prevention and Response POC. Serves as principal advisor to the commander on sexual assault prevention and response initiatives. Provides statistical data on sexual assault cases to ISIC and other regional command elements as appropriate.

(10) Diversity and Inclusion. Serves as the principal advisor to the commander, NAVMEDREADTRNCMD, and senior leadership on diversity training, outreach opportunities for recruiting, retention efforts, and professional requirements for future NAVMED leaders.

(11) Equal Opportunity (EO). Serves as the principal advisor to the commander as command climate specialist and command managed EO officer on all matters pertaining to military EO.

(12) Inspector General (IG) Compliance Coordinator. Tracks compliance with Navy and NAVMED's medical IG's office inspection programs. Coordinates related external visits to the NAVMEDREADTRNCMD, handles hotline complaints and other command inquiries as directed.

(13) Senior Corps Representatives. The command may have a primary designee assigned for each medical department Corps. Each senior Corps representative will be assigned as part of a milestone billet (e.g., senior nursing executive or director for administration) or by the Commander in conjunction with the respective Corps Chief's office. Serves as their Corps' subject matter expert (SME) and facilitates related issues. Actively engages in regular meetings with their ISIC and BUMED to discuss Corps direction and goals. Provides counsel to the commander and works with key stakeholders regarding practice, competency, education, training, and manpower issues, as needed. Provides advice and counsel regarding career development of Corps' personnel assigned to the command to ensure readiness and skills sustainment in support of a ready medical force.

(14) Trauma Program Medical Director. Responsible for the ongoing development, growth and oversight and authority of the trauma program. Responsible for promoting high standards of practice through development of trauma policies, protocols and practice guidelines; participating in rigorous performance improvement monitoring; promoting resident and staff education and trauma research. The trauma program medical director has authority to act on all trauma performance improvement and administrative issues and critically review trauma deaths and complications that occur within the facility. Decisions affecting the care of trauma patients will not be made without the knowledge, input and approval of the trauma program medical director.

(15) Urinalysis and Alcohol Detection Device Program. Maintains cognizance and oversight of the command's urinalysis and alcohol detection testing programs.

(16) Emergency Management and Defense Support to Civil Authorities. Coordinates disaster preparedness exercises (e.g., natural and medical disasters; chemical, biological, radiological, nuclear, and high explosives response; hostile or terrorist actions) and command participation in support of local area exercises. Represents the commander in the planning, development, training, implementation, and executions of tools for defense support to civil authorities.

(17) Drug and Alcohol Program Advisor (DAPA). Responsible to the commander for implementing the Navy Alcohol and Drug Program. Conducts onboard administrative screening directed by the commander, coordinates or assists in conducting command awareness education, assists in monitoring aftercare, prepares required reports and correspondence, and serves as the command's self-referral agent.

(18) Director, NAVMEDREADTRNUNIT. Principal advisor to the commander for matters related to NAVMEDREADTRNUNITs. Promotes and executes the policies of the commander pertaining to readiness and installation support services at the outlying NAVMEDREADTRNUNITs. Advises the XO on the day-to-day operations of the NAVMEDREADTRNUNIT and executes guidance from the commander with respect to the NAVMEDREADTRNUNIT distributed operations. The director provides oversight, support, and management with respective NAVMEDREADTRNUNIT officers in charge. Coordinates with other NAVMEDREADTRNCMD COs and assures special programs and support are aligned among core facility program managers and installation stakeholders.

c. Warrior Transition Company Directorate. Provides administrative support and tracking for all active duty and active reserve patients in a temporary limited duty or Disability Evaluation System (DES) status. Serves as the single POC between the NAVMEDREADTRNCMD, MTF, and parent command for all temporarily detailed and medical evacuation patients. Executes daily inpatient rounds on all active duty Navy and Marine Corps patients in the MTF. Provides fleet liaison support, including drafting of patient casualty report messages and absent and sick reporting for the MTF medical cognizance for active duty Navy and Marine Corps personnel admitted to civilian hospitals.

d. Platform Support Directorate. Responsible to the commander for administrative matters related to human capital and total force management in support of NAVMEDREADTRNCMD platforms and supported command stakeholders. Administers relevant Navy command programs included within command inspection areas of review by the Navy IG. Executes the commander's intent via oversight and technical assistance for the effective and efficient management of military and administrative operations of the NAVMEDREADTRNCMD. Coordinates and directs policies and procedures related to NAVMEDREADTRNCMD

administration. Manages the preparation, tasking, and response process from higher authority to subordinate units. Responsible for liaison with medical services in management of the operational forces. The platform support directorate consists of:

(1) Human Resources. Analyzes work processes and identifies the right number and mix of staff to provide directorate operations and services. Provides manpower (billets and positions) and personnel (people) support to NAVMEDREADTRNCMD and its subordinate units. These functional areas are broken down further in the taskings listed.

(a) Manpower. Assists in planning, analyzing, and monitoring of manpower assets for directorates within NAVMEDREADTRNCMD and subordinate commands. Interprets and analyzes manpower directives to ensure compliance and consistency.

1. Provides consultation and professional guidance to subordinate commands on various manpower reports and systems, such as the activity manpower document and the Total Force Manpower Management System.

2. Coordinates with ISIC for execution of manpower requests and human resource system resolution. Per reference (a), and with assistance and additional guidance from Naval Medical Forces Atlantic and Total Force (BUMED-M1) as needed, the NAVMEDREADTRNCMD should ensure total force manpower management is a comprehensive methodical process of determining, validating, documenting, and using manpower requirements to inform budget decisions.

3. Prioritizes manpower requirements based on readiness and mission requirements, and personnel executability; and translates authorizations into a demand signal for personnel, training, and education processes. This includes continual activity manpower document review and consistent processing of manpower change requests to BUMED-M1 via Naval Medical Forces Atlantic for review, as well as focused reviews contained in Navy IG and Chief of Naval Operations checklists.

4. Serves as the deckplate SME department-level administrative office for readiness for NAVMEDREADTRNCMD and subordinate activities, assisted by and with guidance from BUMED and Naval Medical Forces Atlantic.

5. Under the direction of higher authority, manages organizational design efforts for the command. Serves as the single point for organizational reporting.

(b) Personnel. Provides administrative and program support essential to the direction and operational readiness of military and civilian personnel programs.

1. Administers the command's Special Pays Program for NAVMEDREADTRNCMD personnel and serves as unit pay and personnel administrator. Ensures all aspects of

pay and personnel support are accomplished through coordination with command personnel and personnel support detachment and familiarity with relevant directives and manuals. Monitors policy changes impacting pay, personnel, and transportation entitlements of command personnel.

2. Provides consultation and guidance on military and civilian personnel issues to include retention, advancement, retirement, staffing and assignments, compensation management (civilian), career management, and performance management.

3. Tracks and manages personnel data within information systems including the Defense Medical Human Resources Systems-internet (DMHRSi), the Expeditionary Medicine Platform Augmentation, Readiness, and Training System (EMPARTS), Individual Augment Portal, Defense Civilian Personnel Data System (DCPDS), Personnel Security Program, and other human resource systems as required by Navy and NAVMED.

4. Coordinates with regional readiness command for execution of manpower requests and human resource system resolution and ensures “Fit-to Fill” policies are executed and reports metrics to higher authority, as required.

5. Liaises with ISIC, DHA, and other higher authorities on civilian and military personnel requests and human resource system issue resolution, as directed.

6. Administers the Navy military and civilian command awards programs, in conjunction with the commander and necessary delegates, including the awards board, equal employment opportunity and command managed equal opportunity representative(s), public affairs, etc., as directed.

7. Ensures oversight and execution of decedent affairs and personnel casualty reporting responsibilities are carried out per applicable Service instructions.

(c) Operations Support Office, Reserve Platform, and Unit Deployment Support. Serves as the principal advisor and liaison to the commander or CO of the supported command regarding Navy Reserve matters to include command and directorate’s policy review process. Serves as the primary POC for all matters involving the equipping, funding, and training of supporting Reserve units dedicated to providing fleet medical support and medical readiness support to the active and Reserve component (RC) naval forces. Facilitates supported command and Reserve interaction for planning mission support and assumes the command plans operations medical intelligence responsibilities, as required. Coordinates the credentialing of reserve augmentation personnel. Coordinates and consolidates command submissions of the annual Reserve operational support plan via the Navy Reserve order writing system planning module to include active duty training, active duty training-continuing medical education, inactive duty training travel, annual training, active duty for special work, and additional drill funding requirements. Conducts liquidated, un-liquidated, and cancelled orders review. Verifies

subordinate commands and units conduct monthly participation analysis. Uses Navy Reserve readiness module to track readiness of supporting Reserve units. Integrates with unit deployment center to prepare and deploy Reserve units and augmentation capabilities.

(d) RC Support

1. T-AH Augmentation Unit. Assigned RC support will provide health services in support of designated combatant command missions across the full range of military operations, including the support of medical stability operations and diplomatic efforts as it pertains to the 500-bed holding capability.

2. Forward Deployed Preventive Medicine Unit. RC units will provide flexible and sustainable force health protection support to component Service or unified commands through rapid assessment and identification of health hazards leading to recommendations for protective or control measures to decrease potential health threats to deployed personnel. Provides support to U.S. government agencies involved in consequences management, humanitarian assistance, and disaster relief or stability operations. Provides staffing and logistics support packages that can be tailored to specific mission without additional lead-time.

3. Possible Adaptive Force Packages and Medical and Dental Readiness Teams. Assigned RC support provides the commander with adaptive medical capability, to include medical and dental readiness support for active and RC personnel as directed, without additional lead-time where appropriate Reserve personnel and Navy funding is available.

(2) Logistics. Provides logistical management support, coordination, oversight, and direction to NAVMEDREADTRNCMD supported activities in collaboration with DHA. Provides functional guidance and assessment of military and other logistical materiel systems used. These systems include, but are not limited to, the Defense Property Accounting System; Defense Medical Logistics Standards Support; and the Standard Procurement System. Provides oversight and direction to NAVMEDREADTRNCMD supported activities on medical logistics support systems, contractual agreements, information architecture, and technologies necessary to perform their mission. Reviews and validates user requirements to include training system availability to reflect changing fleet requirements. Ensures any major change requirements are reflected in the appropriate contracting vehicles, and are included in budget models for out-year planning purposes. Coordinates operations and maintenance and other procurements equipment budget submissions.

(a) Procurement. Manages the procurement, storage, and shipping of collateral equipment required as part of facilities construction or renovation in coordination with assigned health facility planning projects officer. Tracks budget of collateral equipment required as part of facilities construction, or renovation in coordination with Navy region health facility planning projects officers and resource management. Manages and supervises the appropriate use of government purchase card accounts for assigned personnel.

(b) Equipment Management. Coordinates the collateral equipment requirements, budget estimates, and procurement strategies for all new construction and existing facility major modernization projects within the NAVMEDREADTRNCMD AOR. Reviews and coordinates the BUMED triennial equipment inventory.

(c) Building Management. Manages NAVMEDREADTRNCMD and NAVMED-READTRNUNIT facility lifecycle management and modernization, sustainment, and restoration program. Conducts, analyzes, and produces documentation to support military construction planning, design, programming, and funding. Provides guidance and consultation for facilities management proposals and recommends funding for special projects, including flexible space requirements and installation in coordination with DHA.

(d) Materiel Management. Plans, administers, directs, and controls all aspects of supply, contracting, and equipment management within NAVMEDREADTRNCMD scope of mission and function.

(3) Mission Assurance

(a) Operations Management. Provides administrative management support services for effective, efficient command operations including mail distribution, transportation, and quarterdeck operations within NAVMEDREADTRNCMD scope of mission and function.

(b) Security. Implements the command's physical security program. Provides technical support and oversight of NAVMEDREADTRNCMD and subordinate units' physical security, anti-terrorism and force protection, insider threat program, and other policy, guidance, information, procedures, and responsibilities for the protection of military personnel, facilities, and equipment within the NAVMEDREADTRNCMD against terrorist and active attacker acts. Coordinates installation access and safety with related offices, to include command pass coordinator, command personnel security manager, command safety office, installation emergency response, and watchstanders (as applicable).

(4) Operational Analytics. Provides organized collection, processing, display, and rapid dissemination of pertinent NAVMEDREADTRNCMD readiness information to aid in both strategic and tactical decision making in support of the readiness and training mission. Oversees the NAVMEDREADTRNCMD's coordination of the delivery of IT, readiness analytics, readiness informatics, and operational integration of virtual health, in coordination with relevant oversight organizations and commands, as required. Ensures the NAVMEDREADTRNCMD IT service requirements are identified and maintained according to the DoD technology and information standards and needs, in support of Navy Service requirements. Readiness analytics leverages data analytics to enhance medical readiness and to inform decision making at the unit and platform level. Monitors and interprets performance of enterprise-established NAVMED-READTRNCMD metrics that reflect the NAVMEDREADTRNCMD's ability to enhance expeditionary medicine readiness and optimize the warfighter. Collaborates with BUMED and expeditionary commands to identify initiatives aimed at optimizing the readiness of the

warfighter. Reviews data quality and provides recommendations to ensure capture of high quality and relevant data. Serves as the primary source of NAVMEDREADTRNCMD input to the readiness performance plan (RPP). Develops a cross-functional RPP team with NAVMEDREADTRNCMD, NAVMEDREADTRNUNIT, MTF, and tenant command representation to develop NAVMEDREADTRNCMD RPP input. Serves as lead team in developing estimate of personnel time devoted to readiness activities and RPP critical readiness-based initiatives. Monitors progress of RPP critical initiatives and report on impact to warfighter, platform, and expeditionary readiness. Liaises with regional clinicians and BUMED for support to meet local informatics needs. Collaborates with research and training commands to support the development of new solutions which support warfighter optimization. Serves as the primary POC to the NAVMEDREADTRNCMD commander for all RPP issues related to readiness. Communicates the innovations and lessons learned at the NAVMEDREADTRNCMD level to Chief, BUMED to highlight best practices and share information across the enterprise.

(5) Information Management (IM). Acts as liaison between subordinate commands, operational medical forces within AOR, Reserve forces, IM, and IT regional representatives. Oversees the identification, development, and governance submission of NAVMED readiness IM and IT requirements within AOR. Ensures cyberspace IT and cybersecurity workforce core training, certification, education, and management requirements are identified and tracked within AOR per DON direction.

(a) Operational Integration of Virtual Health. Provides working POC for and oversight of enterprise virtual health capabilities at the NAVMEDREAD-TRNCMD by generating, coordinating, and incorporating requirements needed to optimize the use of medical informatics, technology, and virtual medicine. Ensure requirements support readiness, access to care, and eliminate distance barriers to providing care.

(b) Digital Initiatives. Maintains and shares situational awareness of new and future digital health technologies to support readiness. Increase leadership and staff awareness of emerging digital health areas. Coordinates digital health initiatives with clinical providers and enterprise virtual health initiatives in advancement requirements for NAVMEDREADTRNCMD through BUMED to provide standardized digital innovation efforts in support of NAVMED readiness and operational forces across the globe.

e. Warfighter Optimization Directorate. Organizes directorate operations and maintains focus on proactively monitoring and executing measures that optimize the readiness of the warfighting and operational forces. Serves as single POC for all medical activities to supported commands throughout the AOR. Provides installation support and responsible to optimize health, performance, and resilience of operational forces via channels to include health promotion, human performance, human systems integration, industrial hygiene, occupational health, environmental health, food protection, family advocacy program, Substance Abuse Program, emergency management and continuity of operations and planning, public health laboratories, medical examiner and forensics, indicated naval air training and operating

procedures standardization investigations, and others. Also, focused on meeting the tailored-medical readiness needs of the operational units (e.g., Personnel Reliability Program, aviation medicine, dive medicine, undersea medicine, special duty training, operational training, overseas screening and training, radiation health, hearing, dental, safety, and occupational health).

(1) Mission Optimization. Primary liaison in providing operational medical support to the fleet surgeons and to the force medical officers of the Navy and Marine Corps commands aligned to the installation. Coordinates participation in contingency response and doctrine implementation; monitors medical readiness, and directs budget submitting office 18 actions in the health service support of operational forces. Provides medical capabilities to meet the tailored needs of operational units aligned to the installation such as aviation medicine, undersea medicine, and surface medicine. Develops, analyzes, and coordinates all non-MTF provided healthcare services and operations for NAVMEDREADTRNCMD and outlying associated sites. Assists BUMED, operational forces, and medical units in clarifying and supporting compliance with professional standards, guidelines, and program requirements for the delivery of healthcare to support warfighters and planning for future operational requirements.

(a) Non-MTF Engagement. Liaison with units aligned to installation. Through data-informed decision making, identifies requirements of operational forces to attain and maintain full medical readiness status. Reduces barriers to access, time away from training and operations, occurrence and recurrence, and time-in temporary limited duty status. Increases number of convening authorities to include appropriate NAVMEDREADTRNUNITs. Tracks dashboards of unit medical readiness to facilitate a more proactive approach in meeting needs of the units aligned. Facilitates programs providing care within MTFs, at work centers, in gym facilities, near barracks, etc., to increase access to care. Supports virtual health capabilities to provide means for medical asset engagement for Service members. Identifies requirements to meet unique needs of operational units aligned to the installation.

(b) Training for Non-Medical Personnel. Assists installation units in the facilitation and provision of tactical combat casualty care capability for all combatants training to enhance the ability of all active duty Service members to contribute to their unit's ability to maintain lethality. Supports development and execution of this training by reviewing and revising, as required, based on changes in operating environments and adversary capabilities.

(2) Warfighter Resilience and Wellness. Develops, analyzes, and coordinates all resilience and wellness programs for NAVMEDREADTRNCMD, and outlying associated sites (including NAVMEDREADTRNUNIT installations). Assists in clarifying and supporting compliance with professional standards, guidelines, and program requirements for the delivery of programs designed to improve resilience and overall wellness to support warfighters. Aligns medical resources to optimize health and resilience for every individual to prepare the total force to meet the health challenges of the full range of military operations. Provides and implements a centralized plan for caregiver occupational stress control.

(a) Mental and Psychological Health of the Warfighter. Implements policy and executes program development related to a variety of functions associated with warfighter resilience, deployment-related illness and injuries, etc. Provides specialized care management for wounded, ill, and injured Service members from point of injury through return to duty or reintegration, transition, and disability evaluation. Facilitates Post Deployment Health Reassessment Program in concert with other NAVMEDREADTRNCMD elements. Additional liaison and oversight functions and tasks include, but are not limited to: onsite support to supported mental health and operational support assets, Wounded, Ill, and Injured Program, psychological health, and traumatic brain injury liaison, as assigned.

(b) Substance Abuse Rehabilitation Program. Provides inter-disciplinary screenings, assessments, rehabilitative treatment, and educational services for active duty personnel. Provides treatment services for alcohol and other substance misuse. Substance Abuse Rehabilitation Program provides BUMED-approved continuing medical education training to healthcare providers and staff.

(c) Wellness Center and Health Promotion. Develops, manages, and supervises wellness, health promotion, command fitness, and patient education services. Designed to educate, encourage, and improve healthy lifestyle management through counseling and classes such as stress management, ship shape, tobacco cessation, healthy eating, weight loss management, exercise, etc., with an ultimate goal of increased deployability among Service members.

(3) Operational Force Readiness. Primary consultant with oversight of administrative separation recommendations; blood banks; chemical, biological, radiological, nuclear, and high yield explosives; clinical practice guidelines; credentials oversight for the commander; disease management, medical executive committee, nursing executive committee; emergency medical service; influenza (avian, H1N1, pandemic); DES; military vaccinations and operational medicine; women's health clinics to improve access and ultimately deployability for female Service members; physical readiness test waivers; public health advisory board; and referral management. Oversees and executes the DES, temporary limited duty, and periodic health assessment programs. Also, includes other readiness and fleet-centric specialty functions with operational medical force assets to optimize health, performance, and resilience of operational forces such as aviation medicine, undersea medicine, optometry, etc. Administratively ensures deployment readiness. Aligns medical resources to meet the health challenges of the full range of military operations, and ensure every Service member is confident that care is available anytime, anywhere. Assists and augments medical capabilities when requested (non-request for forces).

(a) Medical Readiness Center. Provides and coordinates outpatient care related to active duty staff preparing for or returning from deployment. This function includes the tracking and reporting of individual medical readiness, pre and post deployment health assessments, and worldwide suitability and overseas duty screening for all Service members.

(b) Warrior Optimization Coordinator. Ensures proper and appropriate case management and facilitates tracking of patient referrals throughout the care continuum. Ensures the appropriate level of care (e.g., care coordination, discharge planning, and other coordination services) for active duty Service members requiring special assistance to restore or maintain medical readiness status. Coordinates transfer of information when Service members require care outside the direct care system. Enhances continuity of care and decreases fragmentation by providing education, developing strategies, and intervening when required to restore or maintain readiness. Assesses, analyzes, and communicates location of medical personnel, location of Service members, patient medical status, overall unit medical readiness, and trends in medical incidents to commanders, designated representatives, and organic medical assets. Provides real-time data of readiness requirements to commanders to proactively address potential issues. Manages medical information and health records to support Service members as outlined in The Privacy Act of 1974 and the Health Insurance Portability and Accountability Act of 1996. Facilitates care to support disassociated Navy personnel, remote personnel, and executive medicine coordination.

(4) Force Health Protection. Coordinates requirements pertaining to prevention services and related functions. Maintains operational readiness by preventing disease and injury to active duty and Federal employees.

(a) Industrial Hygiene. Provides comprehensive industrial hygiene support for NAVMEDREADTRNCMD and associated units, resides on Naval Station Norfolk for duty at supported area units as assigned. Provides centralized technical and administrative management to NAVMEDREADTRNUNITs.

(b) Occupational Medicine. Provides comprehensive occupational medicine services during the pre-deployment and deployment periods, to include health surveillance, task certification, and injury prevention and management. Provides support for screening, tracking, and reporting occupational exposure to ionizing radiation.

(c) Occupational Safety. Implements safety rules, regulations, standard operating procedures, and programs per BUMED guidance, Navy safety standards, Federal safety standards, Naval occupational health and safety, Occupational Safety And Health Administration, life safety and fire safety management programs, the Naval Safety Center, and other oversight agency policy.

(d) Occupational Audiology and Hearing Conservation. Provides annual audiometric tests for the occupational audiology and hearing conservation program including audiometric tests for physicals and platform specific surveillance.

(e) Preventive Medicine. Manages comprehensive environmental health, preventive medicine, and epidemiological programs onboard NAVMEDREADTRNCMD, and supported area units as assigned. Provides technical guidance and oversight of the command's healthcare-

associated infection prevention and control program in an operational environment; ensures command adherence to BUMED and Centers for Disease Control and Prevention instructions and regulations.

(f) Dental Services. Oversees and tracks readiness of general and specialty dental care, including routine and emergency examinations, dental prophylaxis, comprehensive dentistry, endodontics, periodontics, and prosthodontics associated with deployability, assignability or employability. General dentistry provides annual dental examinations, treatment planning, radiographic review, routine and emergency consultations, and referral services.

(g) Immunizations Status (Individual Medical Readiness-Specific). Administers and documents immunizations for active duty Service members. Consults on matters and plans interventions required to maintain readiness and support deployment requirements, including force health protection pre-deployment consultation and administering pre-travel medicine and personal countermeasures.

(h) Installation-Specific Needs Support. Coordinates medical support to installation-specific medical and Corpsmen needs such as firing-range coverage, auxiliary security force implementation, special events, mass casualty training and response, and other requests for medical support.

(i) Veterinary Care. Provides administrative support to include managing operational target for the Army Public Health Center, Veterinary Detachment.

f. Expeditionary Medicine Directorate. Maintains focus on monitoring and maximizing the readiness of the medical force, to include proactive management of platform and individual readiness, continual oversight and coordination by the plans, operations, and medical intelligence office, and proactive integration with force development, unit leadership, and MTF placements.

(1) Currency and Readiness. Manages oversight of force knowledge, skills, and abilities sustainment pertaining to: level of clinical competency related to workload, NAVMEDREAD-TRNCMD requirements and Service-specific functions (e.g., medical boards), military-required and specified training (e.g., firefighting and rifle training), and platform training for clinical and non-clinical skills to meet the requirements of operational medical platforms and expeditionary medicine demand signals. Includes individual readiness, including medical and physical fitness, training, administrative, personal, and family readiness. Communicates requirements and deficiencies to the personnel department in platform support to address staffing assignments. Communicates the overall individual readiness of personnel to operational platform commanders.

(2) Platform Readiness. In coordination with BUMED, and the human resources or personnel office, facilitates the operational currency and competency requirements of operational medical platforms aligned to NAVMEDREADTRNCMD. Communicates the overall operational readiness of medical personnel to operational platform commanders.

(a) NAVMED's Augmentation Program (NMAP). Serves as the critical linkage between the NAVMEDREADTRNCMD's deployable forces and BUMED, associated MTFs, U.S. Fleet Forces Command, and supported combatant commanders across the globe via the region chain of command. This program function provides liaison function to supported commands through for the execution of the NMAP training, preparation, deployment, and support cycle. Coordinates training dates, MTF participation, message traffic, and logistical issues associated with NMAP. Conducts readiness reviews of sourcing commands to verify NMAP readiness and overall program conformity. Reviews, validates, and determines the sourcing and tasks as appropriate all for military temporary support requests within the NAVMEDREADTRNCMD.

(b) Readiness Reporting. Executes readiness reporting for all operational units assigned to the NAVMEDREADTRNCMD. All NAVMEDREADTRNCMDs will report the medical operational readiness of their units in accordance with applicable guidelines. Ensures staff are adequately trained in EMPARTS and the Medical Readiness Reporting System. Ensures all members are assigned to platforms and receive notification of readiness and training requirements. Monitors platform readiness scores and collaborates with BUMED via the regional command for EMPARTS and DMHRs needs and platform management to resolve any discrepancies. Tracks commander's assessments for each operational unit within the NAVMEDREADTRNCMD to ensure they are updated and approved by the unit commander monthly. Continually monitors EMPARTS to ensure data accuracy and platform assignments. Reports discrepancies to Chief, BUMED via the Naval Medical Forces Atlantic as needed.

(c) Partnership Integration. Liaison function, in coordination with the DHA, in the establishment of joint partnerships between NAVMEDREADTRNCMD, DHA, and other organizations and facilities (e.g., other MTFs, Department of Veterans Affairs, civilian hospitals, community facilities) to maximize readiness of medical personnel and maintain experience required for clinical and non-clinical knowledge, skills, and abilities. NAVMEDREADTRNCMDs will evaluate the training readiness needs of their assets and review cooperative agreements to provide sharing and understanding in support of readiness.

g. Force Development Directorate. Tracks compliance via Learning Management System coordinator, for all professional, operational, and other required training programs for NAVMEDREADTRNCMD personnel, including requirements for officer, enlisted, and civil service members of NAVMEDREADTRNCMD. Provides direction facilitating ongoing growth of personnel in the delivery of competency-based patient care and is responsible for accurate documentation of all educational activities including individual training record program. Manages education services including needs analysis, development, implementation, and evaluation. Designs and develops teaching and learning aids for NAVMEDREADTRNCMD leadership. Provides solutions to optimize learning environments. Assists and tracks competence assessment and validation process within NAVMEDREADTRNCMD. Provides in-Service education, continuing education, and command orientation of all newly reporting personnel.

(1) Intern and Resident Graduate Medical Education (GME). In order to ensure continued accreditation and smooth operation of the GME program and alignment with the military health system concept of operations for the transfer of administration and management of military MTFs to DHA authority, direction, and control, all elements of the GME program are included in the NAVMEDREADTRNCMD mission, functions and tasks. Given the collaborative nature of GME, the GME program will be administered in conjunction with the MTF.

(a) Responsibility for execution of the GME and graduate dental education functions and tasks will be maintained by the NAVMEDREADTRNCMD, in alignment with oversight and governance from the DHA. The NAVMEDREADTRNCMD supervises and directs the GME programs and assures compliance with the requirements of both the Accreditation Council for Graduate Medical Education (ACGME). Maintain full accreditation of the program by the ACGME Residency Review Committees for the respective specialties and programs by ensuring all requirements for ACGME accreditation are within compliance. Ensures all programs conducted within their commands comply with current DoD, BUMED, and ACGME policies and requirements. Provides the designated institutional official (DIO), the program directors, the faculty, GME program coordinators and other support personnel and resources as required by the ACGME. Fully participates in the clinical learning environment review. Maximizes graduation and national medical board pass rate so they meet the ACGME program requirements. Promotes an environment of scholarly activity as required by the ACGME. These functions and tasks are augmented by those listed:

(b) DIO. Billeted position aligned within the NAVMEDREADTRNCMD responsible for the oversight of the residency training programs. The DIO serves in the senior leadership organization structure (such as the Board of Directors) of both the NAVMEDREADTRNCMD and MTF. The DIO is responsible for GME oversight as well as maintenance of institutional accreditation per ACGME institutional requirements.

(c) Program Directors. Billeted positions responsible for the operation of the programs as well as governing and carrying out the activities required for graduate medical education. Each program directors must meet the qualifications as specified in the ACGME program-specific requirements. A majority of the program director's time must be protected for administration, evaluation, teaching, resident precepting, and scholarship per ACGME requirements.

(d) GME Support Staff. Program coordinators and assistant program coordinators, who report to the program directors and provide support necessary for the operation of the programs.

(e) Research Integrity Officer. Collateral duty of active duty officer assigned to hospital-MTF affiliated with NAVMEDREADTRNCMD, which is required for oversight in the conduct of research and scholarly activity.

(f) GME Faculty. There must be a sufficient number of core faculty for the current resident complement as well as a cadre of subspecialists per ACGME specialty-specific program requirements. The core faculty cannot include the program director nor deployed faculty members. Assignment of GME faculty and the amount of time required for program-specific activities will abide by all applicable ACGME program requirements.

(g) Medical Students. Medical student training serves as a significant recruiting source of high quality candidates for the program and will be supported. All training requests should be reviewed and approved through the program coordinator or assistant program coordinator where the students will be rotating to ensure proper MOUs are in place to support training, base access, security requirement coordination (in coordination with other NAVMEDREADTRNCMD elements), and electronic medical record access required for training.

(h) Graduate Dental Education and Non-ACGME Affiliated Training Program Department. Ensures NAVMEDREADTRNCMD's graduate dental education programs adhere to the standards of the Commission on Dental Accreditation and American Dental Association Commission on Accreditation. Ensure non-ACGME accreditation training program meet all requirements of corresponding regulatory bodies.

(i) Space, Funding, and MOU Management. The identified functions and tasks are additional, important areas to be managed within GME. Space requirements include continuity clinic space with appropriate office space for faculty, residents, rotating medical students and direct residency support staff as well as faculty offices for required advising, resident counseling, and clinic precepting and any necessary call rooms. Space is required for keeping the training records of program graduates for 50 years after graduation from the program. Funding and budget requirements necessary to provide required program elements are supported must be tracked and managed appropriately. MOUs must be maintained and supported to ensure that training rotations which occur outside of the command are conducted with the appropriate legal authorization and protections. MOUs will also be maintained and supported for trainees from outside facilities that are rotating and performing training at NAVMEDREADTRNCMD.

(2) Healthcare Simulation and Bio-skills Training Department. Coordinates all multidisciplinary healthcare simulation-based training and cadaveric procedural training required to support readiness, GME, research, patient safety, process improvement initiatives. The center fully supports the integration of healthcare simulation training as applied to ACGME requirements, and the MTF. The simulation readiness training division coordinates all multidisciplinary simulation-based training required for individual and platform readiness and supports the integration of operationally focused training for multi-disciplinary providers located within the NAVMEDREADTRNCMD and Naval Medical Forces Atlantic.

(3) Clinical Investigation Department. Supports three distinct divisions in support of scholarly activities at NAVMEDREADTRNCMD and eastern region medical commands in order to provide an academic environment per ACGME requirements.

(a) Protection of Research Subjects Division. Responsible for the operation and administrative support of the command's institutional review boards and institutional animal care and use committee and assists clinical investigators with the administrative preparation of research protocols, submission of protocols to the institutional review boards and institutional animal care and use committee for ethical and scientific review, and provides notification to investigators regarding the current status of their protocols and ongoing requirements for continuing review. Responsible for corresponding with, and responding to, the research subject protection requirements of the Naval Medical Education and Training Center and other cognizant research agencies.

(b) Clinical Research Support Division. Provides ongoing education and training in research methodologies, protocol design, statistical analysis, and the ethical conduct of research. Administers ongoing national, regional, and local requirements for research training and ethics, documents individual investigator's qualifications to conduct clinical and laboratory research, and as required, verifies this information to the institutional review boards, institutional animal care and use committee, Naval Medical Education and Training Center, and other cognizant agencies. Supports the grant application and research funding process, preparation and review of all research-related publications and presentations, and oversees the operation of the command's medical illustration and photography branches.

(c) Animal and Research Facility Management Division. Responsible for the humane care and use of all research animals used at the command. Ensures all NAVMED-READTRNCMD research animal areas are handled and housed per the standards established per the Animal Welfare Act and Guide for the Care and Use of Laboratory Animals. Tasked with the daily operation and maintenance of the clinical investigation department's animal housing and research facilities.

(4) Nursing Research Department. Supports military relevant research and evidence-based practice through partnerships. Navy nurse research scientists mentor residents, doctor of philosophy, and doctor of nursing practice students in conduction of original research projects that align with command and organizational objectives.

(5) Library Services Department. Integrates the professional and general library services of the health sciences library and the crew's library. The health sciences library offers print and electronic health services knowledge-based information and services supporting GME, research, patient care, and management decision-making. The crew's library provides general interest and educational materials and services, designed to promote the personal and professional development of command personnel and increase their knowledge of military culture.

(6) Staff Education and Training

- a. Monitors and tracks staff development.
- b. Coordinates continuing health education.
- c. Facilitates requirement and resource sharing across MTFs (e.g., training, equipment, simulation, instructor support).
- d. Collaborates with Federal government agencies, universities, and other institutions, consistent with Service education and training missions.
- e. Oversees completion of operational readiness training requirements for assigned personnel consistent with current Naval Training Systems Plans (e.g., advance trauma life support tactical combat casualty care, trauma nurse core course; enroute care; weapons qualifications; chemical, biological, radiological, nuclear, explosives; etc.) in coordination with other NAVMEDREADTRNCMD office elements (e.g., expeditionary medicine departments, NAVMEDREADTRNUNIT director, etc.). Where training opportunities exist but are controlled to outside entities (e.g., enroute care, medical regulation course, etc.), serves as ongoing POC and disseminates information to NAVMEDREADTRNCMD members on how to register for courses held at distributed training sites.
- f. Coordinates delivery of a full array of resuscitative medicine courses. May serve in a supporting relationship with MTF for such training requirements (e.g., basic life support, advance cardiac life support, pediatric advance life support, etc.). Must define specific resources that will support MTF training requirements and NAVMEDREADTRNCMD operational training requirements.
- g. Coordinates scheduling, monitors completion, and reports status of required military training for medical personnel (e.g., general military training). NAVMEDREADTRNCMD will be responsible for Service-specific training requirements.
- h. Oversees, documents, and reports status of individual medical specialty knowledge, skills, and abilities completion.
- i. Leads, coordinates, and tracks NAVMEDREADTRNCMD-specific staff requirements to support partnership engagements to achieve readiness training requirements (that cannot be fulfilled by the supporting MTF) to include training affiliation agreements, etc.
- j. Procures, maintains, and manages medical training supplies and equipment allocated to supporting NAVMEDREADTRNCMD readiness, education, and training requirements.

k. Maintains and sustains a training cadre to support NAVMEDREADTRNCMD operational readiness requirements in conjunction with other elements of the NAVMEDREADTRNCMD structure for tracking, coordination, etc.

l. Manages operational readiness training libraries and portfolios.

m. Tracks staff compliance with professional medical requirements and credentials specific to Navy Service-specified requirements.

n. Coordinates with other elements of the NAVMEDREADTRNCMD (e.g., expeditionary medicine, etc.) to support the command's training exercise and employment plan.

o. Monitors and supports medical readiness training utilizing available personnel, equipment, and supplies.

p. Manages NAVMED Learning Management System, assigns mandatory training for staff, and tracks and reports completion for NAVMEDREADTRNCMD personnel.

q. Coordinates mobile training teams to execute exportable training courses at NAVMEDREADTRNCMDs.

r. Performs operational readiness evaluations of platforms in coordination with Naval Medical Forces Atlantic readiness and training elements.

s. Supports requests for SMEs to support BUMED sponsored training requirements reviews.

t. Collects, processes, and maintains actionable library of lessons learned to support improved corporate knowledge, in partnership with other NAVMEDREADTRNCMD elements.

(7) Professional Military Education. Provides and implements a centralized training plan with DoD requirements for continuous professional military education. Ensures personnel develop and maintain an understanding of the expeditionary medical capability (e.g., platforms, concept of operations, etc.). Promotes specific Service courses such as senior enlisted academy, the advanced medical department officer course, duty under instruction, etc. Coordinates and tracks POCs, registration procedures, etc., for professional development of assigned personnel, based on Service-specific requirements, in partnership with other NAVMEDREADTRNCMD elements and consultation to distributed training site POCs. Organizes and supports medical readiness training and interventions in support of other NAVMEDREADTRNCMD. Establishes very close, integrated relationship with other directorate elements, especially expeditionary medical directorates.

(8) Independent Duty Corpsman (IDC) Program Management. Identifies and capitalizes on all competencies of IDCs in the deployed environment based on Service policies while addressing The Joint Commission constraints when these same personnel provide care within garrison MTFs and clinics. Subject to applicable NAVMEDREADTRNCMD service and DHA MTF policy, IDCs are authorized Navy enlisted personnel on clinical rotations who serve within the competencies of their particular Navy enlisted classification identifier. IDCs are designated non-privileged providers, working alongside primary care managers, medical doctors, nurse practitioners, and physician assistants in the care of primary or specialty care settings at the MTF. Additionally, IDCs will deliver patient care for Service members under indirect supervision, allowing for evaluation, diagnosis, and treatment of military patients without being approved by a medical officer. Consistent with Service-specific policy and requirements, IDCs will work within established IDC-specific formularies to ensure these non-privileged providers can adequately deliver patient care within their respective competencies. Whether at the NAVMEDREADTRNCMD or day-to-day assignments at the MTF, IDCs will only serve Service members within their scope of practice without direct supervision, and may provide care to other beneficiaries under direct supervision of the physician supervisor only with the beneficiary's consent (or in the case of a minor with the sponsor's consent). The NAVMEDREADTRNCMD program director will manage and document IDC clinical readiness per reference (b), as applicable.