



# **NCR BRAC Subcommittee Report**

**Kenneth W. Kizer, MD, MPH**  
**Chairman**  
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# **NCR BRAC Advisory Subcommittee**

- **Convened to advise DoD on the establishment of an integrated service delivery network (IDN) in the NCR service area**
- **Additionally charged to conduct an independent design review of the plans for the Walter Reed National Military Medical Center and new community hospital at Fort Belvoir**



# **PL 110-417 (NDAA 2009), Section 2721 Independent Design Review**

- **NDAA 2009 calls for an independent design review of:**
  - ✓ **Walter Reed National Military Medical Center**
  - ✓ **New community hospital at Fort Belvoir**
- **Questions to be answered:**
  - ✓ **Will the design achieve the goal of providing “world-class medical facilities”?**
  - ✓ **If not, what changes should be made to ensure the construction of world-class medical facilities?**



# **PL 110-417 (NDAA 2009), Section 2721 Corollary Questions**

- **What is a “world class medical facility”?**
- **Is DOD’s approach to design and construction of the WRNMMC sound?**
- **Is there any reason to call a halt to construction at this time?**
- **Are there other considerations that must be dealt with?**



# **NRC BRAC Subcommittee Process**

- **Subcommittee supplemented with SMEs**
- **Multiple in-person meetings and conference calls**
- **Extensive review of facility plans and other documents; heard numerous presentations**
  - ✓ **Re: what is “world class” hospital design**
  - ✓ **Re: plans for these two facilities**
- **Outside review of “world class” definition by leaders in healthcare**



# **NCR BRAC Subcommittee Findings**

## **What is a “world class medical facility”?**

- **“World class” is a descriptor increasingly used in healthcare to convey an impression of being “among the best in the world”**
- **No recognized body has established an operational definition**
- **Subcommittee developed a definition**
  - ✓ **extensive review of documents**
  - ✓ **committee’s considerable collective experience and expertise**
  - ✓ **favorable reviews and helpful suggestions from dozens of healthcare luminaries**



# **NCR BRAC Subcommittee Findings**

## **What is a “world class medical facility”?**

- **Qualities that can be measured with current methods (Appendix A)**
  - ✓ 6 domains
  - ✓ 18 conditions
  
- **Qualities that cannot be measured with current methods**
  - ✓ routinely goes above and beyond what is required
  - ✓ the whole is greater than the sum of the parts
  - ✓ advances the frontiers of knowledge and pioneers improved processes of care
  - ✓ makes the extraordinary ordinary and the exceptional routine



# **NCR BRAC Subcommittee Findings**

**Is the DOD's approach to the design and construction of the WRNMMC sound?**

- **Yes; design process shortened timeline, and still provided flexibility in comparison to traditional MILCON process.**
- **Present inability to complete renovations at NNM/WRNMMC because of limitations in BRAC funding process is a serious problem.**





# **NCR BRAC Subcommittee Findings**

- **NCR IDN concept is sound and should improve service delivery**
- **A lot of diligent work has been done, but efforts are hampered by an ambiguous vision, unclear chain of command and incomplete funding due to its multiple sources having different requirements**
- **Plans for Fort Belvoir Hospital appear to be well conceived; some areas where improvements could be made**



# **NCR BRAC Subcommittee Findings**

- **Variable use of input from users (patients, clinicians, staff)**
- **Needed culture change to support the NCR IDN not occurring by design**
- **Insufficient demand analysis for WRNMMC**
- **No “master plan” for WRNMMC or NCR IDN**
- **Present inability to complete renovations at NNMC/WRNMMC because of limitations in BRAC funding process is a serious problem**



# **NCR BRAC Subcommittee Findings**

- **Current WRNMMC plan has significant deficiencies**
  - ✓ **some non-conformance with Joint Commission standards**
  - ✓ **surgical suite deficiencies**
  - ✓ **hospital bed plan incomplete**
  - ✓ **no simulation labs**
  - ✓ **information technology plans need additional work**
  - ✓ **approach to medical records needs further review**
  - ✓ **strategic technology plan needed**
  - ✓ **location of dialysis unit problematic**
  - ✓ **plans for support services incomplete**



# **NCR BRAC Subcommittee Recommendations**

- **Empower a single official with complete organizational and budgetary authority**
- **Develop a master plan for both WRNMMC and NCR IDN**
- **Begin engineering needed culture change**
- **Correct identified plan deficiencies**
- **More fully incorporate end-user input into plans**
- **Evaluate design processes for future use in MHS capital projects**
- **Continue with construction and backfill renovations**



# Further Subcommittee Process

- **Finalize report**
- **Present and discuss findings as requested**
- **Continue with review of the development of the NCR integrated delivery network**
- **Otherwise as directed**