SUBJECT: Joint Medical Executive Skills Program and Learning Continuum

References: See Enclosure 1

1. PURPOSE. This Defense Health Agency-Procedural Instruction (DHA-PI), based on the authority of References (a) and (b), and in accordance with the guidance of References (c) through (h), establishes the DHA’s procedures to:

   a. Implement policy, assign responsibilities, and provide procedures for the implementation and management of the Joint Medical Executive Skills Program (JMESP) in accordance with the guidance of References (d) through (g) that:

      (1) Continues the JMESP, Military Department (MILDEP)-validated core competency-sustained medical executive skills program.

      (2) Supports MILDEP efforts to establish common qualifications for meeting the requirement of highly proficient individuals serving as health system executive.

   b. Streamline the establishment, administration, evaluation, update, replacement, and cancellation, as appropriate, of DoD-wide medical executive education development programs.

   c. Identify the requirement that DHA oversees and provides an education learning continuum and competency tracking system for medical executive skill fulfillment.

   d. Incorporate and institutionalize the Joint Medical Executive Skills Program Learning Continuum (JMESPLC) to provide a blueprint for the deliberate development of Military Health System (MHS) leaders to the executive level.
2. **APPLICABILITY.** This DHA-PI applies to DHA, and MILDEPs.

3. **POLICY IMPLEMENTATION.** It is DHA’s instruction, pursuant to References (d) through (g), that the DHA will adopt the JMESP for the development, alignment, certification, and tracking of all military medical executive skills education and training (E&T) programs consolidated within a non-linear learning continuum. It is DoD policy that:

   a. DoD appropriated funds must only be used to fill key leadership positions with candidates who have demonstrated executive skills and competencies to perform strategic roles in the MHS, in accordance with Reference (f).

   b. Standards of formal education in healthcare executive leadership and healthcare management be based upon the established core competencies found in the JMESP Core Curriculum.

   c. Joint medical executive skills E&T support the MHS leader competency requirement of preparing members of the MHS to be MTF directors through a progressive series of career enhancing duty assignments and educational experiences to develop leadership skills and professional competencies, in accordance with Reference (g).

   d. Programs in healthcare administration be designed and executed to strengthen the capability of the DoD to manage its medical facilities effectively.


5. **RESPONSIBILITIES.** See Enclosure 2

6. **PROCEDURES.** See Enclosure 3

7. **PROPOONENT AND WAIVERS.** The proponent of this publication is the Deputy Assistant Director (DAD), E&T. When Activities are unable to comply with this publication the activity may request a waiver that must include a justification, to include an analysis of the risk associated with not granting the waiver. The activity director or senior leader will submit the waiver request through their supervisory chain to the DAD-E&T to determine if the waiver may be granted by the Director, DHA or their designee.
8. **RELEASABILITY. Cleared for public release.** This DHA-PI is available on the Internet from the Health.mil site at: https://health.mil/Reference-Center/Policies and is also available to authorized users from the DHA SharePoint site at: https://info.health.mil/cos/admin/pubs/SitePages/Home.aspx.

9. **EFFECTIVE DATE.** This DHA-PI:
   
a. Is effective upon signature.

b. Will expire 10 years from the date of signature if it has not been reissued or cancelled before this date in accordance with Reference (c).

/S/
RONALD J. PLACE
LTG, MC, USA
Director

Enclosures:
1. References
2. Responsibilities
3. Procedures

Glossary
ENCLOSURE 1

REFERENCES

(a) DoD Directive 5136.01, “Assistant Secretary of Defense for Health Affairs (ASD(HA)),” September 30, 2013, as amended
(c) DHA-Procedural Instruction 5025.01, “Publication System,” August 24, 2018
(d) 10 USCS 1073, P.L. 115-91, Div A, Title VII, Subtitle B, 722, 131 Stat. 1441
(e) DHA-Interim Procedures Memorandum 18-014 “Joint Medical Executive Skills Program,” September 18, 2020
(f) DoD Appropriations Act for Fiscal Year 1992, Public Law 102-172, Section 8096
(g) DEPSECDEF Memorandum, “Administrative Skill Qualifications for Command of Medical Facilities,” December 18, 1991¹

¹ This reference can be located by contacting the E&T, LEADS office at: 210-221-9253
ENCLOSURE 2

RESPONSIBILITIES

1. DIRECTOR, DHA. Under the authority, direction, and control of the Under Secretary of Defense for Personnel and Readiness, Assistant Secretary of Defense for Health Affairs, and in accordance with Reference (b), the Director, DHA will:

   a. Exercise overall responsibility for plans, programs, requirements, and systems pertaining to the JMESP and the management of an executive skills learning continuum.

   b. Evaluate the effectiveness and efficiency of medical executive skills programs and direct the recommendation of changes.

2. SECRETARIES OF THE MILDEPS. DHA will task the cognizant DAD to coordinate with the Secretaries of the MILDEPS to:

   a. Establish the core competencies required for an individual to serve as a military commander or director of a military medical treatment facility, in accordance with Reference (d).

   b. Ensure that adequate educational and training programs in executive and healthcare administration are available for MHS personnel.

   c. Review operational guidance for the JMESP to fully align leader development learning opportunities with the JMESP to maximize overall return on investment.

   d. Appoint a senior-level representative military officer (O-5/O-6 pay grade or civilian equivalent) to the JMESP Working Group.

   e. Work with respective JMESP lead proponents to:

      (1) Identify comparable executive medicine qualification designations for MHS personnel and standard metrics for tracking competency fulfillment.

      (2) Share best practices to effectively train and educate personnel in executive medicine.

      (3) Standardize JMESP courses for enterprise-wide acceptance of completed training.
3. **DAD-E&T**. The DAD-E&T must:

   a. Program, budget, and finance the work of the JMESP through the Defense Health Program.

   b. Execute the JMESP and learning continuum through the Leadership, Education, Analysis, Development, Sustainment (LEADS) Division.

   c. Specify funded and JMESP-approved learning continuum courses.

   d. Establish the JMESP Working Group composed of senior-level (O-5/O-6 or civilian equivalent) representatives from the Services and JMESP lead proponent.

   e. Convene the JMESP Medical Executive Education Curriculum Review to review and update JMESP requirements.

   f. Monitor implementation of the procedures established herein.

4. **DIVISION CHIEF, LEADS**. Under the authority and direction of the DAD-E&T, the Division Chief, LEADS must:

   a. Manage the JMESP and learning continuum as Chair of the JMESP Working Group.

   b. Develop and manage a common competency tracking system in conjunction with Service leads and JMESP proponent.

   c. Manage, execute, and evaluate all JMESPLC courses.

   d. Apply standard instructional design process for funded requirements of new or modified learning continuum courses.

   e. Maintain currency of the JMESP core curriculum.
ENCLOSURE 3

PROCEDURES

1. MHS JMESPLC and Competency Descriptions

   a. MHS JMESPLC. The JMESPLC reflects the progression of competencies needed as an MHS member rises through the ranks, from knowledge to application skill levels required of all leaders to strategic capabilities required of the most senior leaders.

   b. DHA Joint Medical Executive Skills Program Competencies Model. The JMESP Competencies Model provides the identified leadership competencies needed for the deliberate development of MHS leaders to the executive level. The competencies are categorized under seven broad domains: Military Medical, Leadership and Organizational Management, Health Law and Policy, Health Resources Allocation, Ethics in the Healthcare Environment, Individual and Organizational Behavior, and Performance Management and Improvement, and represent the unique skill set military healthcare leaders must possess. The JMESP includes a core curriculum outlining the behaviors that demonstrate competency achievement. The core curriculum and competencies are to be used as guidance for the deliberate executive education development of MHS personnel to the executive level in all DoD Components.

2. JMESPLC

   a. Purpose. Established in Fiscal Year 2018, the JMESPLC was designed to create a developmental strategy across all career phases to ensure members obtain the depth and breadth of experience required to ultimately fill a senior leader role in the MHS. The JMESPLC provides a competency-based approach to the deliberate development of MHS medical leaders with the agency-wide perspective needed to lead markets and facilities and achieve results in the joint and multi-national environment. The JMESPLC consists of validated training, education, and experience required to be selected by Director, DHA as a Director, MTF.

   b. Goals. Aligned with the JMESP Competency Model of the MHS, the JMESPLC provides a multi-dimensional, pyramid-style, experience-inclusive approach, and guide for gaining the requisite knowledge, application skills, and expertise needed to demonstrate command level behaviors at the Market Leader and Director, MTF levels. Learning opportunities include:

      (1) Distributed learning resources which provide new, refresher, and sustainment training products based upon the established JMESP competencies.

      (2) Basic and advanced levels of professional military education.

      (3) Graduate courses or degrees in business management or healthcare administration.
(4) JMESP developed or approved leadership courses designed to enhance executive skill competencies.

(5) Service developmental assignments and deployments.

(6) Professional certifications in executive leadership from accredited colleges and universities.

c. Utilization and Tracking. The JMESPLC is dynamic in nature and provides all MHS members with a variety of pathways to acquire the necessary competencies. A pyramid-style construct defines the multi-directional nature of the continuum. It is assumed individuals will progress in competency attainment with any chosen pyramid pathway whether horizontal or vertical; this includes developmental work assignment experiences with greater responsibility or advanced learning and education opportunities. In order to validate the exposure of MHS members to learning content and experiences that enhance competency, the JMESPLC will leverage existing information technology systems to track the accomplishment of learning opportunities by MHS members. The competency tracking system will provide the Director, DHA with additional data for making selections of Service-qualified nominees for MTF and Market leadership positions.

d. JMESP Course Content Proficiency Levels. The JMESPLC consists of courses and programs providing competency content at different proficiency levels. Certain courses will be targeted at specific career milestones. The three course levels designed within the continuum are: Basic, Intermediate, and Advanced. Basic-level courses will deliver content primarily through distributed learning modalities. Basic-level content may be obtained through informal learning such as initial skills training, basic developmental training, or self-directed learning. Basic-level content for junior- to mid-grade MHS members and civilian personnel will also incorporate distributed learning and may be used as a Phase 1 for specific DHA-approved blended courses that can be delivered locally. Intermediate courses will be joint in attendance and will provide seats for Service-recommended personnel and civilians in mid-level leadership and management positions. All DHA-funded intermediate-level courses must incorporate the JMESP competencies and may also include a distributed learning component in addition to resident training. Advanced-level content will be provided to highly qualified military and civilian leaders who have demonstrated the ability to assume a higher level or responsibility and have been identified and nominated by their Service to attend DHA approved and funded courses.

e. JMESPLC Construct. The JMESPLC is developed on the concept of a four-face pyramid. The four faces (Experience, Leadership Development, Medical Executive Skills, and Education) of the pyramid reflect the areas which guide MHS members in the progressive direction of executive skill competency and attainment.
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>DAD</td>
<td>Deputy Assistant Director</td>
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<tr>
<td>DHA-PI</td>
<td>Defense Health Agency-Procedural Instruction</td>
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<tr>
<td>E&amp;T</td>
<td>Education and Training</td>
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<td>JMESP</td>
<td>Joint Medical Executive Skills Program</td>
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<td>JMESPLC</td>
<td>Joint Medical Executive Skills Program Learning Continuum</td>
</tr>
<tr>
<td>LEADS</td>
<td>Leadership, Education, Analysis, Development, Sustainment</td>
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<tr>
<td>MHS</td>
<td>Military Health System</td>
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<tr>
<td>MILDEP</td>
<td>Military Department</td>
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<tr>
<td>MTF</td>
<td>Military Medical Treatment Facility</td>
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