



# Defense Health Board

Defense Health Board (DHB)  
Review of the Department of Defense (DoD)  
Concept of Operations (ConOps) for the  
Establishment of the Joint Pathology Center (JPC)

Joseph E. Parisi, MD

Chairman

Scientific Advisory Board for Pathology & Laboratory Services



# DHB Review Panel Members

- **Scientific Advisory Board for Pathology & Laboratory Services**
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  - John E. Pless, MD
  - Alan D. Proia, MD, PhD
  - Robert L. Reddick, MD
  - Mary S. Richardson, MD
  - John D. Stobo, MD
  - Patricia A. Thomas, MD
  - Sherif R. Zaki, MD, PhD
  - Florabel G. Mullick, MD, ScD, Executive Secretary
- **Selected DHB Core and Subcommittee Members**
  - Maj Gen (Ret) George K. Anderson, MD, MPH
  - Wayne M. Lednar, MD., PhD
  - Kenneth W. Kizer, MD, MPH
  - Lt Gen (Ret) Paul K. Carlton, Jr., MD
  - Raymond F. DuBois
  - Philip E. Tobey, FAIA, FACHA
  - Dennis O'Leary, MD
  - John L. Kokulis, MBA
- **Chair: Joseph E. Parisi, MD**



# DHB Review Process

- June 16, 2008: Question presented to DHB by Dr. Joseph Kelley, DASD HA (C&PP)
- September 4-5, 2008: DHB Meeting
  - Joint Pathology Center Update and ConOps presented by Dr. Joseph Kelley and Col Thomas Baker
- October 2, 2008: Teleconference with Review Panel Members
- Draft Review Document prepared and now circulated to members of SABPLS and DHB Core Board
- Nov 20, 2008: Review & Discussion with DHB
- Revised report to be submitted to Assistant Secretary of Defense for Health Affairs



# Public Law 110-181

**H.R. 4986, the National Defense Authorization Act for Fiscal Year 2008, became Public Law 110-181 on 28 January 2008**

**Section 722 of the statute recognizes the following:**

- The President shall establish and maintain a Joint Pathology Center (JPC) that shall function as **the reference center in pathology for the Federal Government**
- If the President makes a determination, within 180 days after the date of the enactment of this Act that the JPC cannot be established in the Department of Defense, the JPC shall be established as an element of a Federal agency other than the Department of Defense. **If the President cannot make this determination, the JPC shall be established in the Department of Defense**



# Public Law 110-181

(Continued)

**The Joint Pathology Center shall provide, at a minimum, the following:**

- **Diagnostic pathology consultation services** in medicine, dentistry, and veterinary sciences
- **Pathology education**, to include graduate medical education, including residency and fellowship programs, and continuing medical education
- **Diagnostic pathology research**
- **Maintenance and continued modernization of the Tissue Repository**
  - **Utilization** of the Repository in conducting the activities listed above



# Board Charge

- **Deputy Assistant Secretary of Defense for Health Affairs, Clinical and Program Policy, Dr. Joseph Kelley, requested the DHB:**
  - Review the DoD implementation plan for the establishment of the JPC
  - Comment on the **plan's appropriateness and feasibility** for DoD within the context of the 2005 Base Alignment and Closure (BRAC) Commission Report and subsequent legislation



# JPC Working Group (JPCWG)

**The JPCWG formed a Concept of Operations (ConOps) to reflect the groups consensus recommendation to include a Vision and Mission statement as follows:**

**Vision:** To be “the Federal Government’s **premier** pathology reference center supporting the Military Health System (MHS), DoD and other Federal agencies”

**Mission:** “The JPC will provide **world-class** diagnostic subspecialty consultation, education, training, research, and maintenance/modernization of the Tissue Repository in support of the mission of the DoD and other Federal agencies”



# Review Panel Assessment

- Concurs with the ConOps Vision and Mission
- DoD needs to consider a number of findings and recommendations as they develop the more extensive strategic plan
- DoD has an unique opportunity to develop a center of excellence





# Review Panel Assessment

(Continued)

- **Clinical Scope of Service**

- Subspecialty service scope
- In-theater support
- Process of handling individual cases, including accession, triage, disposition, flow, reporting, and quality assurance
- Needs of/interactions with:
  - Other Federal Agencies
  - Armed Forces Medical Examiner

- **Positioning of JPC within Command Structure**

- JTFCapMed senior leadership rather than component of hospital-based pathology department



# Review Panel Assessment

(Continued)

- **Governance**

- Establish a Board of Governors
  - Include Federal agency representation
  - Annual review of operations
  - Performance metrics

- **Organizational Structure**

- Periodic assessment of adequate resourcing as workloads clarify
- Utilization of business principles and practices to increase cost efficiency (LEAN, 6-Sigma)



# Review Panel Assessment

(Continued)

- **Staffing**

- Appropriate administrative laboratory staffing for specialty pathology personnel
- Identify the required subspecialties
- Professional staffing issues: “Senior” vs “junior”-level staff; salary, research, educational opportunities
- Full man-power allocation review based on business plan

- **Projected Workload**

- Survey of Federal agencies to determine current and future pathology needs
- Case complexity issues



# Review Panel Assessment

(Continued)

- **Tissue Repository**
  - The “CROWN JEWEL”
  - Recent independent study by Asterand estimates worth at \$3-3.6 Billion
  - Maintain and expand—requires active, committed professional and support staffs
  - Develop process for access and usage limits
  - Facilitate Interagency/Civilian access



# Review Panel Assessment

(Continued)

- **Research**

- Institute/implement a DoD health research management process
  - For rationalization and approving protocols
  - Collaboration with other Federal agencies and Civilian academic centers
  - Criteria for consideration, inclusive, and protocol approval priorities



# Review Panel Assessment

## (Continued)

- **Education and Training**
  - Clearly define contributions by USUHS and JPC
  - Subspecialty pathology training
  - Subspecialty pathology courses
  - Consideration of broad spectrum of interest areas
    - Aviation and accident forensics and investigation
    - Consistent with military treatment priorities and challenges
- **Major Equipment and Special Design Requirements**
  - Include measures to procure equipment to ensure and maintain state-of-the-art laboratory and support services
  - Workflow considerations to include separation of assets between the Bethesda and Forest Glen campuses
  - Establishment of state-of-the-art laboratories
    - Molecular laboratories



# DHB Recommendations

1. DoD has an **exceptional opportunity** to build a **center of excellence**:
  - Within constraints of the law
  - Meet the needs of all Federal agencies
  - Include a structure for the JPC that is sufficiently **adaptable and flexible**
  - Meet **future requirements** of the DoD and other Federal agencies as they arise
  - Ensure the **equity of all Federal agencies** is considered in the services provided by the JPC
2. **Subspecialty areas** need to be **identified**



# DHB Recommendations

(Continued)

3. **Organizational structure** must be **sufficiently flexible**
  - **Collaborative relationships** with Civilian entities
  - **Education and training component**
  - Meet future **military health** needs
  
4. Develop governance structure to **ensure stakeholder interests**





# DHB Recommendations

(Continued)

5. **Performance metrics** essential and periodically reported to the DHB
6. Ensure adequate resources to include **funding, staff, space, equipment, and facilities**
  - Vital **component of strategic plan**
  - Ensures and sustains **premiere service**



# DHB Recommendations

(Continued)

7. Current ConOps budget may be inadequate for all projected activities
  - Maintenance and modernization of the Tissue Repository
  - Pursue funding opportunities and collaborative efforts with other Federal agencies
  - Permit JPC to thrive and meet its mission



# DHB Recommendations

(Continued)

8. The Board strongly believes the **Tissue Repository is a national treasure**
  - Every effort must be pursued to guarantee it is **preserved, modernized, and utilized appropriately**
  
9. The DHB will **review the strategic plan**
  - Engage early in the process



# DISCUSSION