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# Total Force Fitness (TFF): *Program Update*

10 FEB 2020



# Overview of Total Force Fitness (TFF)

TFF is a **multi-domain framework** that provides the DoD with the capability to **understand, assess, and maintain** the full spectrum of components affecting Service member readiness and their ability to meet mission requirements.

- **Mission:** To measurably improve human performance optimization and readiness of the Total Force through addressing eight domains of fitness via data-informed and synchronized policy, programs, and business practices
- **Vision:** A state in which all Service members excel at completing mission essential tasks (METs) and the unit/organization sustains optimal performance, even under difficult conditions
- **2020 Objectives:** Transformational implementation of TFF across the DoD, which includes:
  1. **Authority.** Establishing enterprise level governance of TFF policies and activities
  2. **Governance.** Aligning policies and business practices impacting TFF domains
  3. **Understand & Assess.** Creating and maturing an analytic capability to support holistic solutions to improving individual readiness and completion of METs



# TFF Line of Effort 1: Authority

To accomplish its mission, TFF is **establishing policy and delineating responsibilities** through the development and publication of a **TFF DoDI**.

## Major Efforts Underway:

- Updating **CJCSI 3405.01—Total Force Fitness Framework** in partnership with Joint Staff to reflect results of the 2018 TFF Capabilities-Based Assessment (CBA); awaiting input into formal coordination
- Updating name and scope of the eight **TFF domains** to:
  - Reflect the underlying impact of behavioral fitness on all domain areas and ability to complete METs
  - Emphasize the significance of financial fitness as it can impact performance in other domains
  - Broaden the spiritual domain to include ideological fitness (e.g. warrior ethos, oaths of office)
  - Fine-tune medical/dental fitness domain to emphasize preventive care (prehabilitation)
- Coordinating and synchronizing implementation of **28 tasks approved in JROCM 073-18 (JULY 2018)**
  - Collaborating with the Services (JROCM Task #21) to draft a DoDI on TFF to clarify roles and responsibilities; DoDI still under development and target date to begin formal coordination in 1 MARCH 2020

# TFF Line of Effort 1: Authority

## *Recent Reserve Component (RC) DOTmLPF-P Change Recommendation (DCR) Accomplishments*



- RC DCR **recently resubmitted into formal coordination** as a result of changes made to the TFF Framework and inclusion of additional domain components
- **TFF DCR Task #23 (Improved MTF access for RC/NGB personnel)**: Recent DoD policy changes allow for RC/NGB personnel access to MTFs for readiness purposes; however, automated and technical processes have not yet been put into practice. An ASD(HA) AO has been assigned to prioritize resolution of these processes:
  - There are 7 existing statutory and 11 DoD policies that support RC health readiness at MTFs even while RC personnel are not on current active duty orders
  - A singular DHA-PI is in coordination to inform MTFs of these existing statuses and policies and how to implement them throughout the MHS until permanent automated and technical processes have been put into place
- OASD/HA requesting DHA to **modify access to the direct care system based on policy**, not TRICARE insurance eligibility as programmed in current algorithms
  - Current algorithms do not show RC eligibility to operators/MTF appointment schedulers
  - Working to have DEERS interface with operators/schedulers reflecting updated eligibility

# TFF Line of Effort 2: Governance

## *Coordination with the Services*

TFF is chartering a TFF Executive Oversight Council (EOC) to **oversee, coordinate, and address system-level changes** across the enterprise.

### **DRAFT TFF EOC Governance Responsibilities:**

1. Steward the 'Fourth Estate' to **optimize support for achieving TFF across the DoD**; P&R- designated TFF Office works for the line
2. Establish an **enterprise-wide strategy to support the Service's ability to meet Title 10 responsibilities**
3. Continue work to **understand, assess and maintain human performance optimization required to complete METs** in deployed environment, physiology changes with environment and exposure, and requirements with O- plans
4. Implement ongoing **ability to identify specific requirements, capabilities and gaps in eight domains of TFF** and coordinate system-wide change management for TFF e.g. DoD food management
5. **Assess Service member fitness and well-being, in near-real-time**, related to individual readiness; develop a methodology for the Council to evaluate programs and share best practices

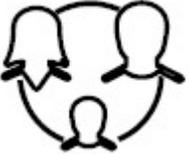
### **DRAFT TFF EOC Membership:**

1. EOC members will include General Officer, Flag Officer, and Senior Executive Service (GO/FO/SES)-level representatives
2. The Vice Chairman of the Joint Chiefs of Staff (VCJCS) and Under Secretary of Defense for Personnel and Readiness (USD(P&R)) will serve as Co-chairs
3. Higher governance is the Deputy's Management Action Group (DMAG)

# TFF Line of Effort 2: Governance

## *Selected TFF Domain Accomplishments*



TFF Domain	Key Domain Components	CY20 Progress & Updates
<b>Nutritional</b> 	<ul style="list-style-type: none"> <li>• Access to Quality Foods</li> <li>• Mission-Driven Macro &amp; Micro Nutrient Requirements</li> <li>• Dietary Supplement Use</li> <li>• Healthy Dietary Choices</li> </ul>	<ul style="list-style-type: none"> <li>• Supported <b>congressional briefs to the HASC/SASC</b> on enterprise-wide nutrition efforts</li> <li>• Put forth COAs to Establish an <b>Office of the Secretary of Defense (OSD) Nutrition Cell</b> with the authority to coordinate, oversee, and evaluate progress in transforming the food environment</li> <li>• Supported the Armed Forces Recipe Service in <b>updating 1600+ recipes and guideline cards</b></li> <li>• Collaborating with the Defense Logistics Agency (DLA), Services, and the US Food and Drug Administration to update the <b>Basic Daily Food Allowance</b> to meet the nutritional and caloric needs of special military populations</li> <li>• Supporting DLA and the Services in developing a <b>Joint Food Buyers Guide</b> to streamline food purchasing and increase economic buying power</li> <li>• Coordinating with DLA and the Services to identify a common interface (<b>Joint Food Management System</b>) to bridge six existing food management systems to ensure the right food, at the right place, at the right time</li> </ul>
<b>Social</b> 	<ul style="list-style-type: none"> <li>• Family &amp; Community Engagement</li> <li>• Cultural Inclusiveness</li> <li>• Peer-Peer Networks</li> <li>• Unit Cohesion</li> </ul>	<ul style="list-style-type: none"> <li>• <b>New responsible drinking campaign</b>, OwnYourLimits, developed and launched in OCT 2019 to support responsible drinking choices across the enterprise</li> </ul>

# TFF Line of Effort 2: Governance

## *Selected TFF Domain Accomplishments, Continued*

TFF Domain	Key Domain Components	CY20 Progress & Updates
<b>Medical &amp; Dental Preventive Care</b> 	<ul style="list-style-type: none"> <li>• Health Assessments</li> <li>• Screening</li> <li>• Immunization</li> <li>• Prehabilitation</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Domain renamed</b> per recent recommendations from the GO/FO review to emphasize preventive care</li> <li>• Moved focus beyond physical health assessment to include and emphasize <b>prehabilitation</b> (i.e., prevention) to improve resiliency, human performance, and ability to complete METs</li> <li>• Emphasis that <b>IMR</b> is only one component of Total Force readiness, not reflective of personal ability to complete METs</li> <li>• Realization that Combatant Commands need better visibility on <b>deployment-limiting medical conditions</b></li> </ul>
<b>Ideological &amp; Spiritual</b> 	<ul style="list-style-type: none"> <li>• Identity and Belonging</li> <li>• Meaning and Purpose</li> <li>• Service Core Values</li> <li>• Ability to Cope</li> </ul>	<ul style="list-style-type: none"> <li>• Name of Spiritual Fitness <b>domain renamed</b> per recommendations from the GO/FO review</li> <li>• Increased ability to assess and understand variables <b>impacting unit morale and cohesion</b></li> </ul>
<b>Psychological</b> 	<ul style="list-style-type: none"> <li>• Proactive Recovery for Thriving</li> <li>• Cognitive Function</li> <li>• Mental Acuity</li> <li>• Self-Actualization</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Collaborating with USD(R&amp;E) to provide consolidated technical assessments and guidance for optimizing cognitive function</b></li> </ul>

# TFF Line of Effort 3: Understand & Assess

## *Coordination with the Services*



TFF is creating a **shared analytics environment** where all readiness-related metrics can be studied, including Individual Medical Readiness and those related to substance misuse.

- Analytic capabilities provide a set of tools for decision-makers to **develop, inform, and/or align high-value policies and processes with Service programs for the coordination of TFF** and improvement of readiness and resiliency
- OUSD(P&R) was tasked by the Secretary of Defense to **leverage TFF analytics capability to inform policy changes** and ensure availability of models throughout the DoD enterprise
- TFF analytics **measure readiness and resiliency**, predict force losses due to disease and nonbattle injuries (DNBI), **inform and align policies** and programs to mitigate loss, and **optimize human performance** in accordance with the TFF Framework
- The development of **baseline metrics for TFF** is currently underway; analysis will be completed in 2020
- TFF developed, and is currently operating, **three DoD-wide substance misuse campaigns**: Own Your Limits (promoting responsible drinking), YouCanQuit2 (promoting tobacco cessation), and Too Much To Lose (preventing opioid misuse; forthcoming) to better measure and understand the extent of – and adverse effects of – substance misuse on the total force



# TFF Line of Effort 3: Understand & Assess

## *Outcome and Efficiency Measures and Metrics*

Sample Domain Measure	Sample Performance Measure	Readiness & Resiliency (RR1-RR3) Measure
Decrease disease and nonbattle injury (DNBI)	Ability to perform mission essential tasks	Readiness return on investment

### Individual Readiness & Resiliency\*

- **RR1:** The rate at which individuals can deploy when needed, augmenting traditional “check-list” Individual Medical Readiness (IMR) measures
- **RR2<sup>1</sup>:** The rate at which individuals can successfully complete a deployment
- **RR3:** The rate at which individuals can successfully reintegrate upon return

**Goal:** Working toward the scalability of all analytics capabilities to be made available enterprise-wide for all Services and Components

**Achievement:** Proof of concept RR model built and tested

**In Process Updates:** Refining and improving RR models in research environment; preparing for migration from research environment to production environment; and conducting data latency analysis to evaluate impact on RR degradation

\*JROC validated measures and core to the SECDEF mandate

<sup>1</sup> Proof of concept or mature model completed

# TFF Line of Effort 3: Understand & Assess Management Metrics



## Opportunity costs and risks:

### Community Readiness\*\*

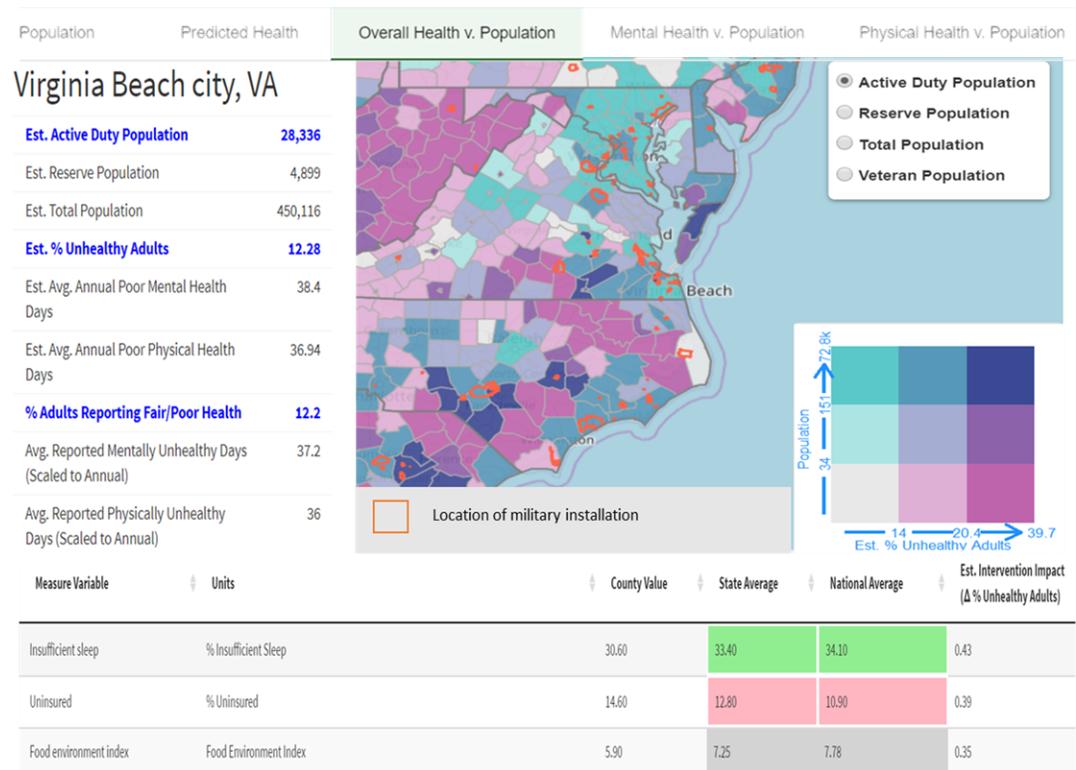
- **Overall Health<sup>2</sup>:** Percent of adults reporting having poor/fair health
- **Physical Health<sup>3</sup>:** Number of poor physical health days in the past month
- **Mental Health<sup>4</sup>:** Number of poor mental health days in the past month

\*\*JROC validated measures

<sup>2</sup> Proof of concept or mature model completed

<sup>3</sup> Proof of concept or mature model completed

<sup>4</sup> Proof of concept or mature model completed



# TFF Line of Effort 3: Understand & Assess

## Building Healthy Military Communities (BHMC) Pilot

Problem	Solution	Output
Significant <b>bi-directional communication challenges</b> exist between public health departments/community partners and DoD	State Coordinators serve as a central hub to <b>facilitate connections</b> and awareness (between national, state, local, tribal partners and the DoD) to build strategic-level relationships that optimize the environment where Service members and their families live	<ol style="list-style-type: none"> <li><b>Epi-maps of all 50 states and territories</b>, highlighting counties with the highest Service member density and the top three contributors to public health risk, available for use by a variety of national, state, and local partners such as the Defense State Liaison Office, Military OneSource, and State Health Departments to inform targeted messaging and interventions</li> <li>A <b>BHMC toolkit sharing best practices and recommendations</b> will be shared with service providers, such as Family Advocacy Centers, to support crucial connections between DoD/other Federal agencies and state and local partners that can improve public health outcomes</li> <li><b>Implementation of targeted interventions</b> is helping senior decision-makers better forecast, allocate, and provide resources to solve the toughest challenges facing geographically dispersed Service members and their families</li> <li><b>BHMC audience has grown by factor of 16</b> on Facebook. As of January 2020, BHMC Facebook pages now speak directly to more than 25,000 individuals, increasing from 1,400 at the start. Since August 2019, overall BHMC monthly follower growth has averaged 85%</li> </ol>
States and counties <b>lack understanding</b> of public health and well-being challenges through the lens of military readiness	Partnering with the Robert Wood Johnson Foundation (RWJF), BHMC built <b>epi-maps</b> to determine the <b>top health risks affecting Service members in each county</b> . Through developing these maps, states, counties, and the DoD now have greater visibility into the top concerns facing Service members within the community, and are able to better align priorities to improve access to viable resources	
A common <b>misunderstanding</b> is that the DoD wholly provides benefits and resources to all Service members and their families, regardless of whether they are serving in a full or part-time capacity	State Coordinators are educating community partners that access to, and receipt of, <b>DoD benefits is dependent upon whether a Service member is full or part-time</b> . Service members are an asset to their communities both at the state and local level as they contribute to civil operations support, local leadership and defense support. As a community contributor, they also need and are eligible for community resources	
There was traditionally <b>little to no representation of DoD or military interests</b> on state public health-and/or improvement-focused boards or councils, including State and County Health Improvement Boards	National Association of Chronic Disease Directors (NACDD) supports State Coordinators as they participate and <b>provide input into the State Health Improvement Plans</b> , County Health Improvement Plans, and State Economic Improvement plans	
Outside of installations, states and counties <b>lack comprehensive awareness</b> of which localities are most densely populated with Service members and by extension, the needs in these areas	Through partnerships with the Services, Centers for Disease Control and Prevention (CDC), Department of Health and Human Services (HHS), and the Department of Veterans Affairs (VA), BHMC is working to add a question to the Behavioral Risk Factor Surveillance System (BRFSS) that specifically <b>asks respondents about their current military status</b> in addition to Veteran status	

### UNREALIZED OUTCOMES

In the next two years, BHMC seeks to evaluate meaningful, outcomes, measures, and benchmarks demonstrating impact on force readiness. **BHMC is partnering with the Uniformed Services University (USU) to measure:**

- Improving community-level health-related quality of life (HRQoL) scores
- Improving retention
- Improving Service members readiness to deploy
- Decreasing the prevalence of disease and non-battle injury (DNBI)
- Including a DoD perspective on every state's State Health Improvement Board (or equivalent)
- Question added to the BRFSS that specifically asks respondents about their current military status

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## Back-Up

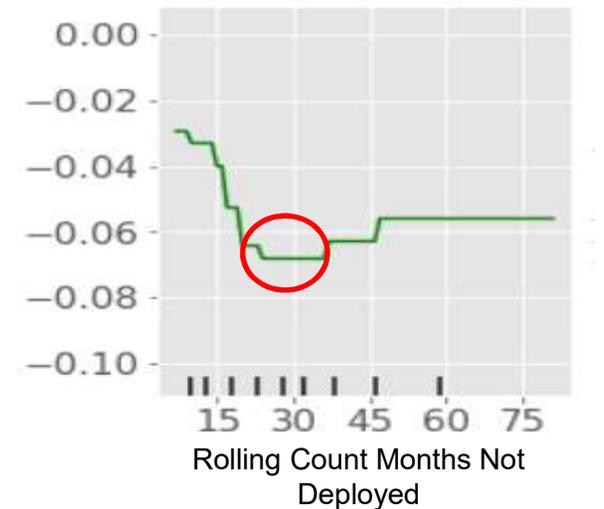
# TFF Line of Effort 3: Understand & Assess

## Management Metrics



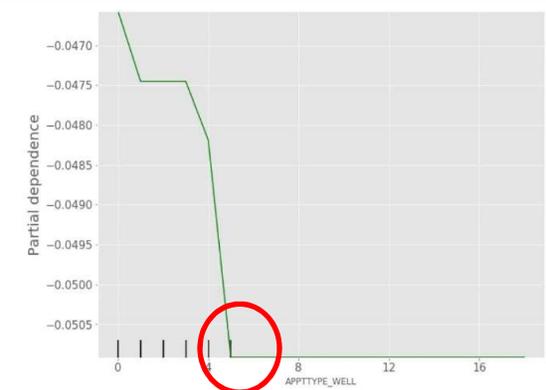
### Quantify Value of Initiative

- Readiness and resiliency predictions find balance between too little and too much time between deployments
- Achieve “rested, but not rusty”
- This could be used to inform deployment to dwell policies by sub-populations



### Future Allocation of Resources:

- Visits to Army Wellness Center resource positively correlated with successful deployment



# TFF Line of Effort 3: Understand & Assess

## *Data Repositories*



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### ■ **Army Analytics Group – Person-Event Data Environment (Research)**

- Personnel-related data (health, behavioral, administrative, deployment) spanning two decades.
- Environment for developing models based upon known historical outcomes.

### ■ **Comptroller General – ADVANA (Production)**

- Developing to be the DoD Readiness and Financial Reporting System.
- Acquiring Service logistics, training, and personnel data to support reporting and modeling.

# TFF Line of Effort 3: Understand & Assess

## *Updated Status of Joint Capabilities*



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### Updated Status of Joint Capabilities

- **Army**
    - Proof of Concept model developed for Active Duty Army using historic data in Person-event Data Environment (PDE) with Army Analytics Group
    - Coordinating transition to production in operational system (Advana) with access to near real time data
    - Community Readiness Open Data Dashboard migrated to Advana platform
  - **Navy**
    - In process of adding historic data to begin Proof of Concept modeling for Active Duty Navy
  - **Air Force**
    - Data for Proof of Concept modeling still needs to be identified and gathered into PDE and Advana
  - **Marine Corps**
    - Data for Proof of Concept modeling still needs to be identified and gathered into PDE and Advana
  - **National Guard Bureau (NGB)**
    - ARNG and ANG models being developed currently following completion of evidence assessment to increase readiness and reduce suicide
    - Capability to be both evidence-based and data-driven
    - Community Readiness dashboard with National Guard population count migrated to Advana platform
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# Total Force Fitness (TFF) Policy

## *Requirements & Authority*

- Fiscal Year (FY) 2014 DoD Appropriations Bill, Senate Report (S.R.) 113-85, directed DoD to develop a **enterprise-level, strategic approach addressing challenges in optimizing performance and synchronizing policy in support of TFF**
- FY 2015 DoD Appropriations Bill, S.R. 113-211, recommended that the Department **identify and implement program metrics to measure impact on health as described by TFF**. FY 2016, S.R 114-63 addressing same for Reserve Component
- FY 18 Secretary Mattis' Close Combat Lethality Task Force Action 6: The USD(P&R) will utilize the TFF Readiness Prediction Model **modeling capability to inform policy identifying readiness and cohesion challenges to unit commanders.**
- The TFF DOTmLPP-P Change Recommendation (DCR) Joint Requirements Oversight Council Memorandum (JROCM) 073-18 and the Chairman of the Joint Chiefs of Staff Instruction (CJCSI) 3405.01, Total Force Fitness framework
  - TFF initiated the Capabilities Based Assessment (CBA) as a part of the Joint Capabilities Integration and Development System (JCIDS) process for TFF. The CBA **identified gaps in DoD's ability to implement the TFF framework**
  - July 2018, The Joint Requirements Oversight Committee JROCM 073-18 **approved 28 enterprise-wide tasks for coordination, implementation, and management to strengthen TFF, the TFF portfolio reports back on progress to the Joint Staff every six months (On time & target, 3 tasks already closed)**