

National Disaster Medical System Pilot Program

Defense Health Board

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The National Center

Est 2008

The National Center for Disaster
Medicine and Public Health
(NCDMPH) was established under
Homeland Security Presidential
Directive-21 (HSPD-21)

- Both a federal organization and academic center
- Based at the Uniformed Services University
- Supporting role to the federal interagency
- Partnership between DoD, HHS, DHS, DoT, VA, and DoS



Image Credit: Smiley N. Pool/The Dallas Morning News

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The National Center's Joint Disaster Medicine and Public Health Ecosystem

has been established to serve as a national resource for advancing the Nation's readiness for disasters and other health emergencies. The ecosystem is comprised of leading organizations across government, academia, and industry that have demonstrated excellence in disaster medicine and public health.



Mission

To advance the Nation's medical and public health readiness for disasters



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Mandate

Joint Disaster Medicine and Public Health Program

Science

DATA TO DECISIONS



Operations

DECISIONS TO IMPACT



Education

SUSTAINED EXCELLENCE



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Focus

Disaster
Medicine and
Public Health

Science,
Education
and Training

Military and
Civilian
Collaboration

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NDMS Pilot Program

National Disaster Medical System

NDMS

United States of America

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NDMS Origin

- Created by Congress in 1984 for Cold War repatriation mission
- Partnership between DoD, VA, DHS, and HHS
- Three primary missions
 1. Medical response
 2. Patient movement
 3. Definitive care
- 3,800 federal intermittent employees
- 40 DMAT (10 on call per month)
- Never been used for large-scale combat operations



NDMS Pilot Overview

Motivated by concerns that were later validated¹ that the National Disaster Medical System (NDMS) lacked the requisite capacity and interoperability to meet the medical surge requirements of a large-scale combat operation.

Congressionally directed program to enhance interoperability and expand capabilities of the NDMS (DoDI 6010.22)

THE PILOT IS REQUIRED TO:

- Address the requirements of a LSCO or catastrophic event in the homeland
- Establish partnerships with public and private healthcare organizations
- Ensure coordination with the Federal Interagency
- Be conducted over five years at no less than five sites

The National Center for Disaster Medicine and Public Health was chosen as the Office of Primary Responsibility

¹Kirsch, Thomas D., et al. "Validation of Opportunities to Strengthen the National Disaster Medical System: The Military-Civilian NDMS Interoperability Study Quantitative Step." *Health security* (2023).



Image Credit: Health.mil

NDMS Pilot Execution

NDMS Pilot sites were reviewed and chosen by a Federal Interagency Working Group and approved by ASD(HA).

Pilot site projects are directed by NCDMPH and executed by

- Pilot site-based field implementation teams (FIT)
- Regional academic partners
- Health care industry partners

Pilot site stakeholders include

- Federal ESF-8 partners
- State ESF-8 partners
- Local ESF-8 partners
- DoD and VA Federal Coordinating Center leadership
- Civilian hospitals, post-acute care facilities, etc.



Sacramento, CA Denver, CO Omaha, NE San Antonio, TX National Capital Region



NDMS Pilot Activities

NCDMPH is working to ensure active collaboration and unity of effort across all Pilot activities. Site projects, national studies, and exercises are being leveraged to inform and strengthen federal, state, and local programs.

SITE PROJECTS

Site projects are designed to develop, test, validate, and scale potential solutions aimed at improving the capacity and interoperability of the NDMS.

NATIONAL STUDIES

National studies are designed to investigate key constraints and identify areas of opportunity for meeting the medical requirements of a LSCO.

EXERCISES

Pilot exercises, which include tabletop, functional, and full-scale exercises, are designed to identify needs and assess the effectiveness of adopted solutions.



NDMS Pilot Support to ICMOP

Under NDMS Pilot funding, NCDMPH continues to provide direct support to USNORTHCOM for the development of the Integrated CONUS Medical Operations Plan (ICMOP), including two full time staff. NCDMPH is actively working with USNORTHCOM to align activity timelines and advance our shared medical readiness mission.

NCDMPH Support to USNORTHCOM in FY2023

- ICMOP Base Level II Plan support including mission analysis development, commander's estimate development and exercise planning
- Action Officer support for ICMOP stakeholders
- USNORTHCOM participation in Pilot Year 2 stakeholder meeting and Denver site tabletop exercise
- ICMOP process flow development and comment resolution matrix analysis

Support to USNORTHCOM in FY2024

- Continued staffing support to USNORTHCOM J5
- Level III concept plan development
- Force Flow conference with USTRANSCOM and key ICMOP stakeholders
- Tabletop exercise with the Defense Health Agency
- Reserve medical staffing and case management research projects to evaluate mission analysis gaps and inform Level III planning



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NDMS Pilot Impact Summary

- Five sites have been fully staffed and coordinated with federal, state, local, academic, and industry partners (ability to flex)
- Pilot continues to provide full time staff to USNORTHCOM to support ICMOP development
- Site implementation teams are providing direct support to FCCs, including alignment to ICMOP, updating FCC patient reception plans, and expanding MIL-CIV partnerships
- 10 exercises have been completed across the five Pilot sites
- Other highlights
 - To ensure unity of effort, NDMS Pilot team briefs with USNORTHCOM during monthly in-progress reviews to the JSS
 - Reserve manpower study being conducted in coordination with DoD Homeland Defense Integration and DoD P&R
 - EMS capacity study being conducted in direct coordination with FEMA and ASPR
 - Full review of all current NDMS Pilot activities is underway and being coordinated with the interagency
 - Summary report and deliverables on all initial NDMS Pilot projects currently in development (available NLT Q1 FY25)

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A Fundamental Challenge

Large-scale combat operations will require medical resources well above what can be sustained under steady state.



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NDMS Pilot Improvements

Our objective is to achieve a sustainable model for military and civilian medical readiness by strengthening interoperable partnerships and enhancing the capacity and agility of the National Disaster Medical System.

Goal 1

ASSESS AND STRENGTHEN THE NDMS OF TODAY



Goal 2

DEFINE POLICY RECOMMENDATIONS FOR IMPROVING THE NDMS OF TOMORROW



Goal 3

DEVELOP PLANS FOR RAPIDLY GROWING THE NDMS UNDER FUTURE SCENARIOS



The NDMS Pilot is designed to address the limitations our military and civilian health systems must overcome in preparing for large-scale events. We aim to address these constraints by: (1) assessing and strengthening our current health systems, (2) defining policy recommendations for improving future health systems, and (3) developing operational plans to facilitate rapid capacity building during large scale events requiring resources above what can be sustained under routine operations.

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FY24-25 Pilot Priorities

Considerations and Path Forward

- Pilot has been very active, but must focus to enable scale
 - Comprehensive NDMS Pilot Program Review with the Interagency
- Initial assessment was qualitative only
 - System modeling for a LSCO mission with MIT Lincoln Lab
- Policy review and recommendations will have broad implications
 - Policy Review with Georgetown University and the Library of Congress
- Pilot program should be representative, operational, and sustainable
 - Expansion to potential MIL-CIV innovation hubs in alignment with ICMOP
- Current efforts alone will not overcome the principal challenge in disasters
 - Building on the Fly by Design



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Thank you



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