



THE NMIMC NEWSLETTER



"Optimization Through Webification"

13 October 2000

Volume 3 Number 1

The last Newsletter was our "getting down to brass tacks" issue where we brought you up-to-date on our ongoing endeavors to best serve our customers. I had the opportunity to highlight the programs and issues pertinent to NMIMC's efforts to **"Do FOR You - the Customer!"** This week, I will focus on providing you updates on the status of a number of other software products that will be of interest to you and members of your staff. Changes are occurring so rapidly in the computer systems that support Navy Medicine and the Military Health System, they cannot all be covered in a single Newsletter. Upcoming editions will provide you with "breaking news" about this broad range of programs and initiatives.

NMIMC Strategic Planning Offsite Update

From 2-4 October 2000, the NMIMC Executive Steering Committee (ESC) conducted its annual planning off-site meeting. The objectives were to validate our current NMIMC Strategic Plan, ensuring alignment with the goals and objectives of Navy Medicine, and to develop the annual plan for CY01 that will address the key issues identified by the ESC. Our goals for CY01 include championing e-health, data quality and knowledge management initiatives advocating reliable and seamless infrastructure, improving program management and teamwork, and cultivating an environment of continuous learning. Detailed action plans to support these goals are now being developed by the NMIMC team and I will share them with you in upcoming newsletters.

AMSUS November 2000

The AMSUS Annual meeting will be in Las Vegas 5-10 November 2000. This year's theme "Information Management - One Key to Healthcare Success" is quite timely, and I am very excited to have participated in the planning of the event. The Navy Plenary Session, hosted by RADM M. Hill, DC, USNR, will offer three topics that cover the waterfront of Navy Medicine in the complex environment we face today. The keynote speaker is Mr. Ken Kleinberg of the Gartner Group, who will speak on the future of Information Technology in medicine. I have had the pleasure of working with him in the past, and can assure you this will be an exciting presentation. He will be followed by CAPT David Snyder, MC, USN who will address the current state of our military computerized patient record (CHCS II), and finally CAPT Richard Bakalar, MC, USN will be joined by LCDR Brian Grady MC, USN and COL Warren Whitlock, MC, USA in a panel discussion of "Telemedicine, Past, Present and Future." The Navy session should prove to be very beneficial and informative.

CAPT Rodgers, CDR Horton, and LCDR Little of my senior leadership staff will be with me at AMSUS. As we did last year, I welcome the opportunity to discuss any topic you feel NMIMC can help you with, including partnership ventures in e-health/web-enabling, infrastructure, end user device leases, etc. We will be happy to meet one-on-one, or in group settings. Please contact Ms. Rita DeShields at (301) 319-1045, or email rsdeshields@us.med.navy.mil who will schedule times and locations to meet your needs.

New Technology for Patient Movement

Over the past several months my Code 02 staff (Operational Medicine and Joint Support) along with MED-31 have coordinated efforts with United States

Transportation Command (USTRANSCOM) in developing and testing a web based application for entering patients into the MEDEVAC System for movement from Echelon 3 through Echelon 5. This application will replace the current Aero-Evacuation Program System (APES) currently used by our MTFs patient movement clerks. Last week a select few MTFs sent their patient movement clerks to USTRANSCOM at Scott AFB to receive training on the "TRANSCOM Regulating and Command & Control Evacuation System" (TRAC2ES) for participation in the Operational Function Test (OFT) coming up 16-27 October 2000. Pending successful completion of the OFT the government will perform its own Independent Operational Test and Evaluation (IOT&E) in January 2001. Also, after completion of the OFT, my staff will report to me on the success of this test and I will forward the results to you. At this point let me take a moment and thank NNMC Bethesda, NMC Portsmouth, USNH Roosevelt Roads, USNH Rota, and the medical component at Diego Garcia and others for their continued support.

My POC is HMC Michael Burns at (301) 319-1077, or email mkburns@us.med.navy.mil

Windows 2000 (W2K) Update

The W2K team, with representatives from BUMED and Microsoft, have been investigating the possibility of purchasing claimancy-wide licenses for the Windows 2000 operating system (server and desktop), TechNet Server Subscriptions, Office Professional 2000, and BackOffice Client Access, to include as upgrade guarantee for three years. Our recommendation will be presented to field CIOs before a final decision is made. The Windows 2000 Architecture Policy will be released for comment to the CIOs within the next two (2) weeks. CIOs and MID staff are requested to conduct a technical review of the Architecture Policy and respond with comments to the POCs listed below by October 20, 2000. For details, please see the website http://imcenter/034department/Windows%202000/WIN2K_Architecture_Policy.doc

My POCs for the Windows 2000 Standardization Project are Steve McKay at (301)319-1280 or email, <mailto:stmckay@us.med.navy.mil> and Linnie Coleman at (301)319-1023 or email, <mailto:lrcoleman@us.med.navy.mil>

Web-Enabled Special Pays Processes

In conjunction with MED-52, my staff briefed the Surgeon General, Assistant Chiefs and Deputies on Medical Special Pays (MSP) today. The goal of the MSP Program is to achieve total Web-based accessibility through the Internet. In the interim, we are taking the existing paper intensive process and transitioning it to the Standard Personnel Management System (SPMS II). The interim process will be web-enabled and intranet based, using existing technology within our medical and dental treatment facilities. We expect to have this application fielded by March 2001, and achieve the aforementioned web-enablement of MSPs through the Internet at a later date.

My POC is CDR Marty Young at (301) 319-1110, or email wmyoung@us.med.navy.mil

MICROMEDEX

As you know, we have been successful in obtaining a MICROMEDEX enterprise license. For some of you, this represents dollars that you no longer must execute to provide the same level of health care. I will send a letter to those of you who have procured subscriptions in the past, discussing the centralization of this product in more detail. In the interim, should your renewal come due; I ask that you not renew your subscription, but contact my

POC, Mr. Frank Becker at (301) 319-1229, or email fjbecker@us.med.navy.mil. As this capability is now available claimancy-wide, I anticipate that your previously allocated dollars will be decremented from your funding trail by FY01. For those of you who are first time MICROMEDEX users, please contact Mr. Becker so that we can establish accounts, address metrics and assure your needs are met. To request a copy of the software, visit the MICROMEDEX site at <http://www.micromedex.com/dod/>

NMIMC INTRODUCTION



It is my pleasure to introduce CDR Sharon Winkler-Peiser. CDR Winkler-Peiser comes to NMIMC from Halyburton Naval Hospital, Cherry Point, NC, where she was the Director for Administration and Acting Executive Officer. She has also had tours at the National Naval Medical Center, the Bureau of Medicine and Surgery, and Naval Hospitals Camp Pendleton and Long Beach. CDR Winkler-Peiser is a graduate of the US Army-Baylor University Program of Health Services Administration, and a Diplomate of the American College of HealthCare Executives (ACHE). She is a welcome addition to my staff and will relieve CAPT Rodgers as the Director for Project Management.