



# Joint Task Force National Capital Region Medical **DIRECTIVE**

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J-3B

SUBJECT: Joint Emergency Care Council (JECC) Charter

- References:
- (a) Deputy Secretary of Defense Memorandum, “Establishing Authority for Joint Task Force – National Capital Region/Medical (JTF CapMed),” September 12, 2007
  - (b) Deputy Secretary of Defense Action Memorandum, “Civilian and Military Personnel Management Structures for the Joint Task Force National Capital Region - Medical,” January 15, 2009
  - (c) Comprehensive Master Plan for the National Capital Region Medical, April 23, 2010
  - (d) Supplement to the Comprehensive Master Plan for the National Capital Region Medical, August 31, 2010

1. PURPOSE. This Directive establishes the Joint Emergency Care Council in accordance with the authority in References (a) through (d) and the authority of the Commander, Joint Task Force National Capital Region Medical (CJTF CapMed).

2. APPLICABILITY. This Directive applies to Joint Task Force, National Capital Region Medical (JTF CapMed) and all Joint Medical Treatment Facilities (MTFs) and Centers in the National Capital Region (NCR) (i.e., Fort Belvoir Community Hospital (FBCH), Walter Reed National Military Medical Center (WRNMMC), and the Joint Pathology Center).

### 3. MISSION AND BACKGROUND

a. In 2005, the U.S. Department of Defense announced the closure of Walter Reed Army Medical Center (WRAMC) as part of its Base Realignment And Closure (BRAC) efforts. This resulted in the initiation of integration of two of the Department of Defense’s largest medical centers, WRAMC and the National Naval Medical Center (NNMC). Also included in this initiative are the 779th Medical Group (779th MDG) at Joint Base Andrews, Dewitt Army Community Hospital (which is being replaced by the new FBCH), and the Uniformed Services University of the Health Sciences (USU). The desired end state of this joint integration effort is

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the establishment of or model for future military health care, education, training, and research in the NCR.

b. In support of JTF CapMed's goal of delivering patient-centered care via an integrated health care delivery system, the NCR Emergency Medicine Departments are implementing a JECC within the NCR Joint Operations Area (JOA). The goal of the new council is to enhance the delivery of emergency care in the NCR through improved communication, economies of scale, and an integrated approach to common problems. Areas of integration will include clinical practice guidelines, utilization of a standard Emergency Department (ED) Information System, vital patient clinical data and other applications of the Electronic Health Record system, standardized clinical benchmarking, best practices, and other networked patient safety applications. This will enhance communication and interaction between facilities, caregivers, and patients.

c. JTF CapMed, J3B Clinical and Business Operations, and Directorates of JTF CapMed are responsible for developing initiatives and processes in support of the integration of emergency care within the JOA. The goal of the JECC is to:

(1) Enhance the provision of emergency care utilizing evidence-based emergency medicine specialty practices.

(2) Improve communication among military and civilian facilities.

(3) Facilitate a coordinated response to disasters or area-wide emergencies. The JECC's mission is to coordinate the integrated and efficient delivery of consistently high-quality emergency medical care in the NCR. The JECC will endure post-BRAC to ensure the mission is continued.

4. ORGANIZATION AND MANAGEMENT. The council will establish its own standard operating procedures, meeting schedules, and interim work products necessary for the completion of its mission. All group members are expected to attend meetings established by the team leader and be prepared for discussions and to contribute accordingly. The JECC is composed of senior ED representatives from the MTFs and Centers, and from the JTF CapMed, J-3B Clinical, and Business Operations Directorate. Below is the composition of the JECC:

a. Chair. The chair will be elected by a majority vote of eligible members and will serve in this position for a period of 1 year.

b. Vice-Chair. The vice-chair will perform duties as directed by the chairperson and function as the chairperson in his or her absence with no set service time.

c. Voting Members. Voting members in addition to the chair and vice-chair:

(1) ED Department Head, FBCH.

- (2) ED Head Nurse, FBCH.
- (3) ED Senior Enlisted Leader, FBCH.
- (4) Emergency Medical Services (EMS) Representative (Medical Director or Federal Fire), FBCH.
- (5) ED Department Head, WRNMMC.
- (6) ED Head Nurse, WRNMMC.
- (7) ED Senior Enlisted Leader, WRNMMC.
- (8) EMS Representative, WRNMMC.
- (9) Emergent Care Center (ECC) Medical Director, 779th MDG.
- (10) ECC Flight Commander, 779th MDG.
- (11) ECC Senior Enlisted Leader, 779th MDG.
- (12) EMS Representative.
- (13) JTF CapMed J-3B, representative.
- (14) USUHS, representative for Graduate Medical Education (GME)/research.

d. Advisors to the JECC

(1) Directors from other J-codes within JTF CapMed and other subject matter experts as needed.

(2) Subject matter experts from the three component MTFs and Centers as needed.

e. In the event a team member is unable to attend a scheduled meeting, an informed and empowered representative may attend in his or her stead. Conflicts for JECC members' time are expected, and shall be resolved promptly.

5. RESPONSIBILITIES. See Enclosure

6. RELATIONSHIPS. Component Services/MTF/Center representatives will serve as liaison officers to their associated Service/MTF/Center chain of command. The Chair will facilitate the meetings, ensure meeting agenda items are approved, ensure the goals and objectives of the group are achieved by the targeted dates, and ensure all members are heard and recorded.

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Members of the group will serve as both subject matter experts and liaisons officers to their respective Directorate.

7. AUTHORITIES. The authority granted by Reference (a) that established the JTF CapMed provides the CJTF CapMed authority to use all available military healthcare resources within the JOA to oversee the consolidation and realignment of military healthcare within the JOA that may be assigned to improve the management, performance, and efficiency of the Military Health System.

## 8. ADMINISTRATION

a. Committee Leadership and Management - Meeting Frequency. Meetings shall be conducted and held at each MTF or Center on a rotating basis or at other appropriate facilities. The council shall establish its own rules regarding type and frequency of meetings (minimum of quarterly) and work flow. Subgroups may be established as needed.

b. Decision Making Methodology. The Chair will make the final decision in the event of difficulty coming to a consensus. Unless otherwise directed by the Chair, requests for decisions should be presented to the group following the formal development of courses of action (COAs), associated mission analysis, and recommendations.

c. Status Reporting. Written status reports shall be routed to the Executive Council, JTF CapMed.

d. Problem/Issue Escalation and Resolution Processes. In the event of problems/issues that it cannot resolve, it shall seek the council of the Deputy Commander, JTF CapMed.

f. Closure and Team Self-Assessment. Not applicable.

## 9. DELIVERABLES

a. An annual strategic plan with associated synchronization matrix. Specific deliverables to be developed by the JECC will include clinical practice guidelines, establishment of reportable metrics, disaster preparedness, integrated GME and research programs, performance improvement initiatives, etc.

b. Quarterly updates to JTF CapMed in the form of established, reportable metrics along with any other significant information, issues, or data will be provided by the council.

10. RELEASABILITY. UNLIMITED. This Directive is approved for public release and is available on the Internet from the JTF CapMed Web Site at: [www.capmed.mil](http://www.capmed.mil).

11. EFFECTIVE DATE. This Directive is effective immediately.

  
STEPHEN L. JONES  
Major General, U.S. Army  
Deputy Commander

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ENCLOSURERESPONSIBILITIES

1. VOTING MEMBERS. The voting members may designate an alternate who shall:
  - a. Keep their respective Commander engaged and aware of the decision-making mechanisms in place and the issues being addressed by reporting groups.
  - b. Apprise their respective Commander of the JECC's progress, workings, and recommendations.
  - c. Prepare their respective component leader for participation in the Executive Council by discussing salient issues contained in the briefs.
  - d. Speak with the authority of the Joint MTF or Center as directed by their Commander or Director respectively.
  - e. Act as subject matter experts where appropriate.
  
2. CHAIR, JECC. The Chair, JECC shall:
  - a. Forward an agenda to each voting member no later than (NLT) 3 working days prior to each scheduled meeting.
  - b. Forward to each voting member a clearly written summary of the proceedings of the previous meeting NLT 3 working days prior to each scheduled meeting. The summary shall be in lieu of process minutes. Specifically, the written summary must:
    - (1) Endorse information/decision briefs deemed ready for consideration by the JECC.
    - (2) Specify the way ahead for information/decision briefs deemed not ready for consideration by the JECC.
    - (3) Deliver guidance to reporting groups.
  
3. ADMINISTRATIVE GUIDELINES
  - a. The Chair shall arrange administrative and clerical support for the team meetings.
  - b. Utilize the Joint Operational Planning Process to develop COAs for each issue.
  - c. If consensus cannot be achieved at the JECC level, prepare "Decision Brief" to be submitted to the Executive Committee for ratification.
  - d. When requested, missed deadlines shall be explained in writing to the Chair of JECC.

GLOSSARY

ABBREVIATIONS AND ACRONYMS

BRAC	Base Realignment And Closure
CJTF CapMed COA	Commander, Joint Task Force National Capital Region Medical course of action
EMS	Emergency Medical Services
FBCH	Fort Belvoir Community Hospital
GME	Graduate Medical Education
JECC JOA	Joint Emergency Care Council Joint Operations Area
MTF	Medical Treatment Facility
NCR NLT NNMC	National Capital Region no later than National Naval Medical Center
USUHS	Uniformed Services University of the Health Sciences
WRAMC WRNMMC	Walter Reed National Military Medical Center Walter Reed National Military Medical Center