



Joint Task Force National Capital Region Medical DIRECTIVE

NUMBER 5101.01

MAR 15 2013

JPC

SUBJECT: Joint Pathology Center Tissue Repository Work Group Charter

References: See Enclosure

1. **PURPOSE.** This Directive, based on the authority of References (a) through (d) and in accordance with the guidance of References (e) through (g), establishes the Joint Pathology Center (JPC) Tissue Repository Work Group (TRWG) to review the recommendations of the Institute of Medicine (IOM) regarding the utilization of the JPC Tissue Repository. The TRWG will determine whether the recommendations can be feasibly implemented. At the conclusion of this review, the work group will use its findings and other sources to outline a concept of operations for the Tissue Repository as defined in National Defense Authorization Act (NDAA) 2008, Section 722 (Reference (g)).

2. **APPLICABILITY.** This Directive applies to Joint Task Force National Capital Region Medical (JTF CapMed) Headquarters (HQ), Walter Reed National Military Medical Center (WRNMMC), Fort Belvoir Community Hospital (FBCH) [hereafter, WRNMMC and FBCH are referred to as Joint Medical Treatment Facilities (MTFs)], and the JPC.

3. **MISSION.** As a subordinate organization within the National Capital Region (NCR), the JPC serves as the pathology reference center for the Federal government. The JPC has four missions as identified in NDAA 2008, Section 722. These include: 1) pathology consultation, 2) education, 3) research, and 4) maintenance and modernization of the tissue repository and utilization of its assets in support of research, education, and consultation. As a part of the development of the tissue repository mission, the JPC contracted with the IOM to provide recommendations regarding the use of the repository in research and education. The IOM findings and recommendations were released on October 11, 2012. Based on these findings, the TRWG will:

a. Review each recommendation provided in the IOM report to determine feasibility of implementation. The TRWG will focus on operational and technical feasibility as well as overall value to the mission when considering each recommendation. The work group will also identify, as appropriate, strengths, weaknesses, opportunities, and threats for each recommendation.

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b. Develop a basic concept of operations for the tissue repository, based on the applicable recommendations of the IOM panel as well as other resources available to the work group, that includes:

- (1) Mission and performance metrics for the completion of the mission.
 - (2) Basic plan for operation of the tissue repository including:
 - (a) Organizational structure and functional operation
 - (b) Quality and production process
 - (c) Scientific review process
 - (d) Administrative process including data and material transfer
 - (3) Recommendations, as appropriate, for information technology support of the tissue repository mission.
- c. Recommend a timeline for establishment and approval of a vision for TRWG objectives.

4. ORGANIZATION AND MANAGEMENT. The TRWG is composed of representatives from the JPC, JTF CapMed HQ, stakeholders, and other subject matter experts. The composition of the group is as follows:

- a. Chairperson. Director, JPC
- b. Co-Chairperson. Chief of Education and Research, JPC
- c. Recorder. As appointed by the Chair.
- c. Voting Members. Voting members will delegate an alternate to represent them in their absence with prior approval by the Chairperson. The alternate may only vote when representing the absent voting member. Voting members of the TRWG will include:
 - (1) Senior Pathologist(s), JPC
 - (2) Senior Clinician/Researcher, Murtha Comprehensive Cancer Center
 - (3) Director (or designee), JTF CapMed Education, Training, and Research Directorate (J-7)
 - (4) Deputy Chief of Research (or designee), Headquarters, Veterans Affairs
 - (5) Senior Pathologist/Researcher, Uniformed Services University of the Health Sciences, Department of Pathology

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d. Non-voting members. The Advisors to the TRWG should include, but are not limited to, representatives from the following organizations:

- (1) Research Program Manager, JPC
- (2) Supervisor, JPC Information Management System
- (3) JPC Tissue Repository Supervisor
- (4) Service Pathology Consultants
- (5) Others as required

e. The work group will establish its own operating procedures, meeting schedule, and interim work products necessary for the completion of its mission. All members are expected to attend meetings established by the chairperson and be prepared for discussions and contribute accordingly. Members are expected to keep their respective component leaders apprised of their progress, workings, and recommendations and will be responsible for any Service-specific issues.

5. RESPONSIBILITIES. See Enclosure 2

6. RELATIONSHIPS. The TRWG shall be accountable to the Commander, JTF CapMed (CJTF) through the Director of the JPC and interface with other stakeholders and JTF CapMed HQ staff as appropriate.

7. AUTHORITIES. The Chair has the following authorities:

a. Tasking

(1) Ensure attendance of members as outlined in section 4 of this Charter. In the event a team member is unable to attend a scheduled meeting, an informed and empowered representative may fulfill the representative's role.

(2) Assign appropriate deliverables to members, ad hoc committees, and JPC staff.

b. Budgeting. None.

8. ADMINISTRATION

a. Meeting Frequency. The TRWG shall meet at least every other week and more often if needed to ensure the success of the mission.

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b. Decision-Making Methodology. The TRWG will come to a consensus on each issue through voting. The final decision brief will include Courses of Actions, as appropriate, arrived at through the Joint Operational Planning Process. CJTF has ultimate responsibility for all decisions regarding the JPC and the tissue repository mission. At the completion of the TRWG's mission, the Director of the JPC (and the Chair of the TRWG) will provide a decision brief to CJTF.

c. Status Reporting. The chairperson will provide CJTF (or designee) monthly status briefs at a regularly scheduled meeting. The chairperson will provide periodic updates to the NCR Medical Clinical Care and Quality Management Board.

d. Problem/Issue Escalation and Resolution Processes. Any significant conflicts between competing priorities that cannot be resolved and adjudicated by the Director of the JPC/ Chairperson of the Work Group will be forwarded to the CJTF (or designee) for final resolution.

e. Closure and Work Group Self-Assessment. Upon completion of its mission, the JPC TRWG will formally disestablish unless otherwise directed by CJTF.


f. Quorum. The TRWG will achieve a quorum when 51% of the voting membership is present. Alternates sent 'on behalf' of voting members will be considered the same as the voting member.

9. RELEASABILITY. UNLIMITED. This Directive is approved for public release and is available on the JTF CapMed Website at: www.capmed.mil.

10. EFFECTIVE DATE. This Directive:

a. Is effective upon publishing to the JTF CapMed Website; and

b. Must be reissued, cancelled, or certified current within 5 years of its publication in accordance with JTF CapMed Instruction 5025.01 (Reference (h)). If not, it will expire effective 10 years from its publication date and be removed from the JTF CapMed Website.


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

Enclosures

1. References

2. Responsibilities

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ENCLOSURE 1

REFERENCES

- (a) Deputy Secretary of Defense Memorandum, "Authorities for Joint Task Force National Capital Region Medical (JTF CapMed)," February 7, 2012
- (b) Deputy Secretary of Defense Action Memorandum, "Civilian and Military Personnel Management Structures for the Joint Task Force NCR Medical," January 15, 2009
- (c) Comprehensive Master Plan for the NCR Medical, April 23, 2010
- (d) Supplement to the Comprehensive Master Plan for the NCR Medical, August 31, 2010
- (e) Institute of Medicine Publication, "Future Uses of the Department of Defense Joint Pathology Center Biorepository," October 11, 2012
- (f) JTF CapMed Directive 5100.01, "The Joint Pathology Center Charter," November 22, 2011
- (g) National Defense Authorization Act of 2008 Section 722 "Establishment of a Joint Pathology Center," January 28, 2008
- (h) JTF CapMed Instruction 5025.01, "Formats and Procedures for the Development and Publication of Issuances," March 5, 2012

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ENCLOSURE 2

RESPONSIBILITIES

1. CHAIRPERSON. The Chairperson shall:

- a. Forward an agenda to each voting member no later than 3 working days prior to each scheduled meeting. The agenda may be incorporated into the meeting minute's format.
- b. Forward a clearly written summary of the proceedings of the previous meeting to each voting member no later than 3 days prior to each scheduled meeting.
- c. Facilitate the accomplishment of tasks consistent with the work group's mission.
- d. Provide updates to the CJTF at a scheduled monthly meeting.
- e. Brief final deliverable to CJTF and CCQMB.

2. RECORDER. The Recorder shall:

- a. Prepare the agenda at the chairperson's direction in time for the chairperson to meet the deadline of above paragraph.
- b. Prepare a clearly written summary of the proceedings of the previous meeting at the chairperson's direction in time for the chairperson to meet the above deadline.

3. ALL MEMBERS. All members shall:

- a. Keep their respective Service or MTF leadership engaged and aware of the decision-making mechanisms in place and the issues being addressed. Apprise their respective leadership of the work group's progress, workings, and recommendations.
- b. Attend meetings established by the chairperson, be prepared for discussions that ensue, and contribute accordingly.
- c. Act as subject matter experts and liaison officers to their department or Joint MTF without any bias to organizational or Service loyalty, but based on technical capabilities.
- d. Speak with the authority of their organizational responsible head.
- e. Keep their constituencies engaged and properly aware of issues being addressed.

GLOSSARYABBREVIATIONS AND ACRONYMS

CJTF	Comander, Joint Task Force National Capital Region Medical
FBCH	Fort Belvoir Community Hospital
HQ	headquarters
IOM	Institute of Medicine
JPC	Joint Pathology Center
JTF CapMed	Joint Task Force National Capital Region Medical
NCR	National Capital Region
NDAA	National Defense Authorization Act
TRWG	Tissue Repository Work Group
WRNMMC	Walter Reed National Military Medical Center