

BASE VISIT REPORT**NS Great Lakes****2 June 2005****LEAD COMMISSIONER:** The Honorable Samuel K. Skinner**COMMISSION STAFF:** Brian McDaniel, Senior Navy/Marine Corps Analyst**LIST OF ATTENDEES:**

CAPT Kathryn M. Hobbs - Commanding Officer, NS Great Lakes and Chief of Staff, Navy Region Midwest

CAPT H. Rame Hemstreet – Commanding Officer, NAVFAC Midwest and Regional Engineer

CAPT Michael H. Anderson – Commanding Officer, Great Lakes Naval Hospital

CAPT Marcia H. Lemon – Commanding Officer, Naval Hospital Corps School

CAPT Jim Monahan – Commanding Officer, Navy Reserve Readiness Command Midwest

CDR Stanton E. Cope – Commanding Officer, Naval Institute for Dental and Biomedical Research

CDR Ann Burkhardt, Executive Officer, Training Support Center

CDR Janet E. Merriman, BRAC Coordinator, Navy Region Midwest

COL Dennis A Runyan – Commander, USA Dental Research and Trauma Detachment

COL Nicholas J. Miniotis -- USAF Dental Investigation Service

Mr. Ron Fry, Business Manager, Navy Region Midwest

Mr. William B. Dermondy – PAO, Navy Region Midwest

Ms. Jeanette Stankus, Protocol Officer, Navy Region Midwest

BASE'S PRESENT MISSION:

- The mission of Naval Station Great Lakes is to provide highly skilled, technically proficient, disciplined and motivated sailors to the Fleet, and is home to Navy's only recruit training facility and one third of all Navy Technical training. The Naval Station was established in 2003 as an independent activity to manage and perform Base Operation Support (BOS) functions supporting tenant organizations at Great Lakes.
- Major Tenant Commands include:

Naval Service Training Command

Recruit Training Command

Training Support Center

Naval Hospital Corps "A" School

Naval Facilities Engineering Command Midwest

Naval Hospital Great Lakes

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Navy Reserve Readiness Command, Midwest

SECRETARY OF DEFENSE RECOMMENDATION:

- Realign NS Great Lakes by relocating basic and specialty enlisted medical training (Naval Hospital Corps "A" School) to Ft. Sam Houston, San Antonio, TX. (Med-10)
- Realign NS Great Lakes by disestablishing the inpatient mission at Naval Hospital Great Lakes and subsequently converting the hospital to a clinic and ambulatory surgery center. (Med-12)
- Realign NS Great Lakes by relocating the Naval Institute for Dental and Biomedical Research, the Army Dental Research Detachment, and the Air Force Dental Investigative Service to the Army Institute of Surgical Research, Ft. Sam Houston, San Antonio, TX to create a Joint Center of Excellence for Medical RD&A. (Med-15)
- Close Naval Facilities Engineering Command's Southern Division located in Charleston, SC, and relocate a portion of these support resources to the Naval Facilities Midwest located at NS Great Lakes. (DoN-28)
- Realign NAS Corpus Christi, TX, by consolidating Navy Region South with Navy Region Midwest at NS Great Lakes (DoN-35)
- Realign NAS Joint Reserve Base Ft. Worth, TX by consolidating the Navy Reserve Readiness Command South with the Naval Reserve Readiness Command Midwest at NS Great Lakes. (DoN-44)
- Close Naval Support Activity New Orleans, LA, and relocate its installation management function and consolidate this function with Navy Region Midwest at NS Great Lakes. (DoN-15)

SECRETARY OF DEFENSE JUSTIFICATION:

- Recommendation co-locates all (except Aerospace Medicine) medical basic and specialty enlisted training at Fort Sam Houston, TX, with the potential of transitioning to a joint training effort. This will result in reduced infrastructure and excess system capacity, while capitalizing on the synergy of the co-location similar training conducted by each of the three Services. In addition, the development of a joint training center will result in standardized training for medical enlisted specialties enhancing interoperability and joint deployability.
- The Department will rely on the civilian medical network for inpatient services at these installations. This recommendation supports strategies of reducing excess capacity and locating military personnel in activities with higher military value with a more diverse workload, providing them with enhanced opportunities to maintain their medical currency to meet COCOM requirements. Additionally, a robust network with available inpatient capacity

of Joint Accreditation of Hospital Organizations (JCAHO) and/or Medicare accredited civilian/Veterans Affairs hospitals is located within 40 miles of the referenced facilities.

- Recommendation creates Joint Centers of Excellence for Battlefield Health and Trauma research at Fort Sam Houston.
- Consolidation of the Navy Reserve Command installation management functions with other Navy Regional organizations is part of the Department of the Navy efforts to streamline regional management structure and to institute consistent business practices.
- Recommendation to realign Naval Facilities Engineering Commands Field Activities enhances the Navy's long-standing initiative to accomplish common management and support on a regionalized basis by consolidating and collocating Naval Facilities commands with the installation management Regions in Jacksonville, FL, Great Lakes, IL and Norfolk, VA. This collocation aligns management concepts and efficiencies and may allow for further consolidation in the future. Naval Facilities Engineering Field Division South is located in leased space, and this recommendation will achieve savings by moving from leased space to government-owned space.
- In conjunction with other recommendations that consolidate Navy Region Commands, this recommendation will reduce the number of Installation Management regions from twelve to eight, streamlining the regional management structure and allowing for opportunities to collocate other regional entities to further align management concepts and efficiencies. As part of the closures of Naval Support Activity New Orleans, LA, and Submarine Base New London, CT, the Navy Reserve Forces Command installation management function and Navy Region Northeast are also consolidated into the remaining regions, significantly increasing operational efficiency.
- Recommendation enhances the Navy's long-standing initiative to accomplish common management and support on a regionalized basis, by consolidating and collocating reserve readiness commands with the installation management Regions. This collocation aligns management concepts and efficiencies and ensures a reserve voice at each region as well as enabling future savings through consolidation of like functions.

MAIN FACILITIES REVIEWED:

- NS Great Lakes, Great Lakes Naval Hospital, Naval Hospital Corps "A" School, and Military Dental Research Center

KEY ISSUES IDENTIFIED

- Continued misalignment (i.e., gaps) of geographic areas of responsibilities (AORs) between Navy Region Midwest, Naval Facilities Command Midwest, and Navy Readiness Command Midwest.

- Conversion to outpatient versus inpatient services at the Great Lakes Hospital is well underway due to a DoD-VA Joint Sharing initiative designed to create a joint federal healthcare facility.

INSTALLATION CONCERNS RAISED

- BRAC recommendations do not correct organic misalignment of “areas of responsibility” after BRAC-induced management and geographic realignment of Navy Regions, Naval Facilities Engineering Command, and Navy Readiness Command in the Midwest.
- Does functional realignment of Navy Region South and Readiness Command South into Navy Region Midwest and Readiness Command Midwest result in proportional expansion of territory or geographic area of responsibility?
- Moving Military Dental Research Center would result in loss of critical scientific/principal investor staff, substantially delay on-going research programs, and disrupt existing public, private, and university dependent collaborative research.
- Proximity to navy recruit trainees may lessen research opportunities as well as concern about whether or not Army’s Institute of Surgical Research (at Ft. Sam Houston) current infrastructure has space needed for research/laboratory requirements or whether state-of-the-art laboratories and scientific equipment at Great Lakes will be replicated.
- Co-location of Naval Hospital Corps “A” School with all (except Aerospace Medicine) medical basic and specialty enlisted training at Fort Sam Houston, TX, in San Antonio (with the potential of transitioning to a joint training environment) may result in curriculum gaps due to different functional/mission needs between services, and will add to Navy PCS costs due to additional moves from Texas to follow-on Navy training (e.g., Field Medic School) or operational assignments. Co-location may result in diminished clinical training opportunities compared to Great Lakes and neighboring Veterans Affairs Medical Center.
- Loss of 1/3 of student population will likely reduce MWR revenues and contributions to corporate Non-appropriated Fund.

COMMUNITY CONCERNS RAISED:

- None.

REQUESTS FOR STAFF AS A RESULT OF VISIT:

- A staff visit was conducted by Brian McDaniel prior to Commissioner’s visit with appropriate contact information exchanged. The Commanding Officer made no requests for additional visits after Commissioner Skinner’s base visit.