BASE VISIT REPORT

Naval School of Health Sciences, San Diego, CA
(Med – 10)

June 8, 2005

LEAD COMMISSIONER: Anthony Principi, Chairman

ACCOMPANYING COMMISSIONER: not applicable

COMMISSION STAFF: Dave Van Saun, Director
Tom Pantelides, Senior Analyst
Lesia Mandzia, Senior Analyst

LIST OF ATTENDEES:

Navy Region Southwest: RADM Jose L. Betancourt, Commander
Rene Trevino, Executive Director
LCDR Tasker

Naval Medical Center San Diego: RADM John Mateczun, Commander
Capt. Charles Davis, Deputy Commander
Capt. Tam

Naval School of Health Sciences, San Diego: Capt. William Nunns, Commander
Capt. Robin McKenzie, Executive Officer
Karen Natkin, Ph,D., Associate Dean

Congressman Duncan Hunter (52nd District, CA): V. Bill Cooper, Special Projects Assistant

BASE'S PRESENT MISSION:

Mission of the Naval School of Health Sciences, San Diego

Note: the school is responsible for the basic and enlisted medical training being relocated to Fort Sam Houston, TX.

The Naval School of Health Sciences, San Diego is located on the campus of Naval Medical Center, San Diego whose mission is:

- To Deliver education and training in support of Force Health Protection

- To deliver quality health services in support of the Armed Forces.
- Maintain medical readiness.
- Advance medicine through education, training and research.

SECRETARY OF DEFENSE RECOMMENDATION:

- **Realign** Naval Air Station Great Lakes, IL, Sheppard Air Force Base, TX, Naval Medical Center Portsmouth, VA, **Naval Medical Center San Diego, CA by relocating basic and specialty enlisted medical training to Fort Sam Houston, TX.**

SECRETARY OF DEFENSE JUSTIFICATION:

- To transform legacy medical infrastructure into a modernized joint operational medicine platform. This recommendation reduces excess capacity within the San Antonio Multi-Service Market (MSM: two or more facilities co-located geographically with "shared" beneficiary population) while maintaining the level of care for the beneficiaries, enhancing opportunities for provider currency, and maintaining surge capacity.
- Co-locating 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, will result in reduced infrastructure and excess system capacity, while capitalizing on the synergy of the co-location of similar training conducted by each of the three Services.
- The development of a joint training center will result in standardized training for medical enlisted specialties enhancing interoperability and joint deployability.
- Co-location of medical enlisted training with related military clinical activities of the San Antonio Regional Medical Center at Brooke Army Medical Center, Fort Sam Houston, TX, provides synergistic opportunities to bring clinical insight into the training environment, real-time. As a result, both the healthcare delivery and training experiences are exponentially enhanced.

MAIN FACILITIES REVIEWED: Naval School of Health Sciences
34101 Farenholt Ave., Building 14
San Diego, CA 92134

KEY ISSUES IDENTIFIED:

- It is unclear whether this realignment is relocation or a consolidation.
- It is unclear whether Fort Sam Houston will be able to provide all the clinical training.
- Staff at NSHS San Diego are not sure what will happen to the: Drug and Alcohol Counselor training program, the Navy Trauma Center training provided in conjunction with USC and LA County Hospital, the Expanded Dental Functions program, and the Physician Assistant program.
- NSHS San Diego provides training in a simulation lab that the Naval Medical Center San Diego also uses for training purposes. Staff does not know if the simulation lab will also

move to Fort Sam Houston. If it does move, this could have an impact on the Medical Center's training.

- Navy corpsman scope of practice is broader than that of an Army medic. If the military is moving toward jointness, which of those training programs would be the more appropriate? The reason corpsman have a broader scope of practice is that they are trained to do many more things because they usually are, for example, the only medical provider on a ship. Whereas, a medic usually works with supervision.

INSTALLATION CONCERNS RAISED:

- Will this be a realignment, relocation or a consolidation?
- How will differences in programs' curriculum be handled? For example, Navy Corpsman have a broader scope of practice than do Army medics.
- Will there be adequate locations for completion of clinical training at Fort Sam Houston?
- What will happen to the NSHS San Diego's: simulation lab, Drug & Alcohol Treatment program, Navy Trauma Training Center, Independent Duty Corpsman, Physician Assistant program, Navy Nurse Corps Anesthesia program and Expanded Dental Functions program?
- How will a full student load be maintained as students transition to Fort San Houston?

COMMUNITY CONCERNS RAISED:

- Newspaper articles have noted that the Naval School of Health Sciences (NSHS) San Diego faces the deepest cuts of any installation in California with a projected loss of 1,630 people, most are the enlisted sailors enrolled in medical training courses. According to the San Diego Regional Economic Development Corp., 100 to 150 positions at NSHS involve full-time permanent staff.

REQUESTS FOR STAFF AS A RESULT OF VISIT:

Visit Fort Sam Houston to determine whether there will be sufficient capability at Brook Army Medical Center and other locations in the area to provide the clinical training that will be needed for all the enlisted medical training that is being moved to Fort Sam Houston.