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Surgeon General's Vision and "Top Five" for 2005

VADM Don Arthur succeeded VADM Michael Cowan and became the Navy's 35th Surgeon General last fall. Since that time, he has articulated his vision for Navy Medicine and his top five priorities to Navy Medicine's flag and senior leader communities as well as disseminating them to the field. It is pertinent for those of us who are the providers of care as well as the recipients of that care to know and understand his thinking as he directs the Navy's health enterprise.

The SG's **Vision** is that "Navy Medicine will: Keep Sailors and Marines fit to fight; serve as a defensive weapon system protecting the warfighter and deterring threats; provide flexible medical support in combat overseas and emergency response at home; and, provide incomparable health services economically to all whom we are honored to serve."

As such, Navy Medicine is a vital part of the Navy-Marine Corps Team with the dual missions of supporting our operational forces as well as providing health care to their families and our retirees. These dual missions are met through the efforts of the 60,000 military (active and reserve) and civilian health workers of Navy Medicine.

The first of the SG's Top Five is "**Readiness – Aligned and Agile.**" Recent operations have emphasized the importance of improvements, such as the Forward Resuscitative Surgery System, and innovations in preventive medicine and mental health to support our warfighters. Navy Medicine is well aligned with CNO's Sea Power 21 to become a smaller, more agile, and technologically advanced defensive weapon system. Integral to this is the need to measure accurately the "cost of readiness" as a distinct component of the overall cost of the military health system. Relevant efforts in medical research and development, as well as medical intelligence, are also key components. Current operational commitments

also demonstrate the necessity for sustainment: Navy Medicine will require "bench strength" going forward in the Global War on Terrorism, with equitable load sharing of operational assignments across the broad base of both active and reserve personnel. In addition, we must focus on multiple areas of operational activity including homeland security/defense, GWOT, humanitarian assistance, and stabilization operations.

Second of the Top Five is "**Quality, Economical Health Services.**" Navy Medicine's focus is on the preservation of health and the prevention of disease and injury, not merely on episodic, symptomatic disease-oriented care. To those ends, the emphasis is on clinical productivity, evidence-based medicine, pharmacy management, and easy access and referrals in order to maximize the benefit to be gained from the considerable, but limited, financial resources that are available to provide care to our eligible active duty personnel, their dependents, and our retirees. Noteworthy initiatives in population health, including a Population Health Navigator to monitor system performance are advancing. While at the same time, Navy Medicine has been confronted with the challenge of providing care to returning casualties from OEF and OIF in numbers and complexity that are the greatest our system has addressed for the past 30 years.

This leads us to the third major bullet in the Top Five: "**Shaping Tomorrow's Force.**" In concert with CNO's human capital strategy for the entire Navy, Navy Medicine's efforts in the arena are directed toward assuring that we shape the medical force of tomorrow by recruiting, training, and retaining the best Sailors for the health enterprise. The challenges of supporting the wide variety of current operational missions as well as preparing for emerging missions such as homeland defense, humanitarian operations, and detainee care require a fresh approach to manning the Navy Medical department. Our personnel must be proficient and productive as we as agile in moving from fixed facilities to afloat and ashore operational settings and increasingly capable in functioning in joint, combined, and inter-agency settings.

Fourth, the SG emphasizes "**One Navy Medicine-Active, Reserve, and Civilian.**" While lip service has been given in the past to the slogan "One Navy," an expanded and realized understanding of this must exist in the future for Navy Medicine to accomplish successfully its various missions. Agility in using the reserve force, such as was accomplished when reserve personnel quickly and seamlessly backed up the active component personnel who deployed to *USNS COMFORT* after 9/11, and the integration of active and reserve personnel in the fleet hospital system, will be essential. Reserve personnel are 20 percent of Navy Medicine's manpower resources. While there have been over 2400 Reservists mobilized in support of Navy Medicine in recent years, the process is not always smooth and seamless. We cannot afford stumbling blocks and inefficiencies in this regard. In addition, as force shaping occurs, more effective partnering of military personnel with civilian GS employees and contractors will be necessary to achieve the potential of Navy Medicine in providing robust benefits to our patient beneficiaries.

Finally, "**Joint Medical Capabilities**" round out the SG's Top Five priorities. Increasingly, the ability to work side by side with Army and Air Force colleagues in an interoperable environment with common gear, medical equipment and supplies, and communications systems is essential. Our patients all deserve the same excellent level of care, regardless of service affiliation. A critical challenge is to provide timely and superior care from initial resuscitative efforts through en route care and at each stage of subsequent evacuation to definitive care stateside. This will demand refinement of training processes and standardization of joint operating procedures and doctrine. Furthermore, we must forge effective working links with civilian governmental and private counterparts as well as coalition military partners in support of this goal.

In closing, it is clear that the Surgeon General has defined a challenging and broad-reaching agenda for Navy Medicine. Achieving it will demand the very best efforts of all of Navy Medicine's personnel. Achieve it we must—our patients deserve no less! ♪