Army Public Health: A One Health Model
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Objectives:
1. Provide a brief overview of definitions and principles of Public Health
2. Inform the listener of the evolution of the Army’s new Public Health Command
3. To provide the listener with a military perspective in delivering Public Health
4. Relate military public health to the “One Health” approach
5. Stimulate strategic thought toward effective delivery of public health

Public Health Defined: The approach to medicine that is concerned with the health of the community as a whole. Public health is community health. It has been said that "Health care is vital to all of us some of the time, but public health is vital to all of us all of the time" (MedTerms Medical Dictionary).

Veterinary Public Health Defined: The sum of all contributions to the physical, mental and social well-being of humans through an understanding and application of veterinary science" (WHO consultation on "future trends in veterinary public health" held in Teramo, Italy in 1999).

One Health Defined: One Health is the collaborative effort of multiple health science professions, together with their related disciplines and institutions – working locally, nationally, and globally – to attain optimal health for people, domestic animals, wildlife, plants, and our environment (2012 One Health Commission).

Public Health Mission: Fulfilling society’s interest in assuring conditions in which people can be healthy (Institute of Medicine Report, 1988).

Core Public Health Functions:
- Assessment
- Policy Development
- Assurance
(Institute of Medicine Report, 1988)
The Ten Essential Public Health Services:

1. Monitor health status to identify community health problems.
2. Diagnose and investigate health problems and health hazards in the community.
3. Inform, educate, and empower people about health issues.
4. Mobilize community partnerships to identify and solve health problems.
5. Develop policies and plans that support individual and community health efforts.
6. Enforce laws and regulations that protect health and ensure safety.
7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.
8. Assure a competent public health and personal health care workforce.
9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services.
10. Research for new insights and innovative solutions to health problems.


Why?

1. Prevents epidemics and the spread of disease
2. Protects against environmental hazards
3. Prevents injuries
4. Promotes and encourages healthy behaviors
5. Responds to disasters and assists communities in recovery
6. Assures the quality and accessibility of health services

Examples of Policy and Practice:

- Vaccination programs
- Safety standards and practices to protect worker health and safety
- Ensuring access to clean water and air
- Educational campaigns to promote healthy behaviors
- Measuring the effects of air, soil, and water quality on deployed Soldiers
- Nutrition programs
- Ensuring the quality and safety of food sources and food preparation
- Noise control
- Solid and hazardous waste management
- Radiation protection
- Disease and injury surveillance
- Response to outbreaks of disease
- Evaluation of effectiveness of public health interventions
- Development of evidence-based programs to reduce injuries
• Identification of risk factors for suicide and other behavioral health outcomes


**Bottom Line:** Healthy People in Healthy Communities by promoting physical and mental health and preventing disease, injury and disability (NPHPSP 1994).

**Evolution of the new United States Army Public Health Command**

The United States Army Medical Command (USAMEDCOM) undertakes (October 2009) realignment effort and provisionally reorganizes stateside Regional Medical Commands to improve span of control, while enhancing support to Soldiers, beneficiaries, Army readiness and transformation with a target date of 1 October 2010. As part of this five-pronged effort was a look at creating a consolidated Army Public Health Command (PHC).

**A Brief History of the Public Health Command:**

1942: Army Industrial Hygiene Laboratory, Johns Hopkins University
1945: Moved to Chemical Warfare Center, Edgewood, MD
1960: Became U.S. Army Environmental Hygiene Agency (USAEHA)
1973: USAEHA became subordinate command of the U.S. Health Services Command
1995: USAEHA the basis for the U.S. Army Center for Health Promotion and Preventive Medicine.
2009: USACHPPM becomes USAPHC (Provisional)
2011: USACHPPM becomes USAPHC becomes fully operational

**The Beginning**

As part of the larger USAMEDCOM transformation the Army Surgeon General (TSG) had an idea to merge the Army Veterinary Command (VETCOM) and the Center for Health Promotion and Preventive Medicine (CHPPM) capabilities and to optimize public health support to the Army. They all had similar, overlapping missions of mutual interest, but there was inconsistent public health service delivery across the force.

The Army Surgeon General therefore ordered a feasibility study be conducted by a Public Health Command working group in September of 2008.
Course of Action chosen by TSG, effective 17 July 2009

- Integrate select missions of CHPPM and VETCOM
- Installation level veterinary services (from VETCOM) and preventive medicine missions re-aligned to the Medical Treatment Facilities
- Initial Operating Capability – 1 October 2010
- Full Operating Capability – 1 October 2011

Commander’s Intent:

MEDCOM will reorganize its public health capabilities to:

- Enhance the health and wellness of Soldiers and military retirees, their Families, and DA Civilian employees
- Create a single point of accountability and responsibility for public health within the MEDCOM
- Optimize public health support to the Army
- Improve the planning and use of Army public health assets across the full spectrum of installations and activities
- Execute effective Veterinary Service programs across the DoD

The End State

A unified Army public health team that enhances and protects the health, fitness, and well-being of Soldiers, their Families, DA Civilian employees, and military retirees and executes effective veterinary service programs across the DOD.

Veterinary Command Mission

- Ensure safe, wholesome, high quality food and water
- Safeguard military communities from zoonotic public health threats
- Deliver high quality veterinary medical services

Veterinary Command Vision

Provide leading edge food safety and defense, public health, and veterinary medical care, anytime, anywhere: professionals serving heroes everyday
The Veterinary Command is an organization made up of approximately 1,967 personnel: 744 civilians and 1,223 military. They provide support to 494 installations, with personnel at over 395 duty sites and 133 attending sites, and provide support for taskers and deployments throughout the world.

**Center for Health Promotion and Preventive Medicine Mission**

Provide health promotion and preventive medicine leadership and services to identify, assess, and counter environmental, occupational, disease, and injury threats to health, fitness, and readiness in support of the Army mission and the National Military Strategy.

**Center for Health Promotion and Preventive Medicine (CHPPM) Vision**

To be the world-class center of excellence for the systematic prevention of disease and injuries, and to protect and enhance the health and performance of individuals and populations.
The Center for Health Promotion and Preventive Medicine

The Center for Health Promotion and Preventive Medicine is made up of approximately 1,181 personnel; 900 civilians and 281 military. Since 2001 they have provided mission coverage in 85 countries have deployed over 2600 personnel.

The Center for Health Promotion and Preventive Medicine Mission Areas

- Soldier Support
- Deployment Support
- Installation Support (hazardous waste management, wildlife toxicity assessments, entomological vectors, potential groundwater contamination)
- Laboratory Support (environmental/toxicological analyses, vectors and vector-borne diseases, metal fragments bioassays i.e. depleted uranium)
- Emerging Issues
- Health Information Operations

The Public Health Command Mission

Promote health and prevent disease, injury, and disability of Soldiers and military retirees, their Families, and DA Civilian employees; assure effective execution of full spectrum veterinary service for Army and DOD Veterinary missions

The Public Health Command Vision

World-Class Provider of Public Health Services across DA and DOD
The New United States Army Public Health Command

The new command results in an organization of approximately 3,051 personnel (1,603 civilian and 1,448 military) with skills and expertise in over 50 subject matter areas; expertise in fields of preventive medicine, environmental and occupational health, health promotion, epidemiology and disease surveillance, toxicology and related laboratory sciences, hazardous and medical waste, drinking water, entomological vectors, radiation sources, health risk communication and many more: One Team One Health.

The Public Health Command Transition

Upon approval to move forward with the transition to form a new Public Health Command the Surgeon General also ordered the formation of a “Transition Team” lead by the commander of the Center of Health Promotion and Preventive Medicine. The Transition Team was in charge of the complete project analysis as well as managing all the tasks associated with the formation of the new command, to include policy development, establishing practices and procedures, organizational design and more. The Team adopted the A-3 model as their business tool. The A-3 model is a business tool developed by Toyota for purposes of strategic planning and problem solving.

The Transition Team, in an effort to thoroughly and comprehensively address all areas of concern, assembled a steering committee, and ten working groups with several sub-groups. The working groups included the following project areas: Project Governance, Policy and Doctrine, Strategic Communications, Concept Plan Development, Installation Veterinary Services, Enterprise Oversight, Support Services, Lab Integration, Health Promotion and Wellness and Clinical Preventive Medicine.
Listed above are the respective missions and services of the two legacy organizations as well as the integration opportunities and emerging missions of the new command; the ingredients of a true One Health Model.

Strategic View of Public Health

As depicted above, the ultimate goal is a balanced and integrated approach to Public Health. The delivery of public health services is overseen by the Director of Health Services at the installation level with the Public Health Command as the accountable organization for effective program development, standardization of best practices, and implementation of service delivery.
The Balanced Scorecard (BSC): Army Public Health Command Strategy Map Alignment to Army Medical Department BSC.

The Public Health Command uses the balanced scorecard as the strategic framework with its accompanying plan of strategic objectives, initiatives, metrics and targets to implement and monitor the mission of the new organization. The balanced scorecard is a strategic management system used to align mission priorities with the organization’s vision. It is an ends, ways and means process used to effectively marshal resources (means) into processes (ways) that facilitate accomplishment of organizational goals and objectives (ends).

Leadership Oversight

Enterprise Governance: The oversight, collaboration and coordination of missions of mutual interest across disparate lines of authority

Under the new organization, the Public Health Command has been designated the accountable agent for all Army public health services. The command is charged with the synchronization, standardization and integration of all public health throughout the U.S. Army Medical Command. However, in the past, public health assets were distributed and controlled by multiple organizations through separate lines of authority. The challenge was to develop a governance system to effectively collaborate, coordinate, and oversee effective execution of all public health services across all organizations. The approach adopted by the Public Health Command was an “Enterprise Governance” system developed by the Army Business Transformation Office. They have identified five key relationships to facilitate the program development, implementation, and oversight of missions of mutual interest. They include:

1. Oversight, where the overseeing agency has the authority to “stop work” within an overseen agency to ensure that program or function process execution, outputs, and outcomes are within policies and standards.
2. Monitoring, where the monitoring agency has the authority to “delay work” within a monitored agency to track program or function process execution, outputs, and outcomes.

3. Advise, where the advising agency has the authority to “persuade” the advised agency by providing expert advice on processes, programs, outputs, or outcomes.

4. Coordinate, where the coordinating agency has the authority to “persuade” by leading the assembled team.

5. Collaborate, where the collaborating agency has the authority to “persuade” by discussing and attempting to resolve issues.

Depicted above is the new Public Health Command’s “Concept of Operation” using “Enterprise Governance” relationships.

- CHPPM and VETCOM integrate into the PHC
- Regional Veterinary Commands (RVCs) and CHPPM Subordinate Commands integrate into PHC Regions under the Command and Control (C2) of the PHC
- Regional Medical Commands (RMCs) have C2 of installation Preventive Medicine (PVNTMED) missions
- PHC has oversight of installation PVNTMED missions through RMCs
- RMCs have oversight of installation VETSVCs missions through the PHC Regions
- Oversight authority infers a level of monitoring, advising, coordination and collaboration needed to execute oversight
Depicted above are the new command’s roles and responsibilities. The regions command and control subordinate districts, assuring effective core public health mission execution, which occurs through the districts to the installation level.

The Business Process

Portfolio Management: The key goal of portfolio management is making sure the organization is “doing the right work” and not just “doing work right.”

- A portfolio is a collection of projects or programs and other work that are grouped together to facilitate effective management and meet strategic business objectives.
- All components exhibit certain common features:
- Represent investments made or planned by the organization.
- Align with the organization’s strategic goals and objectives.
- Quantifiable and can be measured, ranked and prioritized.

PHC Internal Organization

- Portfolios align by technical function
- Implement standard organizational structure throughout PHC
- Institute senior managers serve as Portfolio Directors overseeing portfolios for the entire command
  - Develop and analyze PH programs and policy
  - Execute unique low-density PH services
- Regional and District personnel execute operational missions along the functional portfolios

Initial Operational Capability Organizational Structure

At initial operational capability, the new command has over 30 programs functionally aligned into eight portfolios. Note the veterinary command is still functional here with collateral reporting.

Full Operational Capability Organizational Structure
At Full Operational Capability, the Center for Health Promotion and Preventive Medicine is completely integrated with the Veterinary Command. Full integration of all programs and implementation of portfolio management occurs from the institute through regions and districts to the installation level. Note the districts have been augmented at this point with Health Promotion, Environmental Health Engineering, Occupational Health, and Epidemiological and Disease Surveillance capabilities.

The final state has two major Medical Command organizations consolidated and operationally integrated into a Headquarters element, Institute of Public Health, a unique and distinct Department of Defense Working Dog Center, five Public Health Regions and 16 Public Health Districts delivering optimized public health services with a global reach and a One Health mission.
# List of Acronyms

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>AAA</td>
<td>Animal Assisted Therapy</td>
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<tr>
<td>AAFES</td>
<td>Army Air Force Exchange System</td>
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<tr>
<td>AAT</td>
<td>Animal Assisted Therapy</td>
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<tr>
<td>AOC</td>
<td>Area of Concentration</td>
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<td>C2</td>
<td>Command and Control</td>
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<td>CHPPM</td>
<td>Center for Health Promotion and Preventive Medicine</td>
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<tr>
<td>COCOM</td>
<td>Combatant Command</td>
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<tr>
<td>C-PTSD</td>
<td>Canine Post Traumatic Stress Syndrome</td>
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<td>DA</td>
<td>Department of the Army</td>
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<tr>
<td>DeCA</td>
<td>Defense Commissary Agency</td>
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<tr>
<td>DFACS</td>
<td>Defense Commissary Agency</td>
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<tr>
<td>DOD</td>
<td>Department of Defense</td>
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<tr>
<td>DODVSA</td>
<td>Department of Defense Veterinary Service Activity</td>
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<tr>
<td>FOC</td>
<td>Full Operational Capability</td>
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<tr>
<td>FYGVE</td>
<td>First Year Graduate Veterinary Education</td>
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<td>GOA</td>
<td>Government Owned Animal</td>
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<td>GWOT</td>
<td>Global War on Terror</td>
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<td>IOC</td>
<td>Initial Operational Capability</td>
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<tr>
<td>MWD</td>
<td>Military Working Dog</td>
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<td>OEF</td>
<td>Operation Enduring Freedom</td>
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<td>OIF</td>
<td>Operation Iraqi Freedom</td>
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<tr>
<td>POA</td>
<td>Privately Owned Animal</td>
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<td>PH</td>
<td>Public Health</td>
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<td>PHC</td>
<td>Public Health Command</td>
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<td>Abbreviation</td>
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<td>PVNTMED</td>
<td>Preventive Medicine</td>
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<td>RMC</td>
<td>Regional Medical Command</td>
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<td>RVC</td>
<td>Regional Veterinary Command</td>
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<td>STRATCOM</td>
<td>Strategic Communication</td>
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<td>TSG</td>
<td>The Surgeon General</td>
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<td>USACHPPM</td>
<td>United States Army Center for Health Promotion and Preventive Medicine</td>
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<td>USAEHA</td>
<td>United States Army Environmental Hygiene Agency</td>
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<td>USAMEDCOM</td>
<td>United States Army Medical Command</td>
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<td>USAPHC</td>
<td>United States Army Public Health Command</td>
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<td>VCO</td>
<td>Veterinary Corps Officer</td>
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