

RECORD VERSION

STATEMENT BY

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HOUSE ARMED SERVICES COMMITTEE**

Chairman Heck, Ranking Member Davis, and distinguished members of the subcommittee, thank you for the opportunity to represent Madigan Army Medical Center and Army Medicine today. As a large medical center located on Joint Base Lewis-McChord, Madigan is a network of Army health readiness platforms located in Washington and California. Much like civilian academic medical centers, Madigan provides a wide array of medical services, such as patient-centered adult and pediatric primary care, general medical and surgical care, a 24-hour emergency room, specialty and sub-specialty care, behavioral health and wellness services. Additionally, we perform the services typically associated with the local department of health and a variety of preventive medicine and occupational health services to several small installations in the region. Madigan is a regional referral center for specialty care in our enhanced multi-service market, the Puget Sound Military Health System (PSMHS), providing patient centered care to ensure medically ready forces and ready medical forces for a premiere power projection platform in support of I Corps.

Since 1944, Madigan has been a provider of world-class patient care, an unparalleled education facility and state-of-the-art research platform, practicing readiness and deployment medicine while engaging as a committed community partner. Team Madigan's mission "proudly promotes the health and wellness of America's Military Family" with our vision of "being patient-centered in all we do." Madigan cares for over 100,000 beneficiaries with around 5,000 staff members and supports over 250,000 eligible beneficiaries as the tertiary referral facility for the PSMHS. Madigan also boasts a robust internal American Red Cross program with approximately 200 volunteers who donate thousands of hours of service monthly.

As Army Medicine's second largest military treatment facility and one of the most state-of-the-art and technically advanced medical centers, Madigan is one of only two designated Level 2 trauma centers throughout the U.S. Army Medical Command (MEDCOM). Madigan trained 319 individuals in Graduate Medical Education in 33 distinct training programs in 2015. An affiliated institution with both the Uniformed Services University of the Health Sciences and the University of Washington, Madigan provided clinical rotations for 617 medical students and volunteers in 2014.

Madigan's Andersen Simulation Center (ASC) staff provided state of the art simulation training to 7,495 doctors, nurses and medics during academic year 2015. The ASC is one of only 7 simulation centers in the U.S. to achieve Level 1 Accreditation by the Society for Simulation in Healthcare, and one of 82 surgical simulation centers in the U.S. to achieve a Level 1 Accreditation from the American College of Surgeons. Level 1 dual accreditation is held at only a handful of centers in the U.S. Additionally, the ASC is a Defense Health Agency TeamSTEPPs Center of Excellence.

For eight of the last nine years, Madigan was named among the "100 Most-Wired Hospitals and Health Systems" by The Most Wired Survey and Benchmarking Study, conducted annually by Hospitals and Health Networks. Madigan has a data sharing agreement in place with the VA's VISN 20 allowing clinical staff for both facilities to log onto the other's clinical information systems. We also serve as the primary test site for all DoD/VA data sharing. Madigan uses the Virtual Lifetime Electronic Record (VLER), which permits our network partner, MultiCare Healthcare System to view data directly. Madigan is the only MTF in DoD with a fully functioning electronic Personal Health Record (PHR) for its beneficiaries. We are also the only DoD Health Readiness

Platform awarded the Top 25 Environmental Excellence Award in 2014 sponsored by Practice Greenhealth, the highest award level. Madigan leads JBLM in support of Net Zero Sustainability Goals for Water and Air Quality, Energy Conservation and Waste Reduction. Our hospital logistics team recently achieved the ISO9000 award status, the first in the Military Health System.

MEDICAL READINESS

Madigan has contributed to a fully medically ready rate of 85.7% and a deployable rate near 91% for Soldiers on JBLM, which well exceeds the Army average of 83.4%. These results came from a concerted effort over time along with our line commanders, unit medical providers and our dental colleagues. We review the data, modify policy and apply resources through a monthly Senior Medical Council to synchronize and prioritize our efforts. Importantly, the Army has resourced our line units with physical therapists and our Soldier Centered Medical Homes to review population health data in order to decrease injury rates, the number one reason Soldiers are not medically ready.

JBLM is a pilot site for Army Medicine's Performance Triad and we anticipate that the data will show how proper activity, nutrition and sleep can improve health and wellness in large formations. Under LTG Lanza's leadership, we are working with senior installation leaders to devise new initiatives to further improve JBLM's readiness posture.

READY MEDICAL FORCES

Madigan residency programs boast a 95% 3 year first time board pass rate, 94% for AY 14-15 exceeding the 87% national average. The Orthopedics, Neurology, and Radiology programs' in-service examination performance this year places them in the top 10% of the nation and our Emergency Medicine Residency remains one of the top in the country. Our graduates are prepared through a military unique curriculum to transition into unit surgeons in maneuver units or serve in Forward Surgical Teams (FSTs) or Combat Support Hospitals (CSHs). As a former CSH Commander who served in Afghanistan, I have witnessed first-hand how our GME and related medical training programs provided the capability to achieve our unprecedented 92% survival rate despite the increasingly dire injury severity rates suffered by our patients.

Madigan's Charles A. Andersen Simulation Center, home to the Army's Central Simulation Committee, expanded to create a Just-in-Time Simulation Area (JITSA) in the main hospital in 2012 and has already trained more than 3,000 individuals. Much like a pre-flight simulator for our aviation colleagues, the JITSA provides clinicians the opportunity to rehearse prior to encountering live tissue.

The ASC is a Fundamentals of Laparoscopic Surgery Training and Testing Center, the only testing center for the State of Washington and has submitted a request to become a Fundamentals of Endoscopic Surgery Training and Testing Center. The ASC continues to support and coordinate the Advanced Trauma Operative Management (ATOM) and Advanced Surgical Skills for Exposure in Trauma (ASSET)

Courses in conjunction with multiple FSTs and the 47th CSH often felt by deployed surgeons to be the most valuable pre-deployment training they received.

The Andersen Simulation Center created novel Ebola training by incorporating skill training while in personal protective equipment during treatment scenarios. The scenarios required learners to conduct assessments and interventions for the care of a deteriorating patient, a mannequin capable of transferring contaminated secretions to staff via an aerosolized fluorescent material thereby providing direct, non-lethal feedback to the care provider.

Our facility remains a long-term partner with our local civilian colleagues as an American College of Surgeons Level II trauma center, participating in the Tacoma Trauma Trust. We average over 1 trauma code activation daily to support our community and provide ongoing trauma training for our staff.

Madigan remains globally engaged with approximately 20 staff members deployed worldwide and dozens more preparing or on standby for other missions. Our GME programs provide academic rigor and ensure our medical teams are trained, ready and relevant to provide care globally.

CARE WITH COMPASSION

Madigan is dedicated to providing top quality, safe and accessible patient-centered care for all of our beneficiaries. The MHS Review gave us the opportunity to look at ourselves more closely and I am pleased to report that we have made great strides to meet benchmarks and increase compliance with 15 of the 22 National Surgical Quality Improvement Program (NSQIP), National Perinatal Information Center

(NPIC) and The Joint Commission ORYX measures evaluated in the Review in a little over one year. We anticipate continued improvement in the near future as the data collection catches up to our current performance.

Of the 10 Healthcare Effectiveness Data and Information Set (HEDIS) scores we monitor closely for out-patient quality in the Military Health System, Madigan exceeds the 90th percentile in 4, is over the 75th percentile in 2 others, over the 50th percentile in 2 more and nears the 50th percentile in the final two.

Madigan's access to care remains strong, with our third next available acute appointment being available within 1.6 days. However, we improved this metric from November 2012 through December 2015. With our ongoing initiatives, we should meet the target of less than one day NLT FY 2017. Our internal data suggests that the actual time seen for all acute appointments is actually 0.6 days so that if you call today for an appointment, we generally see you today or provide a referral to the network.

Similarly, we are incorporating Army Secure Messaging System (Relay Health), our national Nurse Advice Line and maximizing the use of tele-health to improve our access. Madigan's School Based Clinics provides patient-centered primary care to TRICARE Prime adolescents at seven middle and high-schools in the local community, increasing access for this population while minimizing time away from school for the student and the time away from home or work for their parent(s). The program began in 2012 as a pilot through an American Academy of Pediatrics grant (Military Adolescent School Based Health Initiative – MASBHI). While we have yet to demonstrate cost-effectiveness from a medical perspective, the program is enormously popular with

parents and schools and has yielded improved immunization rates and other quality measures.

The Pacific Northwest and Madigan will be the pilot site for the new DoD electronic health record. While we have a great deal to do before we bring the new system on line, the end state will almost certainly improve the efficiency of our providers to see patients and enhance our access.

Madigan just opened a new residential treatment facility for substance abuse with our first patients arriving on 1 February, 2016; we broke ground recently on an Intrepid Spirit traumatic brain injury center provided by the Intrepid Fallen Heroes Fund as well as a new Fisher House. We coordinate closely with the Seattle VA and our local VA Center at American Lake where we provide much of the VA's in-patient and specialty care locally. We continue to consider innovative solutions to ensure we provide the very best care to our patients while we prepare our staff to serve our nation in the most difficult environments.

CONCLUSION

Madigan is a tertiary, academic medical center providing the full spectrum of primary and specialty care and serves as the regional referral center for the multi-service market and the Army. I am enormously proud of our 5000 strong Madigan Team and its outstanding reputation in the military and civilian community for health care leadership and professional excellence, our culture of innovation and relentless focus on our patients as the foundation for our improvement activities as well as our recent significant achievements measures of clinical quality, safety, and financial performance.

I am personally committed to improving the readiness of our Soldiers, medical and non-medical alike, so they can best defend America's freedoms and improve the chances that each and every one returns home safely. On behalf of the Madigan Army Medical Center Team and Army Medicine, I want to thank the Army and the Department's senior leaders as well as members of Congress for their continued support.