

**BASE VISIT REPORT**

**Naval School of Health Sciences, Portsmouth, VA**  
(located on the campus of the Portsmouth Naval Medical Center)

**May 24, 2005**

**LEAD COMMISSIONER:** Chairman Anthony Principi

**ACCOMPANYING COMMISSIONER:** N/A

**COMMISSION STAFF:** Hal Tickle, Navy Team; Lesia Mandzia, Joint Cross-Service Team;  
Dan Cowhig, Deputy General Counsel

**LIST OF ATTENDEES:**

**Naval Medical Education and Training Command, Bethesda, MD (by video)**  
Commander, Nancy J. Lescavage, RADM, NC USN  
Deputy Commander, Tom E. McGue, Capt., MC, USN

**Navy Region Mid-Atlantic**  
Commander, Stephen A. Turcotte, RADM  
Executive Officer, William (Skip) Zobel

**Naval School of Health Sciences, Portsmouth**  
Commander, Brad Bennett, Capt., MSC, USN  
Executive Officer, Susan Herron, Capt., NC, USN

**BASE'S PRESENT MISSION:**

**Mission of the Naval School of Health Sciences:** Advance the sea warrior's readiness through exceptional medical education and training.

**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.

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Analyst / Provider: Lesia Mandzia Date Received: \_\_\_\_\_

**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, realtime. As a result, both the healthcare delivery and training experiences are exponentially enhanced.

**MAIN FACILITIES REVIEWED:** Naval School of Health Sciences located on the Portsmouth Naval Medical Center campus.

**KEY ISSUES IDENTIFIED:**

This recommendation affects 3 Navy locations that provide basic and specialty enlisted medical training: Naval School of Health Sciences, Portsmouth, VA; Naval School of Health Sciences, San Diego, CA; and the Naval Hospital Corps School, Great Lakes, IL. Moving all 3 schools will affect 6,000 – 7,000 students.

Is there sufficient housing at Fort Sam Houston for these students?

It is unclear whether the relocation of these programs is a co-location of training or a consolidation of training.

Will Fort Sam Houston be able to provide the required clinical training for the new students not just from the Navy training schools but also to the Army’s students and the students that will be transferred from Sheppard AFB, even if the medical center at Lackland AFB relocates all its inpatient medical functions to Fort Sam Houston?

How will the services address the fact that for some of these professions the services do not have a uniform scope of practice? For example, a Navy Pharmacy Technician often works without direct supervision of a physician or pharmacists; however, this is not true for the Army’s pharmacy technicians.

How will moving from a fleet area affect the Navy's ability to provide operational training?

Clinical training for these professions is provided by the Medical Centers' associated with these training programs. What affect will moving these programs to Fort Sam Houston have on the training mission of these facilities and how will the medical centers ability to provide medical care at these facilities be affected?

**INSTALLATION CONCERNS RAISED:**

Will this be a co-location of training programs or will this become a joint training center?

How will the variation in the scope of practice for some of the professions be dealt with?

Can Fort Sam Houston accommodate all the students that would be transferred?

Will there be enough housing?

How will Fort Sam Houston be able to provide all the students their clinical training?

How will the Navy specific operational training opportunities shipboard, Marines and undersea diving communities be accomplished?

How will the school maintain full through-put of students to meet billeting requirements as it transitions to Fort Sam Houston?

**COMMUNITY CONCERNS RAISED:** None at this time.

**REQUESTS FOR STAFF AS A RESULT OF VISIT:** Determine whether the Chairman's schedule allows him to visit the Naval Medical Education and Training Command in Bethesda, Maryland before the June 8, 2005 Commission visit to the San Diego Naval School of Health Sciences.