



DOD CIVILIAN MANNING DECISION INFORMATION – ADDITIONAL TALKING POINTS

Background

On October 20, 2008, The Deputy Secretary of Defense reviewed the options for civilian staffing of military medical facilities in the National Capital Region (NCR) related to the changes mandated by Base Realignment and Closure (BRAC) and decided that civil service employees of military medical facilities under JTF CAPMED will be best served by transitioning to a Department of Defense (DoD) civilian personnel system. This means that as BRAC is implemented and the integration of military health care continues in the region, civilian personnel at the new Walter Reed National Military Medical Center and the new Community Hospital at Fort Belvoir will be DoD civilian employees, not Army, Navy, or Air Force civilian employees. Further phased implementation will include civilians at other clinics in the NCR when evaluation shows that the change will enhance the effectiveness of integrated regional healthcare system delivery, and add opportunities for career development.

Why DoD civilians?

First, it is important to acknowledge that for many civilians, a service culture, whether it is Army, Navy or Air Force, becomes an essential part of how they think about their work. In a military treatment facility (MTF), it is an aspect of the culture that helps bond civilian caregivers and staff to service-specific warriors and their families. Within service-managed MTFs (i.e.; “Army Hospital” or “Navy Hospital” etc.), it can be a very valuable bonding force.

In building a joint and integrated regional healthcare system, the differences in language, processes and equipment that accompany service cultures often lead to assumptions and expectations that are not shared and common. This sometimes leads to “us” and “them” thinking that can undermine our ability to think in regional terms about what is right for all patients regardless of service or the MTF that is treating them. Transitioning our workforce to a common civilian structure provides us with an opportunity to bring all of the best of the current service cultures into these new joint and integrated hospitals while beginning a new regional culture of medical quality and service to all our patients.

Why not just pick one service, either Army, Navy or Air Force, if you want to do it one way? There would clearly be some advantages to adapting the language, processes and equipment of one Service across the region. But choosing one service over the others could immediately lead to a perception that there were “Winners” and “Losers” in this transition. The civilians from a service that was not chosen would inevitably question whether they were disadvantaged when they transitioned into an organization where they did not know significant aspects of the culture. There are numerous studies on organizational culture that demonstrate the extent to which knowledge of organizational culture makes a difference for employees. This decision to transition to a DoD civilian culture creates a truly level playing field across the Region.

What will change for me now that the decision has been made? Immediately, nothing. Work will continue as usual. No jobs will be lost as a result of the transition to a DoD civilian workforce. Obviously, you will continue to see or hear about progress on construction and integration and that will be a constant signal that military health care in the region is being transformed. Over time, you will receive information on job openings as well as promotional and training opportunities and regular updates on upcoming changes that involve the civilian workforce. The basic rules and regulations that have governed your entitlements and decisions as civilian employees do not change. Some processes will change slightly, but you will be provided advanced information and training long before those changes become effective to insure that no one is surprised or misses an opportunity.

One exciting change that will accompany the transition will be the availability of new career development opportunities for civilians. Although there are still many details to be worked out, a key objective of this transition is to leverage the vital perspective and continuity of our civilians in management and leadership roles in the integrated regional healthcare environment.

Finally, although the change to becoming a DoD civilian employee may sound dramatic, be assured that it changes nothing about the way the current workforce succeeds on a daily basis in providing world class care for our nation's service members and their families.

Additional information about the transition and the future medical civilian workforce in the NCR will be posted on www.JTFCAPMED.mil.