

From Idea to Reality: The Creation of a Healthcare Executives and Medical Contingency Planners Group Overseas

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ORGANIZATIONAL INFORMATION

U.S. Naval Hospital Yokosuka is located on U. S. Naval Base Yokosuka, in the City of Yokosuka, 60 miles east of Tokyo, Japan. Naval Hospital Yokosuka is the largest U.S. military medical treatment facility in mainland Japan. A Level IV, 47-bed hospital, the hospital has the capability to expand to 200 beds in the event of a contingency or wartime situation, Naval Hospital Yokosuka serves approximately 43,000 beneficiaries living throughout the Greater Tokyo metropolitan area. Naval Hospital Yokosuka also receives approximately 300 referral patients annually from smaller, outlying branch medical clinics located throughout Japan and Korea.

Naval Hospital Yokosuka has been in continuous operation since 1950. The current main hospital structure was dedicated in 1987. The core hospital was actually built on an earthquake proof foundation that is designed to “roll” laterally in the event of a tremor. Situated in the southern tip of the vast Kanto Plain region on the island of Honshu, Naval Hospital Yokosuka is located 20 miles from the City of Yokohama, a major Japanese industrial city and seaport.

From June 1998 to January 2001, the author, a U.S. Navy Medical Service Corps (MSC) officer and healthcare administrator, served in various healthcare administration leadership positions at Naval Hospital Yokosuka. During the years 1998 through 2000, there were approximately 22 Medical Service Corps officers assigned to Naval Hospital Yokosuka, half of whom held the designation as a healthcare administrator. Two healthcare administrators also held the title, Medical Planner.

A BRIEF ACCOUNT OF THE PROBLEM

It is interesting to note that, prior to 1999, in a major metropolitan area serving a U.S. military population of 45,000 eligible beneficiaries, no nationally recognized professional healthcare or emergency management organization existed in mainland Japan. Approximately 70 U.S. military healthcare administrators serving in a variety of healthcare settings, and an additional 400 medical clinicians and allied health professionals working in military hospitals, medical clinics, and on naval vessels, were responsible for providing and managing healthcare to U.S. military personnel and their families living

in this expansive area. A few forward thinking U.S. Navy healthcare administrators working in a large naval hospital in Yokosuka decided that it was time to establish a healthcare executives and medical contingency planners organization in mainland Japan. This case report details the method these healthcare administrators used to develop a successful healthcare executives and medical contingency planners group overseas.

EXPLANATION OF THE PROBLEM

Six years ago, in 1999, there were approximately 70 U.S. military healthcare administrators (a specific military occupation code) representing all three branches of the U.S. Armed Forces (Army, Navy and Air Force) working in hospitals, medical clinics, and joint commands in mainland Japan and aboard naval vessels operating in and around the ocean waters of Japan and the western Pacific. Approximately eight of these military healthcare administrators also held specialty codes as Medical Planners in their respective services. In addition to these seventy healthcare administrators, there were several hundred physicians, nurses, allied health professionals and enlisted medical technicians and corpsmen serving in mainland Japan. Together, this large group of healthcare professionals was responsible for providing and managing healthcare for 45,000 U.S. military personnel and family members living in the expansive Kanto Plain area. The greater Kanto Plain region includes the sprawling metropolis of Tokyo and the smaller, yet heavily populated cities of Yokohama, Kawasaki, and Chiba. Interestingly, there were an equal number of Japanese healthcare professionals serving with the Japan Self-Defense Forces and several thousand Japanese civilian healthcare professionals, all of whom would have benefited from association with a professional healthcare management and medical contingency planners organization.

A Noticeable Lack of Professional Healthcare and Medical Contingency Management Organizations

Many of the U.S. military healthcare professionals working in the Kanto Plain area today are destined for positions of senior leadership within the hierarchy of their respective services. Yet, prior to 1999, the only nationally-recognized healthcare management organization that existed “locally” that could serve the professional needs of these individuals was located an hour and a half away by plane on the island of Okinawa—the Healthcare Executives of Okinawa.

Of the seventy U.S. military healthcare administrators working in the Kanto Plain region, approximately twenty-two were naval officers assigned to U.S. Naval Hospital Yokosuka. The lack of a professional healthcare and medical contingency management organization in the Kanto Plain indirectly resulted in a noticeable level of apathy among many of the healthcare administrators and medical planners at Naval Hospital Yokosuka. Out of twenty-two healthcare administrators at the facility, four officers were members of the American Academy of Medical Administrators, four were members of the

American College of Healthcare Executives, and only two individuals, to include the hospital's Director for Administration, had successfully passed a board certification examination in healthcare administration. The rest of the healthcare administrators knew little about board certification examinations and professional advancement. Moreover, the twenty-two healthcare administrators at Naval Hospital Yokosuka were not involved in any type of networking or professional development relationship with U.S. military healthcare administrators and medical planners at nearby Yokota Air Force Base, the U.S. Army's Camp Zama or with the Japanese military healthcare administrators at the large Japan Maritime Self-Defense Force base hospital located just three kilometers from Naval Base Yokosuka's main gate. To be sure, the healthcare administrators at Naval Hospital Yokosuka were slowly traveling down a road lacking professional development and networking opportunities in medical contingency planning and healthcare management.

MANAGEMENT AND ADMINISTRATIVE DECISIONS

The Key Players

Several Naval Hospital Yokosuka healthcare administrators played important roles in the dynamics involved in forming and eventually sustaining the new healthcare management and medical contingency planning group that came to be known as *Healthcare Executives of the Kanto Plain*. Key players in this effort were the author; Commander (now Captain) John D'Alessandro, the hospital's Director for Administration; Lieutenant (now LCDR) David G. Baptista, the Head of Administrative Services Department; and Lieutenant Commander Paul Toland, the Head of the Managed Care Department.

Creation of the Healthcare Executives of the Kanto Plain

In the spring of 1999, CDR D'Alessandro, the author, and LT Baptista met for a meeting that would become a turning point in the future of Naval Hospital Yokosuka. The three healthcare administrators reasoned that the time was right to establish an organization on mainland Japan that would serve the professional, educational and fraternal needs of American, and in many cases Japanese military and civilian, healthcare executives and medical contingency planners working in the Kanto Plain. Work to establish this professional healthcare executives and medical contingency planners group began in earnest in May 1999. The author, who was assigned as the Assistant Director for Administration at the Naval Hospital at the time, volunteered to do most of the legwork needed to create the new organization. The secretary of the Healthcare Executives of Okinawa was contacted and a request was made for a copy of their organizational Bylaws. The three Naval Hospital Yokosuka healthcare administrators wanted their new organization to have a focus on early career development and medical contingency planning and to be distinctly separate from the healthcare executives group in Okinawa. However, they liked some features they had seen previously in the Healthcare Executives of Okinawa—namely, sponsorship of a board certification examination in healthcare management. Each year, the Okinawa group had sponsored an American College of Healthcare Executives board certification examination and with great success. The decision was made then to include a nationally recognized board certification examination in healthcare management as one of the events the new organization would sponsor within the next few years.

By early June 1999, the author had written the Bylaws and had essentially completed the organizational structure for Naval Hospital Yokosuka to have its own healthcare executives and medical contingency planners group. The new organization would be called "Healthcare Executives of the Kanto Plain" or *HealthKap*, for short. The organization's logo would be a Japanese crane flying across the Sun, both images distinct symbols of their host country, with the crane representing long-life and prosperity and the Sun representing Japan, the Land of the Rising Sun. Likewise, *HealthKap*

would endeavor to facilitate lifelong learning in Japan. On August 27, 1999, the newest healthcare executives and medical contingency planners group outside of the United States was officially chartered. The new organization, Healthcare Executives of the Kanto Plain, had eight members, three of whom were listed as founding members—CDR D'Alessandro, the author and LT Baptista. The three founding members also served as HealthKap's first President, Secretary and Treasurer, respectively.

Marketing the New Organization

The process of writing HealthKap's organizational Bylaws was not a complicated one. However, the recruitment of members was certainly more challenging and required creative marketing strategies. CDR D'Alessandro decided that as an initial marketing strategy, HealthKap would be promoted at every large gathering of Navy Medical Service Corps officers—and so it came to pass. At the September 1999 monthly meeting of the Naval Hospital Yokosuka's Medical Service Corps Officers Association, HealthKap was formally introduced to the twenty officers in attendance. Included in HealthKap's inaugural launch presentation was a PowerPoint slide show prepared by the author and LT Baptista outlining HealthKap's mission, goals and membership requirements. Membership applications and brochures were produced earlier and were made available on a display table for all interested persons. In addition to striving to meet certain educational, fraternal and networking goals, HealthKap would also endeavor to promote an understanding and awareness of the emergency medical and disaster preparedness systems of Japan and the United States for the mutual benefit of its American and Japanese members. At the conclusion of that month's meeting, HealthKap received eight new applications for membership. The organization was on a roll. Plans were made to have HealthKap membership materials available at all future MSC Association meetings and all bimonthly Naval Hospital Yokosuka Combined Officers meetings. All eleven HealthKap's members also agreed to promote membership in HealthKap at any function where there was at least one non-member healthcare administrator or medical planner. In fact, several members even carried membership applications with them when they were in their military uniforms. Within two months, two high profile Navy Medical Department officers were added to HealthKap's membership rolls—the commanding officer of Naval Hospital Yokosuka and the hospital's executive officer.

Copies of HealthKap's PowerPoint marketing presentation and membership application were sent as email attachments to hospital administrators and medical planners at the Yokota Air Force Base hospital and the Army health clinic at Camp Zama in a quest to recruit new members outside of the Navy. By December 1999, HealthKap had successfully recruited two Air Force and one Army healthcare administrators/medical planners as members.

Continuous Improvement Strategies

By the beginning of March 2000, approximately six months after its creation, HealthKap had twenty members on its rolls. Efforts were underway to recruit new members from the enlisted hospital corpsmen ranks as well. Under HealthKap's Bylaws, enlisted persons pursuing undergraduate or graduate degrees in healthcare administration or emergency management were eligible to become *Associate* members. HealthKap members took advantage of every opportunity to recruit enlisted members to its ranks. The author and LT Baptista spoke at hospital First Class Petty Officer Association meetings and at hospital Chief Petty Officer Association gatherings. HealthKap members worked hard to dispel a perception among the enlisted hospital corpsmen community that membership in HealthKap, the American Academy of Medical Administrator or the American College of Healthcare Executives was limited to commissioned officers only.

During the months leading into the summer of 2000, CDR D'Alessandro suggested the development and mailing of a HealthKap performance improvement questionnaire, designed to survey current members' attitudes on how HealthKap could improve as a healthcare executives group. Results of the survey revealed, among other findings, that a majority of the members wanted HealthKap meetings to rotate between Navy, Air Force and Army venues. Air Force and Army members were growing weary of traveling two hours each way to Naval Hospital Yokosuka in heavy urban traffic to attend monthly HealthKap meetings. Also, the use of video and audio teleconferencing was suggested and subsequently used so that members unable to travel to that month's meeting place could still participate in discussion. An important performance improvement strategy designed to benefit all non-board credentialed members was also implemented as a result of the performance improvement survey. Healthcare management board examination study groups were formed and chaired by a member who had earned the "CAAMA," "CFAAMA," "CHE" or "FACHE" professional credential through the American Academy of Medical Administrators or the American College of Healthcare Executives, respectively. Participation in a board certification study group served to motivate members who needed encouragement to study for the rigorous examination. Not surprisingly, some members simply lacked the necessary discipline to put in a couple of hours of studying each night after a long day at the office. Study groups met weekly over lunch in the hospital conference room, with responsibility for that week's topic assigned on a rotating basis among the members of the study group.

THE RESULTS

The true test of success of any newly created organization is its ability to endure as an institution over time. The three Navy Medical Service Corps officers who created Healthcare Executives of the Kanto Plain (CDR D'Alessandro, the author and LT Baptista) and the single MSC officer (LCDR Toland) who worked to sustain the organization when the three founding members departed Naval Hospital Yokosuka all shared a common vision and classic military "never quit" work ethic. The dream was realized and the work accomplished amid a certain degree of doubt and skepticism that existed among their peers.

Early Success

HealthKap's first year's accomplishments, however, foretold the success that would ultimately mark the organization as an up and coming Healthcare Executives Group. Two members, the author and LT Baptista, comprised the first year board certification examination study group. Both officers studied diligently for twelve weeks, following a study plan that had been suggested by CDR D'Alessandro. The two junior officers sat for board certification exams sponsored by the American Academy of Medical Administrators and the American College of Healthcare Executives, under the sponsorship of *Healthcare Executives of the Kanto Plain* and *Healthcare Executives of Okinawa*, respectively. Several weeks after the examination had been administered, both officers received the news of their passing scores in the mail. Their success at passing the rigorous AAMA board certification examination inspired other members to pursue the "CAAMA" or "CHE" credential. And more Medical Service Corps officers followed in their footsteps.

Increasing Membership and Passing the Baton

By the time the author left Naval Hospital Yokosuka for his next assignment to a naval warship in southern Japan fourteen months later, HealthKap had grown from its humble beginnings and an initial membership roster comprising eight individuals to a robust and goal-oriented organization of thirty-five members, including several healthcare administrators and medical planners from the Air Force, Army and a nearby major Japanese medical center. With the ever-present cycle of arrivals and departures for active duty personnel assigned to the command, the average tour for a healthcare administrator at Naval Hospital Yokosuka was, and still is today, three years—two years if the officer is single.

Two years after HealthKap was officially created, all three of its founding members had been transferred to other assignments away from Yokosuka. But for the proactive leadership of one key individual, LCDR Paul Toland, HealthKap may have lost its momentum and floundered. Indeed, LCDR Toland assumed the reins of leadership once CDR D'Alessandro left Japan for an assignment in Florida and kept the organization moving in a forward direction. LCDR Toland continued to recruit new members to the organization, chaired monthly meetings, recruited members to observe

Japan Maritime Self-Defense Force disaster drills, facilitated board certification study groups and organized tours of neighboring hospitals and ships' medical departments. Due to LCDR Toland's efforts, Healthcare Executives of the Kanto Plain has managed to keep its membership roster in the mid to high twenties. The baton of leadership was effectively passed from one capable leader to another, without fanfare or celebration but nevertheless with great skill, confidence and a little bit of luck. Today, six years after its creation, HealthKap is still going strong, with a positive prognosis predicted for its future.

Promoting an Understanding and Awareness of Medical Systems of the U.S. and Japan

A key feature of HealthKap's Bylaws is a clause that puts strong emphasis on cross-cultural awareness and understanding. Before HealthKap had celebrated its first anniversary, numerous events designed to promote a better awareness and understanding of Japanese and American medical and emergency preparedness systems had already been held, some to wide acclaim. Mr. John Woche, a retired Navy MSC officer and current HealthKap member and executive vice president of a premier Japanese medical center, had organized what would eventually become an annual day-long tour of Kameda Medical Center, a state-of-the-art medical center located in Chiba Prefecture, a few miles away from Tokyo's Narita Airport. Mr. Woche's organized tours of the Kameda facility were always preceded by an informative hour-long slide presentation of the comparisons and contrasts between the Japanese and American healthcare systems. Tours of the neighboring hospital and facilities of the Japan Maritime Self-Defense Force hospital in Yokosuka were also organized on a regular basis to give HealthKap members an opportunity to see first-hand how the Japanese military healthcare system works. Finally, by taking advantage of its ever expanding network of members and supporters within Navy Medicine, HealthKap has been able to organize several tours of the medical departments of major U.S. Navy aircraft carriers and amphibious assault ships while those ships were in port in Yokosuka, thereby providing its members with a macroscopic view of how Naval Medicine is practiced at sea.

CONCLUSION

Healthcare administrators serving in the U.S. Armed Forces, and American civilians choosing to work in healthcare organizations overseas, may well be assigned to geographical areas where the opportunity for professional development or networking within the field of healthcare administration and contingency planning simply does not exist. This case report serves as a guide on the method Healthcare Executives of the Kanto Plain used to create a successful healthcare executives and medical contingency planners group overseas. Perhaps this recipe will be one that can be used by others who find themselves in a foreign country and without a professional healthcare administration and medical contingency planners group to join.

SOURCE MATERIAL

The problem identified above was resolved through a shared vision and teamwork, primarily involving the author, Captain John D'Alessandro, Lieutenant Commander David Baptista, Lieutenant Commander Paul Toland and several dedicated members of Healthcare Executives of the Kanto Plain. The author's personal diaries from the years 1999 and 2000 were used to corroborate events and dates. This case report was written from the author's first-hand perspective as a key player in the administrative decisions and actions provided above.

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