

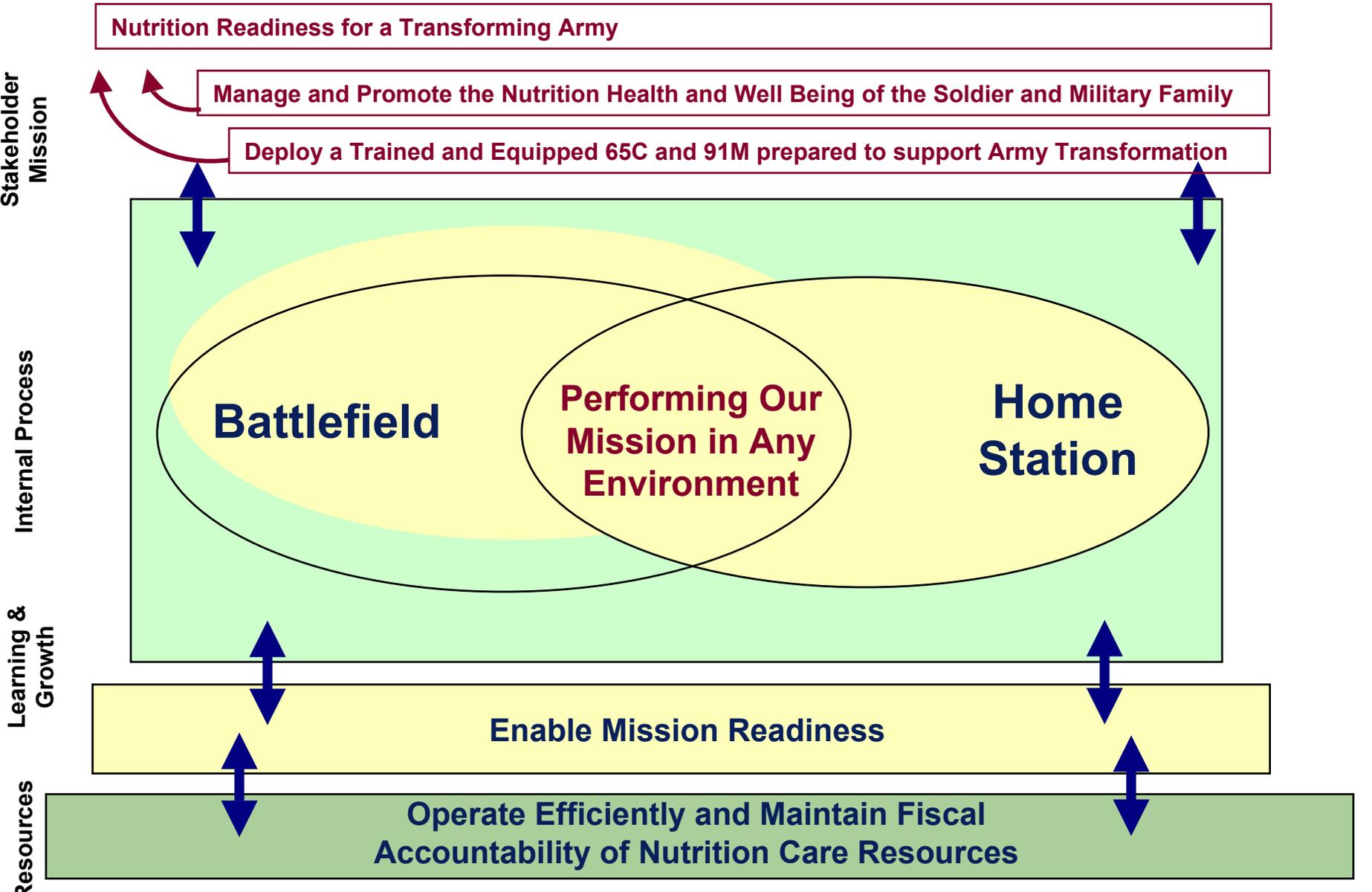
As of 6 April 2004



**BALANCED
SCORECARD**
COLLABORATIVE

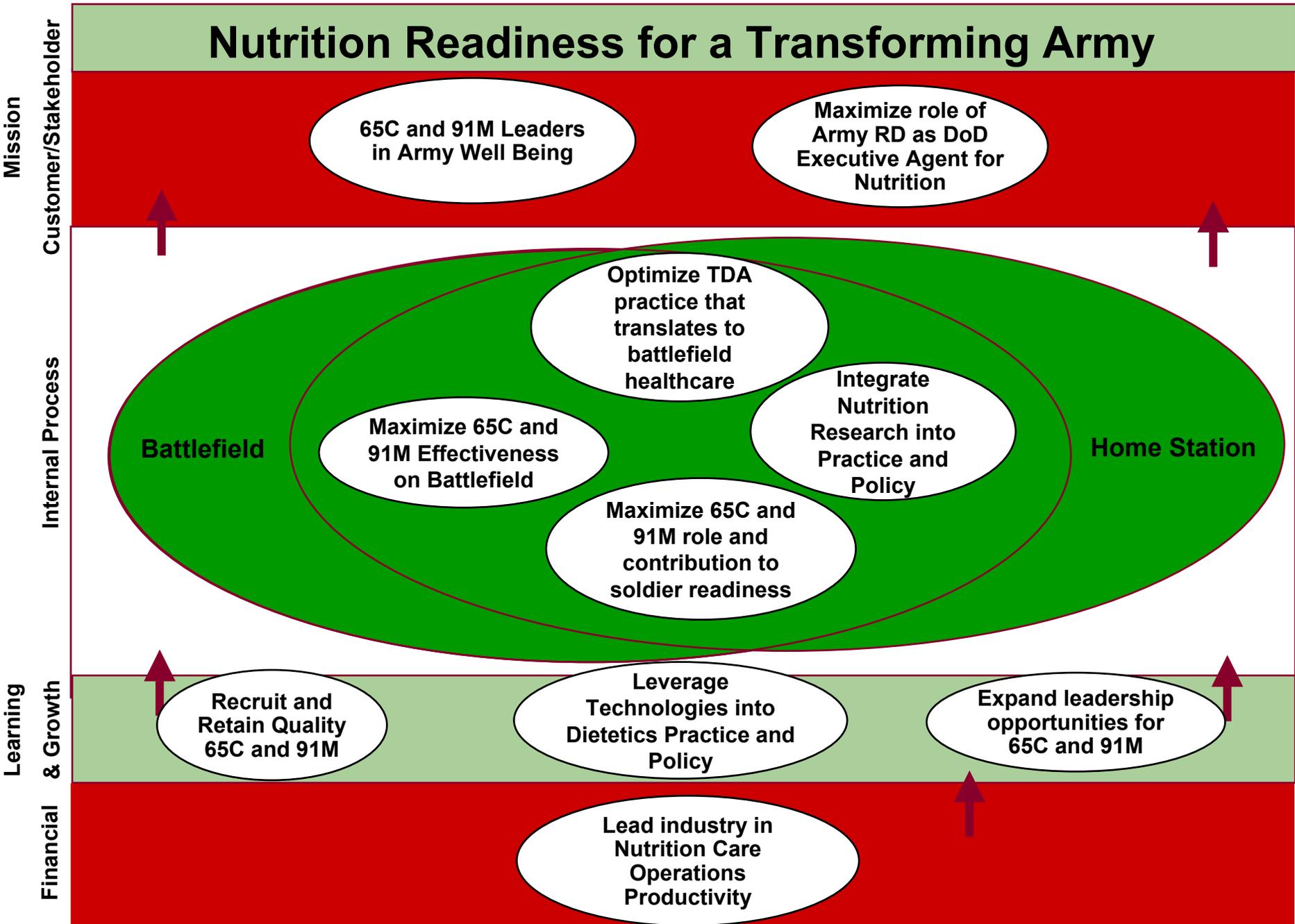
65C and 91M Balanced Scorecard

VISION: Army Dietitians and Nutrition Care Specialists: Nutrition Experts Providing Premier Care and Services for a Transforming Army



65C/91M Strategy Map

6 April 2004



Goal 1: Nutrition Readiness for a Transforming Army

Strategic Objective	Objective Statement	Measures and Target	Primary POC and Team Members
 <p>Maximize Role of Army RD as DOD Executive Agent for Nutrition</p>	<p>M-1 Conduct Staff Study to determine feasibility of being only provider of nutrition support for the warfighter</p> <p>M-2 Clearly define role and requirement for Nutrition Staff Officer in locations as OTSG, TMA, Army G-1, and Lead Agencies</p>	<ul style="list-style-type: none"> Began study of Executive Agent process and potential opportunities Identify existing 05A positions in training LCMs and additional 05A opportunities: role and requirement for other staff positions being studied 	<p>LTC George Dilly</p> <p>TEAM MEMBERS LTC Hutson LTC Parker</p>
 <p>Integrate Nutrition Research into Practice and Policy</p>	<p>IP-1 Incorporate Evidence Based Medicine into medical nutrition therapy practice</p> <p>IP-2 Expand research conducted, published and integrated into practice and policy by Army Dietitians.</p> <p>IP-3 Initiate 2 soldier athlete research projects annually</p>	<ul style="list-style-type: none"> % MTF's conducting nutrition outcomes studies (n=32) TARGET: 50% % MTF's using current Medical Nutrition Therapy Protocols (i.e. ADA, ASPEN, AHA, etc) (n=32) TARGET: 50% % MTF's adjusting clinical practice based on outcomes and current clinical evidence. (n=32) TARGET: 50% % MTF's conducting and publishing research and outcomes studies by Army Dietitians per FY (n=36) TARGET: 10% % MTF's presenting research and outcomes results to professional organizations (poster or platform) (n=36) TARGET: 10% 	<p>LTC Gaston Bathalon</p> <p>TEAM MEMBERS LTC Grediagin LTC Kemmer LTC Geisler MAJ Moran CPT Jordan CPT Giese 1LT Mobley</p>

Goal 2: Manage and Promote the Nutrition Health and Well Being of the Soldier and Military Family

Strategic Objective	Objective Statement	Measures and Target	POC and Team Members
 <p>65C Leaders in Army well being</p>	<p>M-3 Develop and implement Health Promotion Template Study-23 sites requested template/business plan</p> <p>M-4 Identify opportunities for RD's in Soldier and Family Member Health Promotion and Wellness.</p>	<ul style="list-style-type: none"> • % of sites with 65C/91M that have multidisciplinary wellness programs 15 or 55? • % of different multidisciplinary wellness programs developed and/or administered by 65C/91M's 6 of 15 by RD, 4 of 15 by CHN, 2 of 15 by behavioral health • % increase in participation (market share) in wellness programs must be locally measured 	<p>COL Laura Kostner</p> <p>TEAM MEMBERS MAJ Brasfield MAJ Corum MAJ Jaghab CPT Crombie CPT Frost CPT Woodward CPT Zacharias CPT Echols CPT Harper CPT Rogers SSG Channell</p>

Goal 3: Deploy Trained and Equipped 65C and 91M prepared to support Army Transformation

Strategic Objective	Objective Statement	Measure and Target	POC and Team Members
<p style="text-align: center;">Maximize 65C and 91M effectiveness on battlefield</p>	<p>IP-4 Develop and distribute Nutrition Care lessons learned</p> <p>IP-5 Incorporate Nutrition Care lessons learned from OIF/OEF into JFNOC and ANSFHP course sponsored by AMEDDC&S</p> <p>IP-6 Train PEOFIS dietitians at JRTC whenever a CSH of 44-beds or larger trains at JRTC</p> <p>Incorporate a Nutrition Care Module into the Battlefield Medical Information System (tactical). BMIS-T is a HP/Compaq IPAQ-based tool that would allow the 65C and 91M to collect, analyze, report and archive data via a small, handheld hardware system that would assist in casualty treatment and prevention</p>	<ul style="list-style-type: none"> •Lessons learned approved for release and posted on the internet-DONE •https://acfi.amedd.army.mil/dcdd/cr_div/Nutrition/OIF%20RD%20Lessons%20Learned.doc •Percent of JFNOC and ANSFHP contact hours spent training based on OIF/OEF lessons learned TARGET: 25% JFNOC 2004: actual 16% Percent of CSHs training at JRTC with at least one 65C spending 5 or more days training with the CSH at JRTC TARGET: 100% Telemedicine & Advanced Technology Research Center (TATRC-located at Fort Detrick) incorporate a Nutrition Care Module into BMIS-T 	<p>LTC Rich Meaney</p> <p>TEAM MEMBERS LTC Rowbotham LTC Patton</p>
<p style="text-align: center;">Maximize 65C and 91M role and contribution to soldier readiness</p>	<p>IP-7 Develop Nutrition Readiness Deployment Tool – Link with AKO and MEDPROS</p> <p>IP-8 Define Readiness Criteria beyond AR 600-9</p> <p>IP-9 Provide input for pre and post deployment screening to include nutrition screening.</p> <p>IP-10 Initiate sports nutrition residency program at USMA</p>	<ul style="list-style-type: none"> • % AD soldiers meeting body fat standards IAW AR 600-9. Link to WTS. •# of AD soldiers on ADWC program with abnormal labs •% weight change during deployment 	<p>LTC Linda Rowbotham</p> <p>TEAM MEMBERS MAJ Corum CPT Davidson LTC Sweet MAJ Moran MSG Kinsey SFC Dyer</p>

Goal 4: Enable Mission Readiness

Strategic Objective	Objective Statement	Measures and Target	POC
 <p>Recruit and Retain Quality Army Dietitians and Nutrition Care Specialists</p>	<p>LG-1 Explore and execute options to improve recruiting of dietetic internship applicants.</p> <p>LG-2 Expand educational opportunities for 65C's and 91M's to enhance recruitment and retention</p>	<ul style="list-style-type: none"> • # of applicants for Dietetic Internship Program. TARGET: 10% increase per year • # of College and University Dietetic Programs visited by Army RD's and number of Dietetic Students briefed n=161 TARGET: 10% increase per quarter • Status of implementation of Masters program • # of Junior Officers active participating in Junior Officer's Council • % of 91M's enrolled in DTR program N=450 TARGET: 10% increase per year 	<p>LTC Peggy Jones</p> <p>TEAM MEMBERS MAJ Jaghab LTC Despastina LTC Sweet CPT Davidson</p>
 <p>Leverage technology into Dietetics Practice and Policy</p>	<p>LG-3 Explore and quantify opportunities to expand use of technology to include IM and IT in dietetics practice and policy</p>	<ul style="list-style-type: none"> • Examples of ways that we currently use IM/IT in dietetic practice • Extent of use of VTT for continuing education for Dietitians and 91M's • Examples of emerging technology for dietetic practice • Current technological issues and options for Nutrition care operations 	<p>LTC Anychebelu</p> <p>TEAM MEMBERS LTC Geisler MAJ Moran CPT Trust MSG Kinsey SFC Sarver</p>
 <p>Expand leadership opportunities for Dietitians and 91M</p>	<p>LG-4 Conduct a survey to explore leadership opportunities beyond traditional dietetics</p> <p>LG-5 Develop proposed lifecycle model for attaining non-traditional leadership role</p> <p>LG-6 Explore opportunities to collaborate with Vet Corp regarding Food Safety and Food Security Issues.</p>	<ul style="list-style-type: none"> • % completion of survey questions and response from AMEDD leadership • Response from Military Leadership to Proposal • # of opportunities for collaboration and impact on Army Dietetics. TARGET opportunities that impact readiness and 65C/91M mission. 	<p>LTC Laurie Sweet</p> <p>TEAM MEMBERS LTC Dilly LTC Podojil</p>

Goal 5: Operate efficiently and achieve fiscal accountability of Nutrition Care Assets

Strategic Objective	Objective Statement	Measurement and Target	POC
 <p>Optimize TDA Practice that translates to Battlefield Healthcare</p>	<p>F- 1Conduct Business Case Analysis of Third Wave Action Plan and brief AMEDD Leadership</p>	<ul style="list-style-type: none"> •Status of completion of BCA and response from AMEDD Leadership Suspense: Feb 2004 	<p>LTC Maria Worley</p> <p>TEAM MEMBERS COL Forman</p>
 <p>Lead industry in clinical and operational productivity</p>	<p>F-2 Operate efficient and cost effective food service operations</p> <p><i>Initiatives:</i></p> <ul style="list-style-type: none"> •Review and validate current financial benchmarking program: determine expected standards •Validate the current + or –1% standard •Explore feasibility of implementing HFM benchmarking throughout MEDCOM: request volunteers for pilot study •Implement VA SPV contract across MEDCOM 	<ul style="list-style-type: none"> •TBD (# facilities within + or -% of standard total cost per meal) •# of facilities within + or – 1% authorized earnings • # MTFs using HFM benchmarking process; N=28 • # MTFs implemented VA SPV • Cost savings per quarter; % increase each quarter 	<p>LTC Brenda Ellison</p> <p>TEAM MEMBERS</p> <p>LTC Struth LTC Desmond LTC Wheeler MAJ Story CPT Georgiana CPT Kaefer MSG Kinsey MSG DeLong</p>

Goal 5: Operate efficiently and achieve fiscal accountability of Nutrition Care Assets

Strategic Objective	Objective Statement	Measurement and Target	POC
 <p>Lead industry in clinical and operational productivity</p>	<p>F-3 Operate efficient and cost effective inpatient and outpatient clinical operations</p> <p><i>Initiatives:</i></p> <ul style="list-style-type: none"> •Implement an Army Nutrition Care inpatient clinical benchmarking model in the interim •Review and validate current outpatient benchmarking on MEDCOM report •Revalidate the expected standard for outpatient visits 	<p># facilities (%total) reporting RVUs per FTE and costs per RVU on MEDCOM report; N=28</p> <p># facilities (% total) within deviation from standard for inpatient dietetics (#RVUs per available FTE)</p> <p># facilities (% total) reporting outpatient data on MEDCOM report (cost per visit; visits per FTE) N=28</p> <p># facilities (%total) within standard for outpatient dietetics</p>	<p>LTC Brenda Ellison</p> <p>TEAM MEMBERS</p> <p>LTC Struth LTC Desmond LTC Wheeler MAJ Story MAJ Hernandez CPT Kaefer MSG DeLong SFC Dyer SFC Foster</p>