2006 Current Fiscal Year Report: Amputee Patient Care Program Board

Report Run Date: 03/29/2024 10:59:21 AM

1. Department or Agency	2. Fiscal Year
Department of Defense	2006

3. Committee or Subcommittee	3b. GSA Committee No.
Amputee Patient Care Program Board	21501

4. Is this New During Fiscal Year?	5. Current Charter	6. Expected Renewal Date	7. Expected Term Date
No	07/06/2006	07/06/2008	07/05/2008

8a. Was Terminated During FiscalYear?	8b. Specific Termination Authority	8c. Actual Term Date
Yes	Agency Determination	09/30/2006

9. Agency Recommendation for Next FiscalYear	10a. Legislation Req to Terminate?	10b. Legislation Pending?
Terminate	No	

11. Establishment Authority Agency Authority

12. Specific Establishment Authority	13. Effective Date	14. Commitee Type	14c. Presidential?
Secretary of Defense Determination	05/01/2004	Continuing	No

15. Description of Committee Non Scientific Program Advisory Board

16a. Total Number of Reports	No Reports for this FiscalYear

17a. Open	0	17b. Closed	0	17c. Partially Closed	0	Other Activities	0	17d. Total	0

Meetings and Dates

No Meetings

	Current FY	Next FY
18a(1). Personnel Pmts to Non-Federal Members	$0.00	$0.00
18a(2). Personnel Pmts to Federal Members	$0.00	$0.00
18a(3). Personnel Pmts to Federal Staff	$7,000.00	$7,000.00
18a(4). Personnel Pmts to Non-Member Consultants	$0.00	$0.00
18b(1). Travel and Per Diem to Non-Federal Members	$3,100.00	$10,000.00
18b(2). Travel and Per Diem to Federal Members	$0.00	$3,500.00
18b(3). Travel and Per Diem to Federal Staff	$1,570.00	$2,500.00
18b(4). Travel and Per Diem to Non-member Consultants	$0.00	$0.00
18c. Other(rents,user charges, graphics, printing, mail, etc.)	$300.00	$300.00
18d. Total	$11,970.00	$23,300.00
19. Federal Staff Support Years (FTE)	0.10	0.10

20a. How does the Committee accomplish its purpose?

Serve in an advisory capacity to broaden the scope of vision for the U.S. Army amputee patient care program. Serve as an advisory body and monitor amputee patient care programs and services, and provide advice to the Walter Reed Health Care System regarding programs, services and effective organizational planning

20b. How does the Committee balance its membership?
Committee members will be diverse and qualified with training and/or experience in patient care, psychosocial issues, and family issues relevant to amputees. Members will include professionals in relevant amputee patient fields, immediate family members of amputees, and actual recipients of amputee patient care.

20c. How frequent and relevant are the Committee Meetings?
New Committee: Estimated Number of Meetings per Year - 2 Estimated Total Meetings - 4

20d. Why can't the advice or information this committee provides be obtained elsewhere?
To ensure that amputee patient care provided by the U.S. Armed Forces is state of the art and delivered in a cost effective manner. This Board will provide the Amputee Care Program with views and information specifically related to the care of soldiers injured in military conflict. The typical combat injured amputee patient is generally younger and has a more involved wounding pattern than the typical civilian sector amputee. No existing organization has the expertise required to advise the U.S. Army on these matters

20e. Why is it necessary to close and/or partially closed committee meetings?
Meetings will be open.

21. Remarks
Based upon a top-to-bottom review of the DoD Federal Advisory Committee Management Program, the US Military Amputee Patient Care Program Board of Directors will become a

sub-committee/panel of the newly established Defense Health Advisory Board. The Board will now be known as the Panel on the Care of Individuals with Amputation and/or Functional Limb Loss. The committee's charter was refiled in July 2006, no committee members have been appointed nor has any committee work been done. Committee member appointments are pending and the Department of Defense anticipates that committee members will be approved and in place prior to a first meeting in 2007. Since no committee members were appointed in FY06, there were no meetings and no reports submitted by the committee. The expenditure of FY06 funds have been for DoD Federal employees who are engaged in setting up the committee's infrastructure. These employees will have no impact whatsoever on the independence of the committee once it is operational. Their purpose in setting up the committee's infrastructure is to enable the committee members, once appointed, to immediately focus on their important mission to the Department of Defense, service members, and the Amputee Patient Care Program.

Designated Federal Officer
William C. Doukas Chief, Department of Orthopaedics and Rehabilitation, WRAMC

Narrative Description
Serve in an advisory capacity to broaden the scope of vision for the U.S. Army amputee patient care program. Serve as an advisory body and monitor amputee patient care programs and services, and provide advice to the Walter Reed Health Care System regarding programs, services and effective organizational planning. Awaiting the final JAG review and appointment of members prior to

holding a formal meeting.

What are the most significant program outcomes associated with this committee?

	Checked if Applies
Improvements to health or safety	✓
Trust in government	
Major policy changes	
Advance in scientific research	
Effective grant making	
Improved service delivery	✓
Increased customer satisfaction	✓
Implementation of laws or regulatory requirements	
Other	

Outcome Comments

NA

What are the cost savings associated with this committee?

	Checked if Applies
None	
Unable to Determine	✓
Under $100,000	
$100,000 - $500,000	
$500,001 - $1,000,000	
$1,000,001 - $5,000,000	
$5,000,001 - $10,000,000	
Over $10,000,000	
Cost Savings Other	

Cost Savings Comments

The committee's functions are being transferred to another discretionary advisory committee.

What is the approximate Number of recommendations produced by this committee for the life of the committee?

0

Number of Recommendations Comments
Committee did not make any recommendations this fiscal year. The committee's functions are being transferred to another committee.

What is the approximate Percentage of these recommendations that have been or will be Fully implemented by the agency?
0%

% of Recommendations Fully Implemented Comments
Committee did not make any recommendations this fiscal year. The committee's functions are being transferred to another committee.

What is the approximate Percentage of these recommendations that have been or will be Partially implemented by the agency?
0%

% of Recommendations Partially Implemented Comments
Committee did not make any recommendations this fiscal year. The committee's functions are being transferred to another committee.

Does the agency provide the committee with feedback regarding actions taken to implement recommendations or advice offered?
Yes ☐ No ☐ Not Applicable ☑

Agency Feedback Comments
NA

What other actions has the agency taken as a result of the committee's advice or recommendation?

	Checked if Applies
Reorganized Priorities	☐
Reallocated resources	☐
Issued new regulation	☐
Proposed legislation	☐
Approved grants or other payments	☐
Other	☑

Action Comments

One informal meeting was held to determine next steps needed, especially with regard to committee membership.

Is the Committee engaged in the review of applications for grants?

No

Grant Review Comments

NA

How is access provided to the information for the Committee's documentation?

	Checked if Applies
Contact DFO	✓
Online Agency Web Site	
Online Committee Web Site	
Online GSA FACA Web Site	✓
Publications	
Other	

Access Comments

Information on the committee is available through the Designated Federal Officer or the General Services Administration FACA Web Site.