



Defense Health Agency, J-7, Continuing Education Program Office

145th Interagency Institute for Federal Health Leaders

Live Course, September 8-19, 2025, Washington, D.C.

Continuing Education (CE)/Continuing Medical Education (CME) Information

This CE/CME activity is accredited by the DHA, J-7, Continuing Education Program Office (CEPO). This activity provides continuing education for physicians, nurses, physician associates/physician assistants, pharmacists, dentists, and healthcare executives. A certificate of attendance is available for other attendees.

145th Interagency Institute for Federal Health Leaders (58.25 clock hours)

September 8, 2025 at 8:00 am (ET) - September 19, 2025 at 11:30 am (ET)

Learning Objectives:

1. Explain how the Institute is organized to respond to identified learner needs.
2. Recognize opportunities to learn and discuss with other health professionals a broad spectrum of current domestic, international, practice management and leadership issues that influence health care.
3. Summarize how the DHA will manage the Military Health System as a single enterprise instead of each Service being responsible for garrison and combat health care.
4. Address why recruiting and retention of health personnel is critical to maintaining successful training programs.
5. Discuss the desirability to provide health care across the age spectrum from patient, provider and educational perspectives.
6. Describe how business and government leaders view trends in an attempt to anticipate and plan for the future.
7. Describe major trends expected to impact an ever-more turbulent world that will impact economies and society as a whole.
8. Explain how geopolitical instability, economic and financial dislocation and deceleration of globalization is going to force leaders to innovate, forge innovative partnerships, and maximize organizational resilience and agility to succeed or at least to persevere.
9. Explain why innovation and leadership are urgent matters for the medical field
10. Discuss the imperatives of effective leadership to move an organization forward
11. Explain the Office of Management and Budget (OMB) responsibility in creating a more accountable and effective government.
12. List measures used by the OMB to coordinate budget, legislative, management and regulatory policy for the President.
13. Describe potential security risks and benefits related to public health.
14. Recount why the healthcare industry is a lucrative target for cybersecurity incidents
15. Highlight how industrial policy plays a key role as a national security instrument
16. Describe the role of the judiciary in shaping health policy.
17. Delineate examples of the great public health achievements of the last century
18. List components of the health impact pyramid that have the greatest impact on population health.
19. Describe behaviors that have a positive impact on successful transitioning from senior to strategic leadership
20. Discuss how strategic leadership is different from senior leadership in successful organizations
21. Recognize that leaders must ensure that the mission is ethical valid to mitigate stress and a breakdown in moral values.
22. Describe medical ethical challenges where guidance might be confusing or not readily accessible in a timely way.
23. Explain how applied ethics is used in clinical medicine and medical research to determine the best and most appropriate actions to be taken.
24. Explain the differences between leadership and management in an organization
25. Discuss adaptive leadership and how it relates to your approach to performance of duties
26. Discuss the preferred measurements of clinical results and risk management to improve quality healthcare and wellness services.
27. Identify the tools and resources available to your organization to evaluate reliable health care

28. Summarize reasons why Xi Jinping has decided to turn much of Chinese politics, economics, and foreign policy on its head from the decades of Communist Party rule that preceded him.
29. Recognize the view of the Chinese Communist Party that Chinese national power, augmented by a strong Marxist-Leninist state, is now reaching a tipping point in its ability to engineer new international outcomes – outcomes that are more compatible with Chinese national interests and its Marxist-Leninist values.
30. Summarize the root causes of unrest and their effect on stability in Middle Eastern countries
31. Estimate how interactions between new leadership and an empowered public may affect the population especially with regards to standard of living, population health, etc.
32. Explain how perceptions of American foreign policy in the Middle East will influence future international collaboration
33. Summarize how the Military Health System will continue to stabilize, modernize and integrate as a single enterprise across the military services
34. Explain the scope and impact of private sector entities providing access and delivering health care to Federal beneficiaries
35. Discuss obstacles and opportunities for greater collaboration among private and public sector entities to provide health care services
36. Describe the Defense Health Agency approach for outsourcing health care services
37. Explain how military-driven advancements underscore the vital role military medicine has played in the evolution of healthcare leading to improved patient care and outcomes globally.
38. Summarize the current fiscal situation that has implications for the future.
39. Explain how the financial markets and the health care industry are interconnected in delivery of care.
40. Describe the National Disaster Medical System (NDMS) Pilot Program, including its problem set and goals with relevance to preparedness and surge readiness in the military and civilian healthcare systems.
41. Describe challenges of operating a successful health care enterprise within an academic medical institution
42. Describe a private sector approach to providing quality health care to meet patient needs in an austere fiscal environment
43. Describe challenges of operating a successful health care enterprise with attention to patient and staff satisfaction
44. Recognize the trajectories associated with extended life spans when planning age-appropriate care
45. Describe how programs designed to help adults optimize health might be integrated into preventive services in health care systems
46. Examine how the definition and measurement of person-centered care, patient satisfaction and patient experience have evolved, re-shaping the roles of patients and families in contemporary care settings.
47. Identify fundamental evidence-based structures, policies and practices that promote patient and family engagement and the pandemic impacts shaping future trends.
48. Describe the process of strengthening the military, national, regional, and global systems so they can respond more quickly and effectively to biological threats.
49. Explain how healthcare leaders can most effectively inform and influence policy and resourcing decisions by senior officials
50. Highlight the integral connections between health security, economic security and national security.
51. Distinguish one aspect of each country's health care systems that would have positive potential if adapted to a U.S. system.
52. Report key efforts of the VA to provide high quality services that are competent, compassionate, cost-effective, and evidence-based to improve the functional status of veterans
53. Explain how the VHA promotes health care delivery to achieve greater satisfaction among veterans
54. Discuss current issues being addressed by the health executive leadership that effect the Federal workspace
55. Report on models being developed for combat injury care when air and sea transport may be severely limited
56. Recognize cost-sharing reforms that could bend the health care cost curve and allow for Medicare to be there for future generations
57. Discuss how to use social media to the advantage of your health care organization
58. Identify components of successful information and image management while under media scrutiny
59. Cite appropriate questions to ask when selecting a professional specialty or advanced education and training
60. Relate how to cope with challenges arising from competing demands in health care leadership positions
61. Explain mentoring approaches to assist neophyte health care professionals
62. Prepare a verbal and written response to the small group exercise that represents input/consensus from all group members.
63. Critique responses to the small group exercises in relation to personal and professional views on the assigned tasks.

Faculty:

Richard F. Southby, Ph.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Stephen Ferrara, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Erik R. Peterson, M.A., MBA Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Jonathan Woodson, M.D., MSS, FACS Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Christian G. Music, Ph.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Frederic Lemieux, Ph.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Neil Grunberg Ph.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Matthew Levinger, Ph.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Sarah Rosenbaum, J.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Thomas Kahn, J.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Boris Lushniak, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

MG David Rubenstein, M.H.A., M.S. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Rev. Bertie Pearson, B.A., M.Div. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Paul Cordts, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Ambassador Kevin Rudd, Ph.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Josef J. Reum, Ph.D., M.P.A. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Sina Azodi, Ph.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Douglas Robb, M.P.H. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Honorable Patrick T. Henry, B.S. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Steven Carney, Ph.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Reid W. Click, Ph.D. M.B.A. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

CAPT Clemia Anderson, MPH. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Gregory Argyros M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

CAPT Melissa Austin, M.D., MBS. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Elizabeth Cobbs, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Susan Frampton, Ph.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Paul Friedrichs, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Surg Capt Steven Bland Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

CDR Iain Beck Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Steven Lieberman, M.D., MBA, FACHE Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

MGen Scott Malcolm, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Lt Gen John DeGoes, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

LTG Mary Izaguirre, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

RADM Rick Freedman Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

RADM Paul Jung, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

BG Clinton Murray, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Tamara Ritsema Ph.D., MMSc, MPH, PA-C. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Col Brandon Cummins DDS. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Steven Davis, M.D. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Pamela Jefferies, Ph.D., RN. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

COL Justin Schlanser, DVM. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Charles Kahn III, MPH. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Lt Col (R.) James Vance, M.S. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

LTG Ronald Blanck, D.O. Presenter has no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Disclosures:

DHA J-7 staff, planners, authors, faculty, and content reviewers for this educational activity have no relevant financial or non-financial relationship(s) with ineligible companies to disclose.

Interprofessional Continuing Education (IPCE)



In support of improving patient care, DHA, J-7, CEPO is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team. This activity was planned by and for the healthcare team, and learners will receive 58.25 Interprofessional Continuing Education (IPCE) credit for learning and change.

Physicians (ACCME)



DHA, J-7, CEPO is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

DHA, J-7, CEPO designated this live course for a maximum of 58.25 *AMA PRA Category 1 Credit™*. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Nurses (ANCC)

DHA, J-7, CEPO is accredited by the Joint Accreditation/Interprofessional Continuing Education (IPCE) to provide this Continuing Nursing Education live course for a maximum of 58.25 ANCC contact hours. Nurses should only claim credit commensurate with the extent of their participation in the activity.

Pharmacists (ACPE)



UAN JA4008136-0000-25-095-L04-P

No valid paper/electronic statement of credit will be offered. DHA, J-7, CEPO is accredited by the American Council for Pharmacy Education (ACPE) to provide continuing education for Pharmacists. This knowledge based activity will provide a maximum of 58.25 contact hours of pharmacy continuing education credit. Participant CE records will be electronically communicated to CPE Monitor. There is no cost to participate in this activity.

Physician Associates/Physician Assistants (AAPA) – Live



DHA, J-7, CEPO has been authorized by the American Academy of Physician Associates (AAPA) to award AAPA Category 1 CME credit for activities planned in accordance with AAPA CME Criteria. This activity is designated for 58.25 AAPA Category 1 CME credits. PAs should only claim credit commensurate with the extent of their participation.

Dentists and Allied Dental Staff (ADA CERP)



DHA, J-7, CEPO is an ADA CERP Recognized Provider. ADA CERP is a service of the American Dental Association to assist dental professionals in identifying quality providers of continuing dental education (CDE). ADA CERP does not approve or endorse individual courses or instructors, nor does it imply acceptance of credit hours by boards of dentistry. Concerns or complaints about a CE provider may be directed to the provider or to the Commission for Continuing Education Provider Recognition at ADA.org/CERP.

DHA, J-7, CEPO designates this activity for 58.25 continuing education credits.

ACCME Non-Physician CME Credit

DHA, J-7, CEPO is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing education. ACCME Non-Physician CME Credit providers will be provided a certificate of participation for educational activities certified for *AMA PRA Category 1 Credit™*. ACCME Non-Physician CME Credit providers may receive a maximum of 58.25 hours for completing this live course.

Healthcare Executives (ACHE)

By attending this program offered by DHA, J-7, CEPO, participants may earn up to 58.25 American College of Healthcare Executives (ACHE) Qualified Education Hours toward initial certification or recertification of the Fellow of the American College of Healthcare Executives (FACHE) designation. Participants in this program who wish to have the continuing education hours applied toward ACHE Qualified Education credit must self-report their participation. To self-report, participants must log into their MyACHE account and select ACHE Qualified Education Credit.

Other Professionals

All other healthcare professionals completing this CE/CME activity will be issued a Certificate of Attendance indicating participation and the number of hours of CE/CME credit. This may be used for submission to licensing boards for satisfaction of CE/CME requirements.

Commercial Support:

No commercial support was provided for this activity.

Participation Costs:

There is no cost to participate in this activity.

CE/CME Inquiries:

For all CE/CME related inquiries, please contact: dha.ncr.j7.mbx.continuing-education-office@health.mil.

How to Obtain CE/CME Credit:

To receive CE/CME credit, you must complete the program posttest(s) and evaluation(s) before collecting your certificate(s). The posttests and evaluations will be available through 2 October 2025 at 2359 ET at the following URL: www.dhaj7-cepo.com.