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TITLE: Use of VTC to Decrease Lost Work Days and Enhance Force  
Protection in Division Mental Health

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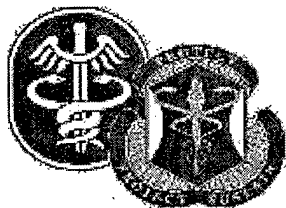
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# **DHP RFS Final Report**



**Use of VTC to decrease lost work days and enhance force protection in Division Mental Health**

**Proposal Number: 1999000178**

**Brett Jay Schneider MD**

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## **Abstract**

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## **Problems**

**Logistics-** The PI did not arrive at the duty station where the study/project was to be performed until August 2000. His unit was deployed the six months prior to his arrival, making preparation or coordination of the study impossible until his arrival. **Protocol Approval-** There was a lengthy approval process (10 months). **Equipment Purchasing-** There was a difficult acquisition process due to PI's being stationed overseas and needing to work with multiple organizations in Germany and continental US. **Insufficient Funds** also required the PI to obtain additional funding from BSB commanders locally before project could be started. Obtaining approval for this funding was also a lengthy process. **Organizational Coordination-** Numerous military organizations not directly connected with 1st ID, Division Mental Health needed to be briefed regarding the protocol and give support in order to perform the study proposed, this often required multiple meetings, approval from Commanders, and supporting documentation.

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## **Deliverables**

**The only change from the initial protocol is that funds were available to purchase higher quality VTC equipment for same price as the desktop equipment initially proposed because of the falling cost of VTC equipment.**

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## Expenditures

	3Q FY 00	4Q FY 00	1Q FY 01	2Q FY 01	
Element of Resource (EOR)	Apr 1 - May 31	Jun 1 - Sep 30	Oct 1 - Dec 31	Jan 1 - Mar 31	TOTALS
Travel 2100	0.00	0.00	0.00	1,000.00	1,000.00
Shipping 2200	0.00	0.00	0.00	0.00	0.00
Rent & Communications 2200	0.00	0.00	13,916.00	0.00	13,916.00
Contract for Services 2500	0.00	4,000.00	500.00	0.00	4,500.00
Supplies 2600	0.00	0.00	0.00	0.00	0.00
Equipment 3100	0.00	4,500.00	32,375.00	0.00	36,875.00
<b>GRAND TOTALS</b>	<b>0.00</b>	<b>8,500.00</b>	<b>46,791.00</b>	<b>1,000.00</b>	<b>56,291.00</b>

## Financials

Text used to explain any figures entered in the Disbursements Field. Use this to explain any major discrepancies between your funding and the final amount spent on the project or between expenditures outlined in the proposal and the actual expenditures.

Additional funds were required to pay for communication link expenditures. The overseas cost of installing, maintaining and using ISDN lines ultimately cost more than anticipated and required approximately \$5,500 (Approx \$1700/yr) of additional funds per site to maintain the study for the three years approved in the protocol. Also an additional \$500 was needed in personnel costs to pay a civilian psychologist to drive to one site and perform SCID exams during the absence of the military psychologist for five months.

## **Final Results**

**Protocol approval was lengthy (10 months);**

**- Protocol submitted to Local IRB Jun 2000 and Human Use Committee - Local IRB approval Jan 2001 - CIRO approval Jan 2001 - MRMC RCQ approval Apr 2001**

**Equipment procurement and setting up telecommunications infrastructure was also a lengthy process. Currently, equipment has been received and is being installed and test subjects are being recruited. There is a high potential for using VTC equipment for medication evaluations and diagnostic evaluations AMEDD wide. VTC may also be used for similar applications in peacekeeping missions such as Bosnia or Kosovo.**

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## **Projected Costs**

**To sustain the technology locally would cost approx \$1700/yr for maintaining ISDN lines and paying for use of lines during VTC evaluations.**

**AMEDD implementation would initially be as follows per site; Personnel (Psychiatrist) AMEDD resource Equipment/site 10,000 Comm Link 5,000 Total \$15,000**

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## **Comments**

**No additional comments.**

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## **TATRC Scientific Review**

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## **TATRC Acquisition Review**

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## Supporting Graphs/Charts

No Attachments