Conveyance Progress Report as of 1 April 2015

Office of the Assistant Chief of Staff for Installation Management (ACSIM)
Operations Directorate – Base Realignment and Closure (ODB)
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BRAC 2005 Recommendation

The 2005 BRAC Commission recommended the realignment of Walter Reed Army Medical Center, Washington, DC, as follows: relocate all tertiary (sub-specialty and complex care) medical services to National Naval Medical Center, Bethesda, MD, establishing it as the Walter Reed National Military Medical Center Bethesda, MD; relocate Legal Medicine to the new Walter Reed National Military Medical Center Bethesda, MD; relocate sufficient personnel to the new Walter Reed National Military Medical Center Bethesda, MD, to establish a Program Management Office that will coordinate pathology results, contract administration, and quality assurance and control of DoD second opinion consults worldwide; relocate all non tertiary (primary and specialty) patient care functions to a new community hospital at Fort Belvoir, VA; relocate the Office of the Secretary of Defense supporting unit to Fort Belvoir, VA; disestablish all elements of the Armed Forces Institute of Pathology except the National Medical Museum and the Tissue Repository; relocate the Armed Forces Medical Examiner, DNA Registry, and Accident Investigation to Dover Air Force Base, DE; AFIP capabilities not specified in this recommendation will be absorbed into other DoD, Federal, or civilian facilities, as necessary; relocate enlisted histology technician training to Fort Sam Houston, TX; relocate the Combat Casualty Care Research sub-function (with the exception of those organizational elements performing neuroprotection research) of the Walter Reed Army Institute of Research (Forest Glen Annex) and the Combat Casualty Care Research sub-function of the Naval Medical Research Center (Forest Glen Annex) to the Army Institute of Surgical Research, Fort Sam Houston, TX; relocate Medical Biological Defense Research of the Walter Reed Army Institute of Research (Forest Glen Annex) and Naval Medical Research Center (Forest Glen Annex) to Fort Detrick, MD, and consolidate it with U.S. Army Medical Research Institute of Infectious Diseases; relocate Medical Chemical Defense Research of the Walter Reed Army Institute of Research (Forest Glen Annex) to Aberdeen Proving Ground, MD, and consolidate it with the U.S. Army Medical Research Institute of Chemical Defense; and close the main post.

History

During the Civil War, the U.S. Surgeon General, William A. Hammond, conceived of the need for an Army hospital on a separate military installation in the District of Columbia. His 1862 report recommended a permanent hospital complete with a medical school and a medical museum. During the nineteenth century, the Army searched for a location for the hospital and chose the current site, which at the time was rural and isolated from the City of Washington. By 1905, at the time the land was purchased, the area contained a mixture of woodlands, farmland and summer estates.

Congressional legislation authorized construction of Walter Reed General Hospital (WRGH, now known as "Building 1") and the first ten patients were admitted on May 1, 1909. In 1923, General John J. Pershing signed the War Department order creating the "Army Medical Center" (AMC) within the same campus as the WRGH. Pershing lived at Walter Reed from 1944 until his death there July 15, 1948.

In September 1951, "General Order Number 8" combined the WRGH with the AMC; the entire complex of 100 rose-brick Georgian buildings was at that time renamed the "Walter Reed Army Medical Center" (WRAMC). In June 1955, the Armed Forces Institute of Pathology (AFIP) occupied the new Building 54 and, in November, what had been Medical Department Professional Service School (MDPSS) was renamed the Walter Reed Army Institute of Research (WRAIR). 1964 saw the birth of the Walter Reed Army Institute of Nursing (WRAIN). Former President Dwight D. Eisenhower died at WRAMC on March 28, 1969.
Starting in 1972, a new and larger hospital building (Building 2) was constructed and made ready for occupation by 1977. U.S. Presidents, Vice Presidents, Senators, Representatives and other high profile visitors all received care at this medical center. WRAMC was considered a tertiary care center and housed numerous medical and surgical specialties. It was part of the larger Walter Reed Health Care System, which included some ten other hospitals.

**Current Status**
- Installation closed effective 15 September 2011.
- Under Caretaker status: A base operations support contract has been awarded to a private company with on-site oversight from four Department of the Army Civilians.
- Proposed property division will provide land and buildings for the Department of State (DOS) and Local Redevelopment Authority (LRA) reuse. The 2015 NDAA requires transfer of the former AFIP building and immediate area in support of the protection of public health, including research.
  - Negotiations for transfer of parcel to the LRA are ongoing.
  - On 12 Feb 2015, SecDef ordered Army to endorse and submit a waiver of FMV to OMB for the DOS transfer. Legal boundaries must be redefined. A draft Letter of Transfer is being prepared.
  - In accordance with the NDAA, disposal of the public health parcel will be handled similar to a Public Benefit Conveyance: A Notice of Availability will be disseminated to eligible recipients, respondents will receive an application package and have the opportunity to promote a vision for reuse in accordance with the NDAA legislation.
- LRA Reuse Plan submitted to HUD on 23 July 2012. Revised plan was approved by HUD on 24 January 2014.
- MEDCOM Transition Team completed the redistribution of medical equipment from the hospital (Building 2).

**Property Description**
WRAMC is situated on a 110.1 acre enclosed campus located in Northwest Washington, DC bounded by Fern Street and Alaska Avenue to the north, 16th Street to the west, Aspen Street to the south and Georgia Avenue to the east. The site contains 4.6M sq ft. of hospital and admin space; many of which are historically significant. Part of the landscape itself is considered historic, such as Main Drive and the Rose Garden.

**Caretaking Status**
A staff of four Federal employees remain on the former Walter Reed Army Medical Center to oversee the decommissioning of buildings for future conveyance. The ongoing caretaker services include oversight of facilities maintenance and operation, property accountability and disposition, physical security, and environmental cleanup.

**WRAMC Environmental Clean-up**
Walter Reed Army Medical Center was not a traditional Army installation, but the property did possess contaminants such as petroleum, volatile chemicals, underground and above ground storage tanks, regulated medical waste, and hazardous waste. Additionally, the property contained a high density of medical laboratories as a result of being home to the Department of Defense’s largest medical treatment facility. Research also played a prominent role in the mission of the installation. Laboratory cleanup and decommissioning is complete. Termination of the nuclear regulatory commission license is complete and all areas have been released for unrestricted use. Two petroleum remediation projects are being closed out. The caretaker team is working closely with the District of Columbia Department of the Environment to insure appropriate actions are being taken to mitigate all known hazards.
WRAMC Reuse Plan

The historic nature of WRAMC was a key driver in the creation of the Reuse Plan. The preservation of historic buildings on the site is integral to maintaining the legacy of the important people and events associated with this property.

The site’s reuse plan calls for approx. 3.1 million square feet of development, including 90 townhomes, 1,864 multi-family units and more than 100 units for homeless veterans. More than half of the space would be devoted to residential use, a quarter for office space with the remaining for retail, institutional, creative and open space.

In the first phase, scheduled to be completed as early as 2016, several educational tenants would move in along with an ambulatory care facility and nonprofits providing housing for homeless seniors, low-income residents and veterans. Subsequent phasing through 2030 will include the development of market-rate housing, mixed-use (Residential/Retail/Office), creative space, and institutional buildings. The District anticipates approx $30.6 million in tax revenues over the 20 years following build-out.
The buildings within Walter Reed display a wide range of design characteristics and uses. Most earlier buildings are Georgian Revival, however over time additional buildings were constructed in different architectural styles in response to the needs of the garrison and mission. Based upon the buildings’ architectural merit, their association with significant events in American history such as the development of Army Medical programs and the Cold War, there are 11 buildings individually eligible for the District of Columbia and National Register listing of Historic Places.

The District of Columbia Historic Preservation Office determined that a historic district comprised of the main campus of the former garrison is eligible for listing on both the National Register of Historic Places and within the DC inventory of Historic Sites. Nomination packages have been prepared and submitted for both. There are 36 structures contributing to the proposed Historic District. Some of the more notable structures include the original hospital building with early additions (Building 1), Delano Hall which housed the Army School of Nursing (Building 11), The original Walter Reed Army Institute for Research (Building 40), the Armed Forces Institute of Pathology (Building 54) that represents a unique example of Cold War design and the Rose Garden and Main Drive that compose part of the cultural landscape.

With closure of the Walter Reed Army Medical Center, the Army and the District of Columbia Historic Preservation Office developed a Programmatic Agreement for signature in January 2013. As a part of this agreement, the Army will:

- Insure historic buildings are maintained until transfer.
- Prepare and submit both DC and National Register nominations
- Perform archaeological surveys
- Perform photographic documentation
- Provide interpretive materials such as informational panels
- Maintain a publicly accessible website for documentation
- Submit interim reports and meet with SHPO on a regular basis
WRAMC Property Conveyance Plan

The current plan calls for all remaining acreage of the Walter Reed campus to transfer in 4th quarter FY15. On 16 December 2014, a 0.32 acre parcel was conveyed under a Public Benefit Conveyance (PBC) to the DC Fire and Emergency Medical Services (DCFEMS). A 34.5 acre parcel is to transfer to the U.S. Department of State (DOS) in the 4th Quarter, FY15. In accordance with the 2015 NDAA, a Public Benefit Conveyance will transfer nine acres in support of public health including research to an undetermined recipient in the 4th Quarter, FY15. The remaining parcel of 66.25 acres is planned for transfer to the LRA in the 4th Quarter, FY15. Negotiations with the LRA on terms for an Economic Development Conveyance (EDC) are ongoing.

Property Conveyed (0.3 of 110 total acres) and Projected:

<table>
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<th>Parcel Name</th>
<th>Parcel Acres</th>
<th>Disposal Date</th>
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<td>66.3</td>
<td>4th Qtr FY15</td>
<td>LRA</td>
<td>EDC</td>
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</tbody>
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As of 1 April 2015
Key Milestones Achieved

- Clearing of Buildings and Disposal of Property Book and Non-Property Book Items. Through the combined efforts of the MEDCOM Transition Team and the ACSIM Caretaker Team, over 4.0M square feet of building space has been cleared and over 611,000 property items have been transferred to other Department of Defense organizations for reuse at an estimated savings to DoD of over $124M. Additionally, over 4,200 medical items were identified and transferred to the Humanitarian Assistance Program with over 1,170 medical items transferred to the Ukraine in FY13 alone at an estimated value of $285K. 2,700 pieces of surplus barracks furniture was transferred to the District of Columbia Office of Veterans’ Affairs for use in the District’s transitional housing for Veterans program. Final disposition is ongoing with surplus equipment transferring to nongovernmental organizations through the General Service Administration’s Limited Excess Property Program. Over 15,600 furniture items, with an estimated value of $720K, has been transported to at least five countries. 5,116 pieces of unserviceable furniture turned in to Fort Meade DRMO.

- Department of Emergency Services Training. The 110 acre property has been made available for training to members of the District of Columbia Fire and Police Departments. This arrangement has proven to be mutually beneficial to the Caretaker team and the District of Columbia. It has provided an opportunity for the District to become familiar with real property that has become part of the District’s Fire and Police responsibility. Additionally, training provides police presence to the nearly vacant installation. The United States Park Service Police K-9 unit, FBI, Capital Police Spec-Ops and Presidential Motorized Unit is also using the property for in house training. The vacant buildings, closed roads and open space provide a great venue for training.

- Department of Defense Computers for Learning Program. Over 6,500 pieces of surplus technology equipment and supporting systems were issued to approximately 25 area schools.

Building 1, WRAMC