



UNIFORMED SERVICES UNIVERSITY
of the HEALTH SCIENCES

STRATEGIC PLAN

2026 – 2029



This is a living document which undergoes timely and periodic review and revision



UNIFORMED SERVICES UNIVERSITY OF THE HEALTH SCIENCES

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I am pleased to share the Uniformed Services University of the Health Sciences Strategic Plan for 2026–2029. This plan provides the University's strategic direction for the next three years and reflects our unwavering commitment to preparing the health professionals, scientists, and leaders who will advance military medicine and strengthen our nation's security.

The strategic environment continues to evolve at an unprecedented pace. Emerging technologies, new operational concepts, and an increasingly complex global security landscape require us to think differently about how we educate, conduct research, develop leaders, and support the Military Health System. This plan positions USU to meet those challenges while remaining true to the mission that has defined our University for more than five decades.

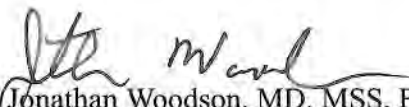
Our strategy focuses on several priorities that will guide our work through 2029. We will accelerate digital transformation across the University, modernize our educational programs to prepare graduates for future operational environments, strengthen strategic partnerships, invest in the infrastructure necessary to support excellence in education and research, enhance our financial sustainability, improve organizational effectiveness, and expand philanthropic support to create a lasting margin of excellence.

These priorities are united by a single purpose: ensuring that USU continues to provide the Military Health System with the highly skilled health professionals, innovative research, and operational expertise needed to support a medically ready force.

This strategic plan establishes the University's direction, but its success depends on each of us. Every school, college, department, center, and office plays a vital role in translating these priorities into actionable Responsibility Center level implementation plans with key metrics. I ask every member of our community to review this plan, consider how your work contributes to its objectives, and continue seeking opportunities to innovate, collaborate, and improve.

Throughout our history, USU has adapted to meet the changing needs of the nation while remaining steadfast in our commitment to excellence, service, integrity, and compassion. Together, we will continue to build upon that legacy and ensure that the University remains America's premier federal health sciences university—educating leaders, advancing discovery, and improving the health and readiness of those who serve.

Thank you for your continued dedication to our mission and to the men and women who depend on the work we do every day.


Jonathan Woodson, MD, MSS, FACS
President

As America's Federal Health Sciences Academy, the Uniformed Services University of the Health Sciences (USU) is an invaluable, indispensable, and cost-effective force multiplier. The University provides cutting-edge and digitally enabled military health education, training, research, and scholarship. Through exceptional thought leadership and direct operational support, USU enables the readiness of the Military Health System (MHS), the Services, the Combatant Commands, and the American Warfighter.

I. Introduction and Purpose:



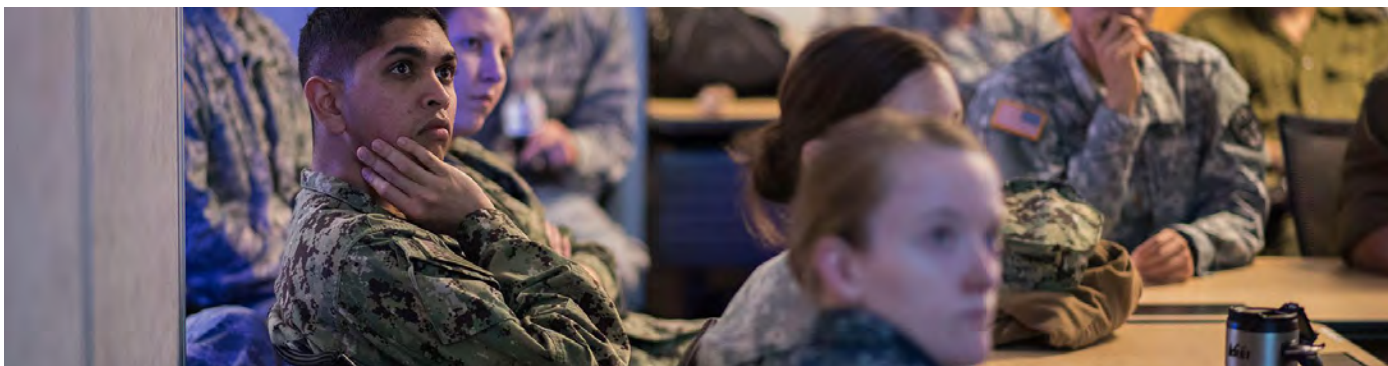
This 2026 to 2029 USU Strategic Plan addresses the evolving requirements of the National Security Strategy and the MHS. This update defines specific focus areas which serve as our institutional priorities for the next three years. Implementation of this strategy is decentralized through our Responsibility Centers, which operationalize USU's strategic objectives via their own strategies and action plans.

This Plan synchronizes the University's internal operations with the Assistant Secretary of War for Health Affairs' 2026 MHS Optimization mandates. While USU remains committed

to its core mission of health sciences excellence, this plan ensures our focus is explicitly nested within the Foundational Domains of Change. Our strategy is the roadmap to transform USU into a high-acuity readiness and force generation platform that supports the American Warfighter in a digitally transformative age.

II. References

- A. The National Security Strategy of the United States of America (2025)
- B. The National Defense Strategy of the Department of War (2026)
- C. The Military Health System Strategy (2023)
- D. Capstone Concept for Joint Operations: Joint Force 2030 (2019)
- E. JP 4-02, "Joint Health Services" (2023)
- F. Defense Planning Guidance, FY 2027 – 2031
- G. Secretary of War Memorandum, S: Enhancing Workforce Development Through the Department of War Project Patriot Pipeline (2026)
- H. Assistant Secretary of War (Health Affairs) Memorandum, S: Military Health System Optimization (2026)
- I. Military Health System Digital Transformation Strategy (2025)
- J. Middle States Commission on Higher Education Report (2023)
- K. USU Instruction 8100, "Strategic Planning Program" (2021)

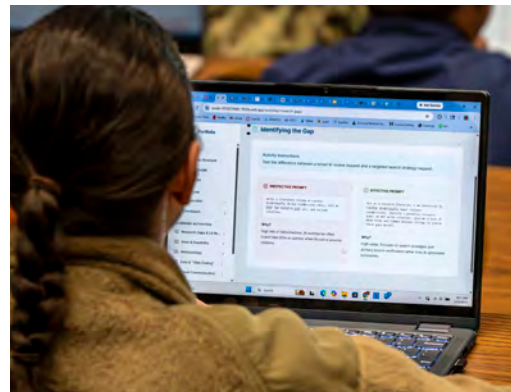


III. Background

The national security environment USU supports has shifted from counterinsurgency to the urgent requirements of Large-Scale Combat Operations (LSCO) against near-peer adversaries, necessitating a pragmatic and ambitious strategy.

This new hyper-lethal battlefield is characterized by:

- **Emerging Near-Peer Threats:** Warfare is rapidly evolving with new adversary means, resulting in an expanded, hyper-lethal battlefield and accelerated operational tempo that requires tailored support from USU.
- **The “Walker Dip” Vulnerability:** The risk of losing combat experience and best practices from the Global War on Terror through personnel attrition, amplifies the mandate for USU to adapt to modern warfare and meet MHS requirements.
- **Degraded Medical Environments:** Contested air superiority means the “Golden Hour” is unfeasible. Medical forces must prepare for Prolonged Field Care (PFC) in decentralized, hardened, or underground facilities, and increase interoperability with allied medical forces.
- **Non-Kinetic and Digital Warfare:** Warfare now includes cyberattacks on medical infrastructure, synthetic bioweapons, and neuro-cognitive warfare, all of which threaten to disrupt hospital core capabilities.



IV. Assumptions

The seven key assumptions for USU and the MHS operating environment are:

- **Constrained Resources:** USU and the MHS will continue to operate under fiscal constraints, necessitating rigorous, strategy-based justification for all funding initiatives.
- **Combat Clinical Focus:** Active, Reserve, and National Guard medical personnel will increasingly prioritize combat clinical specialties (e.g. trauma surgery, emergency medicine, anesthesia), requiring USU to enhance education and training on high-acuity skills for force sustainment.
- **Digital Integration:** The University must transform into a digital-first institution, leading the MHS in adopting AI, robotics, and predictive analytics to improve decision-making speed and upskilling agility.
- **Increased Education Demands:** Student populations and curricula will expand and evolve to incorporate technology-enabled capabilities to meet MHS force generation demands.
- **Strategic Partnerships:** USU will rely on expanded public-private and interagency partnerships to maintain clinical volume and personnel exposure to the high-acuity cases needed for wartime Joint Knowledge, Skills, and Abilities (JKSAs). USU will partner with premier academic institutions to conduct warfighter-centric research.



- **New Education and Training (E&T) Responsibilities:** IAW the referenced Secretary of War memo on “Enhancing Workforce Development Through the Department of War Project Patriot Pipeline, USU will receive additional MHS-wide E&T responsibilities, requiring a centralized role in rationalizing and accommodating Health Professions Graduate Education, increasing technical licensure, and developing career development pathways for DoW civilians and military spouses.
- **Infrastructure Threat:** Medical IT and physical infrastructure will remain targets for adversary cyberattacks and kinetic strikes, requiring resilient cybersecurity and hardened distributed learning capabilities.

V. Mission, Vision & Values

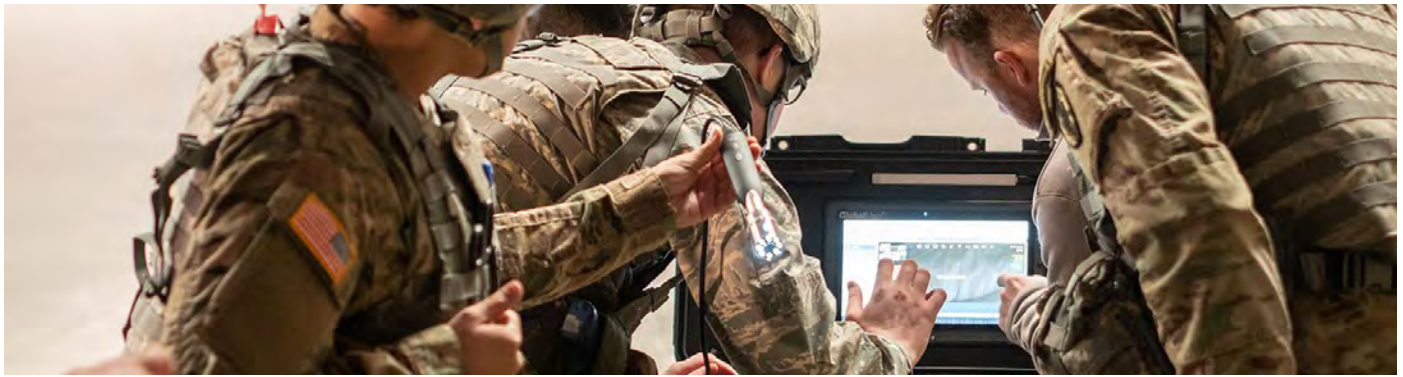
- **Mission:** To support the readiness of America’s Warfighters and the health of the beneficiary community by developing uniformed and civilian health professional leaders, conducting military-relevant research, and providing direct operational support.
- **Vision 2029:** To be a fully digital-first institution and the preeminent global leader in health sciences education and research, optimizing the readiness of the American Warfighter.
- **Values:** The core values guiding USU personnel during this period of transformation:
 - **Ethics and Integrity:** Uncompromising adherence to the moral and professional principles governing military health organizations and professionals.
 - **Selfless Service:** Faculty, staff, and students provide leadership and clinical support globally, prioritizing the health of the American Warfighter and those in harm’s way.
 - **Excellence in Scholarship:** Maintaining rigorous standards of scholarship and academic freedom as the foundation for advancing military medical knowledge.
 - **Innovation:** Creatively employing ground-breaking knowledge and emerging technologies in areas crucial to the health and readiness of the Uniformed Services and national security.
 - **Compassion and Caring:** Fostering mutual respect, courtesy, and pride in all University activities, ensuring a culture of wellness for people.



VI. Strategic Anchors: The Five Domains of Change

USU aligns all activities with the 2026 MHS Optimization Mandates:

- **Readiness:** Aligning R&D and clinical specialties to combat requirements.
- **Funding Stability:** Transitioning to predictable, POM-based funding.
- **Benefit Modernization:** Prioritizing “health over health care”.
- **Integrated Training:** Expanding public-private education partnerships.
- **Structural Optimization:** Leading the MHS digital transformation.



VII. Strategic Priorities (Key Areas of Focus)

- **Digital transformation** to ensure USU maintains the advantage of moving into the future.
 - Digital-First Posture: Transition to a “Digital-First” institution to lead the MHS in AI, robotics, and predictive analytics.
 - IT and Data Integration: Acquire and integrate IT infrastructure required to support universal credentialing and the digital integration of KSA validation data.
 - Augment & Amplify: Automate routine tasks to connect “smart humans with powerful computing,” enhancing overall institutional capacity.
 - Universal Credentialing (FY28 Metric): Achieve 100% universal digital credentialing for all health professionals and a 40% increase in workforce AI-proficiency by FY28.
- **Invest in the campus infrastructure** to secure the physical plant needed to support our core education and research mission.
 - Physical Plant Security: Execute the Facilities Master Plan and IT Master Plan to arrest infrastructure degradation and secure vital accreditation.
 - Laboratory Readiness: Achieve 100% operational certification for all Phase 1 modernized Armed Forces Radiobiology Research Institute (AFRRI) and high-acuity simulation research facilities by FY28.
- **Strengthen the curriculum** and conduct disciplined curriculum reform to ensure we produce the workforce relevant to the future of the MHS.
 - High-Acuity Focus: Modernize the curriculum to focus on LSCO, Prolonged Field Care (PFC), and contested environments, ensuring all graduates possess foundational high-acuity KSAs, such as Disease Non-Battle Injuries (DNBI) management.
 - Workforce Relevance and Leader Development: Conduct disciplined reform to ensure graduates meet the specific needs of the future MHS. This includes implementing a Joint Medical Leader Development Program focused on digital literacy, management of complex organizations, and health services administration to modernize education for healthcare leaders.
 - Capacity Expansion: Expand the annual School of Medicine (SOM) class size to 200 students, Graduate School of Nursing (GSN) enrollment by 10%, and College of Allied Health Sciences programs by 50%.
 - Proficiency Metric: Achieve 100% student proficiency in validated “Combat KSA” exams and Joint Medical Role certifications by FY28.
 - Vulnerability Mitigation: Institutionalize multi-disciplinary best practices across the total force to mitigate the “Walker Dip” vulnerability.

- **Invest in strategic partners** to co-create value—within the military, across academia and with industry.
 - ▶ Value Co-Creation: Invest in Tier-1 research, academic and industry partners (e.g., University of Pittsburgh) possessing biomedical engineering and other novel capabilities to co-create value in combat-relevant innovation.
 - ▶ Joint Products: Produce at least five joint education or research products annually that support the Joint Concept of Healthcare Support.
 - ▶ International Hubs: Develop two or more international academic hubs to enhance coalition medical readiness capabilities.
 - ▶ Clinical Exposure: Increase student and faculty exposure to high-acuity clinical cases through foreign medical facilities and partner platforms by 20%.
 - ▶ Medical Surge Strategy: Formalize the transition of the National Disaster Medical System (NDMS) Pilot to a validated Military-Civilian Medical Surge Strategy by FY28.
 - ▶ Integrated Framework: To overcome health training silos and advanced skill gaps in healthcare, establish new partnerships and strengthen existing partnerships that train, educate, or employ Service members, military spouses, and DoW civilians in critical skills.
- **Ensure financial stability and sustainment.**
 - ▶ POM-Based Stability: Transition from “soft” grant reliance to “hard” POM-funded institutional positions to ensure long-term fiscal resilience.
 - ▶ Business Model: Institutionalize a fiscally sustainable business model that re-invests Research and Development (R&D) overhead into core infrastructure.
 - ▶ Diversified Revenue: Pursue new interagency and industry funding streams and legislative authorities commensurate with other U.S. Service Academies.
 - ▶ Hard-Funded Research Positions: Achieve a 15% increase in the ratio of “Hard-Funded” (POM-based) institutional research positions by FY28.
 - ▶ Discovery Prioritization: Prioritize Survivability-Focused Discovery, including targeting medical countermeasures for the full spectrum of CBRN and radiological threats.
- **Restructure administration** and processes to achieve maximum efficiency and effectiveness.
 - ▶ Service Academy Parity: Restructure University administration, centered on the Office of the Provost, to achieve the efficiency, decision speed, and organizational parity of a premier U.S. Service Academy.
 - ▶ Efficiency Mandate: Complete a comprehensive restructuring by FY28 and achieve a 15% improvement in administrative processing speed.
 - ▶ Advocacy: Aggressively pursue legislative authorities and manning priority commensurate with U.S. Service Academies.



- Build a foundation and an alumni outreach program to support philanthropy to add/assure the **“Margin of Excellence”**.
 - The “Margin of Excellence”: Launch a private giving arm (Philanthropy Foundation) to secure a “Margin of Excellence” for high-risk discovery.
 - Foundation Charter and Seed Funding: Secure a \$10M private endowment seed and finalize the University Foundation Charter by FY28.
 - Purpose: Build a foundation for philanthropy and private gift-giving to seed innovative, student-led research and high-risk discoveries beyond Federal appropriations.

VIII. Accountability: Performance Framework

To ensure a disciplined execution of every focus area, each Responsibility Center will develop a rigorous management system comprised of:

- Objectives and Key Results (OKRs): Defining the specific goals for each Responsibility Center.
- Key Performance Indicators (KPIs): Quantifiable metrics used to track progress against the 2029 vision.

IX. Strategic Risk Mitigation

- The “Walker Dip”: Institutionalizing combat best practices to prevent the loss of battlefield expertise as personnel attrite.
- Cyber Resilience: Hardening distributed learning and IT infrastructure against adversary cyberattacks.

X. Conclusion



This implementation solidifies USU as an indispensable force generation platform and a central pillar of the Department of War’s readiness architecture. By 2029, disciplined restructuring, digital transformation, and a new philanthropy foundation will deliver the agility of a world-class U.S. Service Academy. This roadmap secures a “margin of excellence,” ensuring the University thrives on a hyper-lethal battlefield where medical success is measured solely by the survivability of the American Warfighter. By accelerating life-saving research

and preparing leaders for the high-acuity demands of the “next fight,” we provide the Nation with its most vital guarantee: a medically ready force capable of maintaining lethality in the world’s most contested environments. We can, and will, set our own destiny.