

# THE JUINIOR OFFICER CHIRONICIES

SUMMER/SYMPOSIUM 2019 | VOLUME 2 | Issue 8

> Presented by the JOAG Communications and Publications Committee

### SUMMER/SYMPOSIUM

### **EDITION**

2019



DESIGNED FOR JUNIOR OFFICERS BY JUNIOR OFFICERS

THE JUNIOR OFFICER CHRONICLES SUMMER/SYMPOSIUM 2019 | https://dep.psc.gov/OSG/JOAG/journal.aspx

THE OFFICIAL JOAG MAGAZINE

### **CONTENTS**

<u>FEATURES</u>	PAGE(S)
Message from the Chair	3
<u>Letter from the Editors</u>	
Senior Advisor Message	5
Uniform Corner.	
Recruitment and Retention Matters	8
Outreach Committee (1): Highlights from the 2019 USPHS Scientific and	<u>.</u>
<u>Training Symposium</u>	
Outreach Committee (2): Junior Officers Career Enhancement Booth	15
Outreach Committee (3): The JOAG Uniform Inspection Booth	16
Outreach Committee (4): Outreach Committee Survey Results: Engagem	<u>ient</u>
of New Officers	
<u>Upcoming Events</u>	24
REPORT FROM THE RANKS	
Education is the Key to Reducing Stigma on Alcohol Misuse and	
Substance Use Disorder	7, 23
Response to Hepatitis E Virus Outbreak in Namibia – 2018	9, 22
USPHS Symposium 2019 EHOs WORK hard and PLAY hard!	
Drownproofing for Kids	
9th Annual Symposium Pre-Conference Leadership Workshop	
Junior Officers Leading the Tuba City Surgeon General's 5K Run	
People Serving People Partnership	

- ◆ The Junior Officer Advisory Group (JOAG) is a public health professional group whose purpose is to provide advice to other Corps and non-Corps entities on interests and concerns specific to junior officers in the United States Public Health Service (USPHS) Commissioned Corps.
- ♦ The Junior Officer Chronicles (JOC) is a quarterly publication produced by the JOAG Communications & Publications Committee (CPC) JOC Subcommittee. The 2018-2019 JOC Co-Leads are: LCDR Tara Jatlaoui and LCDR Roseline Boateng. The CPC Co-Chairs are: LCDR Christine Corser and LCDR Stephanie Kenez and the Executive Committee (EC) Liaison is LT Darby Murphy.
- ♦ Send editorial comments and concerns to <u>LCDR Tara Jatlaoui and LCDR Roseline Boateng</u>.
- ♦ To contribute to a future edition, submit articles to <u>LCDR Tara Jatlaoui and LCDR Roseline Boateng</u>.
- Any opinions or thoughts presented in The Junior Officer Chronicles are solely those of the author and do not represent the USPHS, United States Department of Health and Human Services (HHS), or any other government agency.

### MESSAGE FROM THE CHAIR

Greetings Fellow Junior Officers,

I hope this issue finds you well. It is hard to believe we are more than half-way through the summer and the calendar year already! I hope everyone has taken the time or is planning to take some time this year to rest, relax, and recharge. No matter what your personal version of rest and relaxation is, I hope you are able to make time to do it. We all need and deserve a break every now and then. I understand it can be hard to take leave or plan vacations, but it is important to take some time to take care of ourselves (both mentally and physically) and our families. It is very easy to become wrapped up in our day-to-day duties, family life, school, errands, to do lists, etc. and forget to or not make time for ourselves. If you want to continue to be successful both professionally and personally, it is vital to recognize and take the time to focus on you. Take care of your mental and overall health and happiness and it will show in every other aspect of your life!



As we approach the end of the fiscal year for the federal government and operational year for JOAG, it is a good idea to start thinking about everything

you need to finish by the end of September and planning for the upcoming fiscal year. Whether you are working on readiness, deployment issues, promotion, etc., there are numerous resources available to assist with these tasks, from JOAG, your PACs, CCHQ and fellow officers.

Once again, this JOC issue contains many great stories from our fellow Junior Officers throughout the Corps. It also includes an interview with another one of our fantastic Executive Committee members. The Executive Committee, all the Voting Members, and many non-voting committee members work tirelessly to make the many activities that JOAG does possible, and I am extremely appreciative of all of their efforts. I hope you are finding a way to be involved with Corps activities, whether with JOAG or another group, and if you have a story you would like to share in a future issue, please share that with our Communications and Publications Committee, whose contact info can be found on pages 2 and 4 in this issue.

As this is my last welcome message as Chair, I want to say Thank You! Thank you for this wonderful opportunity to serve my fellow Junior Officers and the Corps. It has been an honor, a pleasure, and extremely busy, but immensely rewarding. I never thought I would be in this position, but I have enjoyed the experience, made more than my share of mistakes, tried to learn from them, and made many friends along the way.

Lastly, but not least, thank you to all the 2018-19 Voting Members! Working with you all has been a highlight of my time in the Public Health Service. As I look to the future, my sincerest desire is for both JOAG and the Corps to continue to grow, develop, and innovate.

I want to wish all the best to the 2019-2020 Voting Members, Executive Committee, and our next Chair, LCDR Mutiu Okanlawon!

Yours in Service,

LCDR Chris M. Sheehan, MS, MBA, NREMT JOAG Chair 2018-19

### LETTER FROM THE EDITORS

Hello fellow Junior Officers!

We hope you are enjoying your summer. For those of you who participated in the Symposium, welcome back. We hope this edition is a reminder of all the inspiring messages you received and motivates you to act on goals you set for the next year. For those of you who were not able to participate, we hope this edition provides the information you need to assess resources you may be seeking and to inspire you to attend next year.

We would also like to congratulate all officers successful on recent promotions. For those who will be preparing for next year, please find some useful information in these pages on how to become more involved with PHS and JOAG!

We would like to introduce one of our newest reviewers, LCDR Jeff Ward, who helps make this publication possible.

LCDR Jeffery Ward: I am a pharmacist at the Phoenix Indian Medical Center (PIMC). I graduated with a B.S from Boise State University and received my Pharm. D. from Idaho State University. I have worked at 3 different Indian Health Service locations, and currently spend most of my work days at the outpatient pediatric pharmacy at PIMC. I also am involved with the pharmacy ran latent tuberculosis bacterial infection (LTBI) clinic providing patient services to prevent active TB infections. My spare time is mostly made up of errands, playing with my kids, working on go karts, or attending to my needy vehicles.



We received numerous submissions showcasing the exciting work of our officers.

We are very excited to share the stories of leadership, service, integrity and excellence of the junior officers. We would like to thank everyone who took time out of their busy schedule to submit, edit or in any way contribute to the publishing of this Summer/Symposium Edition.

We welcome your feedback for ways we can better serve you. Submissions to be included in the 2019 Fall Edition can be sent to both <a href="mailto:kgz4@cdc.gov">kgz4@cdc.gov</a> and <a href="mailto:roseline.boateng@ihs.gov">roseline.boateng@ihs.gov</a> with the subject line: "2019 Fall Edition JOC."

We appreciate your support and thank you for your contribution to JOAG's premier magazine by junior officers for junior officers.

Happy reading!

JOC Co-Leads.

Roseline and Tara

### SENIORADVISOR<sub>MESSAGE</sub>

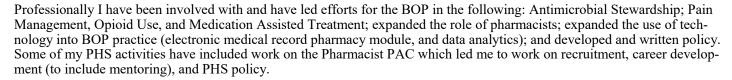
Greetings Officers,

My name is CAPT Mike Long, I am a Pharmacy Officer, and I am proud to be your JOAG Senior Advisor. As many of us don't know each other yet, I hope to use this space for you to at least get a little background on me. Before I say anything else, I want to thank and acknowledge the great mentorship that CAPT Sara Newman has given JOAG over the past few years. I hope I can measure up to the fantastic example she has set.

I first learned of the PHS through a recruiter who came to my pharmacy school, the Philadelphia College of Pharmacy, at the invitation of our Assistant Dean. Not knowing what direction I wanted to take in pharmacy, I figured I would apply for the JRCOSTEP program and see what happened. I was selected as a JRCOSTEP at St. Elizabeth's Hospital in Washington, DC. I then applied for and was selected for SRCOSTEP by the Federal Bureau of Prisons in 1992. At that time, the BOP was not part of my career plans. I figured I would go to the US Penitentiary in Terre Haute, IN (not even knowing where that was), fulfill my repayment obligation, and then transfer to IHS. Then maybe someday I would end up in DC doing something – maybe working for the FDA, and never going back to school. I could not have been more wrong! For starters, 10 years after my pharmacy degree I earned my MPH from the University of North Carolina (go Tar Heels)!

Since Terre Haute, I have spent my entire career in the BOP in Las Vegas, NV (Federal Prison Camp Nellis), Butner, NC (Low Security Federal Correctional Institution, and Federal Medical Center), Devens, MA (Federal Medical Center), and back to Butner. During that time I have served as a Staff Pharmacist (twice), Deputy Chief Pharmacist, Chief Pharmacist (twice), and Regional Chief Pharmacist. One could argue those were just my base jobs, as with most PHS officers the positions gave me wonderful opportunities to be a

base jobs, as with most PHS officers the positions gave me wonderful opportunities to be mentored, to mentor, to explore many of my interests in the Corps, to improve clinical services, and to increase the availability of care given to our patients.



None of this has been possible without the support of my family. I have been married for 24 years, and have two sons -18 and 20. We all enjoy the outdoors - particularly hiking and biking. My oldest was a swimmer for many years while growing up so I became a USA Swimming Official and still officiate both high school and USA Swimming meets.

As I move forward with my role as Senior Advisor my basic goals over the next three years are 1) provide mentorship to JOAG and Junior Officers in general, 2) provide guidance to the JOAG leadership as they help to lead the Corps in relation to the ASH and Surgeon General's priorities, and 3) assist the JOAG leadership in advocating for Junior Officers.

As the promotions have just been announced, I would like to congratulate those who have recently been promoted, your achievements are noteworthy and should be celebrated. We look forward to your continued growth and leadership in the future as it is not what you have done to be promoted but what you are expected to do. For those who were not promoted this year, your work is just as important. Do not become frustrated, instead take the time to re-evaluate your work and how it is presented. If you do not have a mentor, contact your PAC to get one. If you have a mentor, and they are not responsive to you, request a new one. If you are not sure where to start, you may contact me and I will help.

Over the next few years, I will be using this space to provide additional guidance and advice to JOs. If there is something you feel I should address I welcome suggestions. Thank you again for providing the trust in me to be your Senior Advisor. I look forward to meeting you soon.

Mike



### UNIFORM CORNER

#### **Service Dress Blue Modifications**

LDCR Julie Smoot, Medical Technologist, Bureau of Prisons

The Service Dress Blue uniform may be modified in several ways. One option is to wear the Navy Black Sweater in place of the Service Dress Blue (SDB) Jacket. A second option is to wear the Black Windbreaker in place of the SDB Jacket. The Windbreaker must be zipped at least ¾ closed at all times when worn. The Army Black Cardigan is also a modification option, although it may only be worn indoors. For instance, the SDB Jacket could be worn while outside and replaced by the Army Black Cardigan once inside. The Army Black Cardigan must be worn with all buttons buttoned. If the Windbreaker or the Navy Black Sweater is worn as a modification to the SDB, then the black garrison cap or the beret may be worn, however the beret is being phased out as of January 1, 2020. The Combination Cover may be worn with the standard SDB or its modifications. Ladies, do be mindful of the fact that the current "bucket" style Combination Cover will also no longer be authorized after January 1, 2020, and will be replaced by the new female Alternate Combination Cover, which is similar in style to the male Combination Cover.

All bags used while in SDB must be hand carried. Backpacks should be carried in the left hand to facilitate saluting. Women's handbags should match the shoe color worn, so with a modification of the SDB, a black bag would be carried to match the black shoes that accompany the uniform. The women's handbag should be carried over the left forearm, placing the top of the handbag at waist level.

Women's handbags have very specific regulations. They must be plain in color, made of leather or synthetic leather, be rectangular in shape, and have a flap closure. Exotic materials, ornamentation, decorative stitching, logos and buckles, and/or zippers are not authorized. Women's handbags may be purchased from commercial sources if they meet all of the required criteria. For a full description of women's handbags you can see pg. 34 of CCI421.02, "Uniforms for Female Officers" (https://dcp.psc.gov/ccmis/ccis/documents/CC421\_02.pdf).

When outer garments, such as the Windbreaker, are worn, a few other accessories are authorized. When outside and in outer garments, plain black gloves, which must be worn at all times and never carried, and ear muffs may be worn, as well as a plain white scarf. Black umbrellas with a black handle that are collapsible, small, and plain may also be carried with the SDB and its modifications.

Please reference the following policies for full uniform information:

CCI 421.01, Uniforms for Male Officers: <a href="https://dcp.psc.gov/ccmis/ccis/documents/CC421\_01.pdf">https://dcp.psc.gov/ccmis/ccis/documents/CC421\_01.pdf</a> CCI 421.02, Uniforms for Female Officers: <a href="https://dcp.psc.gov/ccmis/ccis/documents/CC421\_02.pdf">https://dcp.psc.gov/ccmis/ccis/documents/CC421\_02.pdf</a> CCI 412.01, Uniforms and Appearance: <a href="https://dcp.psc.gov/ccmis/ccis/documents/CC412.01.pdf">https://dcp.psc.gov/ccmis/ccis/documents/CC421\_01.pdf</a>

### Education is the Key to Reducing Stigma on Alcohol Misuse and Substance Use Disorder

LT Marie P. Cetoute, Clinical Social Worker, U.S. Immigration and Customs Enforcement Health Service Corps LT Candice T. Karber, Program Management Officer, Substance Abuse and Mental Health Services Administration

During the 54th Annual USPHS Scientific and Training Symposium, we had the distinct honor of presenting our poster that focused on the prevalence of alcohol abuse and other drug use among social workers. As social workers, we wanted to understand and quantify how this topic affects our profession on a personal level. We performed a literature review to identify qualitative and quantitative data on alcohol abuse and other drug use among social workers and identify strategies to address prevention and resiliency. The ultimate goal was to address the stigma surrounding this topic and to recognize resources for those who may need it.

After completing the literature review, we discovered published studies on alcohol misuse/abuse and other drug use disorders among social workers were limited, as evidenced by the sparse number of and the years between articles. A total of 19 research articles were reviewed from 1980-2018. One study reviewed data points from a national survey of 668 randomly selected National Association of Social Work (NASW) members, and reported 21% of social workers recognized drinking was a problem at some point in their lives and



2019 Symposium Poster Presentation - The Prevalence of Alcohol Abuse and Other Drug Use Amongst Social Workers (LT Marie P. Cetoute and LT Candice T. Karber)

8% sought help. In that same study, 13% used pain killers at least some of the time, 8% used tranquilizers, 6% used marijuana, 2% used opiates/narcotics, and 17% experienced distress. The distress was defined as substance abuse, emotional problems, and/or physical illness. Those identified as distressed, were more likely to experience difficulties in other areas of their lives (e.g., workplace dissatisfaction and low self-esteem) and very few sought help for alcohol or other drug problems<sup>1</sup>.

The literature review confirmed alcohol misuse/abuse and other drug use disorders are prevalent in the social work profession. Although specifically focused on social workers, the data were very similar to what is found in the national average and across other professions. Social workers experienced an exacerbation of behavioral, physical, and social problems, which affected their personal and professional lives. Comparable to the general public, social workers shared factors that contributed to under-reporting: fear, guilt, and embarrassment. The qualitative data revealed that the fear of ones' license resulted in the struggle of remaining silent and not seeking help. In the literature, there was a slightly greater risk of social workers keeping silent and not promptly addressing their problems. This was partly due to societal messages that create a self-imposed expectation to uphold a "must save the world" mentality with limited educational or professional focus on self-help.

### RECRUITMENT & RETENTION MATTERS

### **Recruitment Efforts of the Commissioned Corps: A Success Story**

LT Fengyee Zhou, Pharmacist, Indian Health Service

When I first came to Whiteriver Service Unit (WRSU) as a pharmacy student on clinical rotations in September 2015, what impressed me the most was the scope of practice of pharmacists at the site. As a student, I was taught that one of the most progressive aspects of pharmaceutical care involves collaborative practice agreements to allow pharmacists to practice at the top of their licensure to manage patients' chronic disease states. For me to arrive on rotation at an Indian Health Service (IHS) site and see the pharmacists practicing this on a daily basis, brought that didactic concept to life.

When I arrived at WRSU, I was immediately engaged in all aspects of pharmacy care. Some of the activities I completed as a student included: counseling patients on all medications, administering immunizations to patients of all ages, conducting full visits with anticoagulation patients, shadowing pharmacists in diabetes care, developing chronic pain care plans, sharing recommendations with providers, presenting a monograph to the Pharmacy and Therapeutics Committee, hosting my own radio show, and participating in a door-to-door campaign educating the community on diabetes.

Furthermore, I had the opportunity to work alongside pharmacist officers in the USPHS. I distinctly remember my preceptor LCDR Landon Sams sitting down with me one day to review everything about the Commissioned Corps. We discussed career progression opportunities (interagency transfers, multiple OPDIVs), TDYs and deployments, officership activities (Color Guard, recruitment booths), and the sense of pride in serving both an underserved/ underprivileged population and your country simultaneously. I similarly recall the student program coordinators demonstrating interest in me as a student and potential officer, including following up with me throughout my other rotations and around graduation time to discuss available employment and commissioning opportunities.

These discussions and conversations – my one-on-one preceptor talk and continued follow-up with student program coordinators – evoked introspection as I considered what I wanted to achieve throughout my career as a pharmacist and how I can maximize my potential to provide



Pharmacy student Fengyee Zhou and his preceptor LCDR Landon Sams in the pharmacy department at Whiteriver Service Unit, October 2015

patient care. Ultimately, to see the dedication of pharmacists at WRSU delivering patient care and developing innovative practices while simultaneously serving as officers inspired me to want to do the same one day. In December 2017, that dream became a reality when I was commissioned into the USPHS.

I share my story because it speaks to the power of strong recruitment efforts. As junior officers, consider your impact on prospective students and USPHS candidates. Your impact can take many forms across a spectrum: it could be a formal presentation to students at a career roundtable, or it could be as simple as an informal discussion about how you contribute to the mission of the USPHS. I know that if it were not for the passionate officers I interacted with on rotation and the strong recruitment efforts of the student program, I would not be sharing this experience with you today.

### Response to Hepatitis E Virus Outbreak in Namibia – 2018

LCDR Matthew Goers, Epidemic Intelligence Service Officer, Centers for Disease Control and Prevention LCDR Leigh Ann Miller, Associate Director for Science, Centers for Disease Control and Prevention

In December 2017, a hepatitis E virus (HEV) outbreak was declared in Khomas region, Namibia. By March 2018, oth-

er regions in Namibia began to declare outbreaks, and as of January 2019, seven of Namibia's 13 regions have declared outbreaks with nearly 5,000 reported cases and 41 deaths (including 18 deaths in pregnant women). Hepatitis E is a liver disease transmitted via the fecal-oral route, primarily through intake of contaminated water. Hepatitis E symptoms include jaundice, abdominal pain, diarrhea, and fever. While Hepatitis E is rarely fatal, pregnant women are particularly vulnerable with a case fatality rate of 10-30%.

In the Namibia outbreak, most HEV cases (69%) and deaths (73%) have been from Khomas region, with almost all cases coming from the informal settlement areas of Havana and Goreangab on the northeast border of Windhoek. Since the outbreak was declared, Namibia's Ministry of Health and Social Services (MoHSS), City of Windhoek (CoW), and other partners have increased hygiene messages in these areas, promoted awareness campaigns, and distributed soap and chlorine tablets. Furthermore, large-scale solid waste removal projects were conducted in the affected approaching a household in the informal settlement area of Havana areas, additional public toilets constructed, and city



LCDR Matthew Goers (left) and LCDR Leigh Ann Miller (right)

water pipes extended further into Havana and Goreangab. Despite these interventions, HEV cases continued to be reported in these areas, with approximately 20-30 cases per week.

Given the protracted nature of this outbreak, and the risk of further spread to other areas, MoHSS requested CDC's technical assistance in evaluating its HEV surveillance system and conducting a knowledge, attitudes, and practices (KAP) survey to better understand current conditions in the informal settlements of Havana and Goreangab. In reviewing the surveillance system, we noted a lack of standardization across regions that limited comparing variables between different areas. This led to delays in creating situation reports for use by MoHSS and other partners. We then assisted the national surveillance officer in updating Excel-based line lists to ensure uniformity across regions, adding validation to limit errors and formulas for automatic analysis of data to streamline creation of situation reports.

The KAP survey was designed to describe water, sanitation, and hygiene (WASH) conditions among households in the informal areas and general knowledge, perceptions, and practices related to WASH and HEV. During the survey, testing of household water and tap stands and limited environmental sampling were included to determine the quality of drinking water and the presence of HEV in specific environmental reservoirs. In total, representatives from CDC, CoW, MoHSS, and Namibia's Field Epidemiology Training Program (FETP) interviewed 624 households.

### USPHS Symposium 2019 EHOs WORK hard and PLAY hard!

LT Sandra Carpio, Environmental Health Officer, Food and Drug Administration

Work, work, work...! This year, for the first time, the Environmental Health Officer PAC was able to provide all PHS officers with the opportunity of taking a National Environmental Health Association (NEHA) credentialing exam during the 2019 USPHS Scientific and Training Symposium. The effort was coordinated by the EHOPAC Symposium Planning Workgroup. The planning process took several months and required coordination with Symposium Planners, NEHA and the applicants. There were seven possible credentials available, and a select group of officers stood up to the challenge and registered to take examinations to become Registered Environmental Health Specialists (REHS), Foodborne Outbreak Investigators, and Certified Professionals in Food Safety. During the months leading to Symposium, a total of five Environmental Health Officers and one Health Service Officer worked very hard preparing for the challenge. The REHS test was a fourhour endeavor, whereas the other two certifications took two and a half hours to complete. The six officers met once again with their destiny. Uncertain of what the outcome was going to be, but hopeful and with a great attitude they met that morning to test their knowledge and experience. Even though we don't have official results of these tests, we are certain that these officers will be very successful in their careers and know that they completed the task towards career progression.

Play even harder! The EHOPAC had two fun activities during Symposium. First, during the two-hour break on Category Day, EHOs participated in an EHO Detective Scavenger Hunt. EHOs were divided into small groups and were tasked to solve clues at 11 different stations scattered at booths in the Exhibit Hall. EHOs had to use their environmental health skillsets to unlock a clue at each station. At one of the stations, EHOs were directed to use a water test kit to measure the free halogen concentration; in this scenario, the sample water was collected from an interactive recreational water facility and groups had to determine if the water chemistry was in compliance. Each station revealed a letter to uncover a hidden message. Partnerships are essential in Public Health!



King, LT Kathryn McNamara, and LT Christine Lloyd



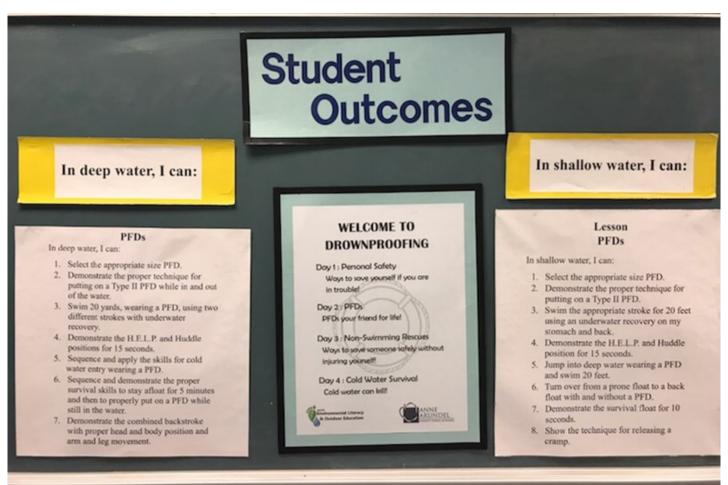
Left to right: LT Christine Lloyd, LCDR Christine Williams, LCDR Laura Annetta, LCDR Beth Wittry, LT Krista Ferry, LCDR Adrienne Eastlake, LCDR Catherine Beaucham, LT Ronan King, LT Sandra Carpio and LT Steven Merit

### **Drownproofing for Kids**

LCDR Carla Chase, Senior Health Insurance Specialist, Center for Medicare and Medicaid Services

When my 5<sup>th</sup> grader asked me to chaperone her school field trip to the pool for "drownproofing", my thoughts immediately wondered how and why would she need this type of training? I pondered, "Would she have to touch the bottom of the pool or be bounded hand and foot and have to get out of the water without assistance?" Through this class, I learned that drownproofing for these 5<sup>th</sup> graders is a technique for surviving in aquatic adversity situations without sinking or drowning. They were taught concepts and skills to help them increase their chances of survival in an emergency.

The American Red Cross reported that the fourth leading cause of accidental death in the United States is drowning. Approximately 5,000 people drown each year nationwide. In 2014, a global report on drowning indicated that in the United States, drowning was the second leading cause of unintentional injury death in children aged 1–14 years. The World Health Organization (WHO, 2019) stated that coastal drowning in the United States accounts for \$273 million each year. The CDC's 1999-2010 report indicated that Black or African American individuals are more likely to drown than individuals of other races.



### 9<sup>th</sup> Annual Symposium Pre-Conference Leadership Workshop: "Realizing Your Potential for Impactful Leadership"

LCDR Uruaku Obasi, Field Medical Coordinator, U.S. Immigration and Customs Enforcement Health Service Corps

The 9<sup>th</sup> Annual Leadership Workshop took place on May 7, 2019, as part of the USPHS Scientific & Training Symposium Preconference in Minneapolis, MN. This year's theme of "Realizing Your Potential for Impactful Leadership" was thoughtfully designed as a continuation of last year's leadership workshop theme of "Lead from Where You Are". The planning committee set out to answer the question of "how" to execute and lead. The full day workshop was power-packed from start to finish, including opening and closing keynotes from senior leadership in the Office of the Assistant Secretary of Health (OASH), two leadership panels, lunch with a leader, and a facilitated session with Franklin Covey®.

The morning session featured an inspiring opening keynote address from ADM Brett Giroir, Assistant Secretary for Health (ASH), who took participants on a dynamic journey of how he has taken the helm in the OASH. The ASH energetically described initiatives he is working on, such as assessing the status of the Corps and planning for modernization, while also providing pointed advice on how to execute goals and

ADM Brett P. Giroir, ASH, providing the opening keynote address

measure progress. CAPT Jeanean Willis-Marsh moderated the ever-popular Chief Professional Officer (CPO) Panel which included, RADM Ed Dieser (Engineer); RADM Ty Bingham (Pharmacist); CAPT Suzan Gordon (Dietitian); and CAPT John Eckert (Scientist). The CPO Panel was followed by the "Leading from the Public Health Front Lines"

2019 Leadership Planning Committee (left to right): RADM David Goldman, CAPT Jason Woo, CAPT Meena Vythillingam, CDR Andrew Fine, LCDR Tiffany Pfundt, LCDR Mateusz Karwowski, LCDR Mark Libatore, LCDR Katie Watson, LCDR Uruaku Obasi; absent-RADM Kelly Taylor

Panel that included CAPT Kis Robertson Hale (Veterinarian); LCDR John Pesce (Scientist); Dr. Carlota Medus of the Minnesota State Department of Health; and CAPT Meena Vythilingam (Physician) as moderator.

The Lunch and Learn with Leaders (L3) was a new feature this year. Participants shared their lunch time with a selected a leader of interest based on their leadership experiences with the following events: PHS Athletics - CDR Evan Shukan (Veterinarian) and LCDR Jessica Fox (Pharmacist); FDA Naloxone Training - CAPT Nina Mezu-Nwaba (Pharmacist); Puerto Rico Deployments-RADM Brandon Taylor (Pharmacist) and CAPT Holly Williams (Nurse); CDC/ASPR Ebola Assessment Team - CDR Duane Wagner (Nurse); Unaccompanied Minor Mission - CDR Johnathan White (HSO); IHS Area Office Funding Lapse - CDR Michael Verdugo (Pharmacist);

Continued on next page



Chief Professional Officer Panel (left to right): CAPT Suzan Gordon (Dietitian), CAPT Jeanean Willis-Marsh (HSO), RADM Ed Dieser (Engineer), RADM Ty Bingham (Pharmacy), and CAPT John Eckert (Scientist)

and Youth Violence Prevention- Coral Garner (Minneapolis Department of Health).

Patrick Leddin from Franklin Covey® facilitated the afternoon session on the "Four Disciplines of Execution®," also known as "4DX." Mr. Leddin guided participants through the 4DX process for identifying and executing their critical priorities. By the conclusion of RADM Sylvia Trent-Adams, PDASH giving the workshop, participants were able to apply the principles of focus, leverage, engagement, and accountability to construct their own "wildly important goal" to execute. RADM Sylvia Trent-Adams, Principal Deputy Assistant Secretary for Health (PDASH), effectively tied together the day's activities while providing a thought-provoking closing keynote address.

Overall, the workshop was a success. ADM Giroir's opening keynote and the interactive networking lunch session received exceptionally high reviews. Junior officers comprised 65% of attendees. Post-workshop surveys suggested the following topics for future workshops: time management/work-life balance, dealing with difficult people, emotional intelligence, motivational leadership, and conflict resolution. Look out for opportunities to assist; the tentative date is Monday, June 15, 2020 in Phoenix, AZ.



Patrick Leddin of Franklin Covey facilitating the "The 4 Disciplines of Execution"



the closing keynote address



Junior Officers constructing their "wildly important goal"

### Highlights from the 2019 USPHS Scientific and Training Symposium

LCDR Beth Wittry & LT Lusi Martin-Braswell
Outreach Committee Co-Chairs, Junior Officer Advisory Group

The 54<sup>th</sup> USPHS Scientific and Training Symposium was held at the Minneapolis Convention Center in Minneapolis, MN, May 6-9<sup>th</sup>, 2019. The Junior Officer Advisory Group (JOAG) was in full force with over 70 junior officers volunteering at several booths, a community service event, and the annual in-person JOAG General Meeting.

During the Symposium, esteemed visitors to JOAG-sponsored events included ADM Brett Giroir, Assistant Secretary for Health; RADM Sylvia Trent-Adams, Principal Deputy Assistant Secretary for Health; and VADM Jerome Adams, Surgeon General. In addition, over 400 officers attended the various JOAG-sponsored events.

The <u>Uniform Inspection Booth (UIB)</u> provided uniform inspections for officers. Before the Anchor and Caduceus Dinner, many of the attending officers took advantage of their services to ensure their dinner dress uniforms were in compliance with the uniform policy, and the UIB volunteer specialists ensured they looked sharp. The <u>Junior Officer Enhancement Booth (JOCEB)</u> offered JOAG resources about professional development, including an interactive Promotion Checklist to assist officers in capturing impactful statements for their promotion documents. The <u>Merchandise Booth</u> was a one-stop shop to stock up on popular JOAG swag and featured two new items: 1) USPHS glassetched picture frames and 2) stainless-steel reusable straws.

Despite rainy weather, and keeping in line with its Symposium tradition, in conjunction with <u>People Serving People</u>, the JOAG was able to successfully complete a local area **community service project**. The JOAG also took part in a new challenge known as the "**Instagram Scavenger Hunt**," that calls for junior officers to take pictures showing the Corps values and post to the JOAG's Instagram page. This year's JOAG Instagram Scavenger Hunt winner was LCDR Linzi Allen.

The JOAG's annual in-person General Meeting was held on the last day of the Symposium. Junior officers networked with each other and the Corps senior leadership. RADMs Schwartz and Orsega spoke to junior officers about the future of the Corps and imparted words of wisdom. During the JOAG General Meeting, junior officers broke off into their respective categories and had small group sessions with their respective Chief Professional Officers (CPOs). The CPOs listened to junior officers' concerns and offered guidance and recommendations.

The 2020 USPHS Scientific and Training Symposium will be in Glendale, AZ. Planning efforts are already underway to ensure the junior officer experience continues to be extraordinary and fruitful. If you are interested in learning more about JOAG or getting involved, visit https://dcp.psc.gov/OSG/JOAG/.

#### **Junior Officers Career Enhancement Booth**

LCDR Mandy Kwong & LT Yen Phan Junior Officer Enhancement Booth Co-Leads

During the 2019 USPHS Scientific and Training Symposium in Minnesota, the Junior Officers Advisory Group (JOAG) Junior Officers Career Enhancement Booth Workgroup and fellow officer volunteers provided junior officers (JO's) with resources and advice on career and professional development. At the booth, JO's received written materials and information regarding each of the JOAG committees, as well as JOAG initiatives such as the JOAG Job Shadowing Program and the JOAG Peer-to-Peer Network. This year, the workgroup created the "JOAG Promotional Checklist," which offers a comprehensive list of items that JO's must consider in preparation of their promotion package, including a tracker for documenting achievements throughout the year. The booth was a success. We enjoyed the networking opportunities with over 200 officers who visited the booth. Among the guests who visited were ADM Giroir and RADM Giberson, who were very complimentary with the work that JOAG is doing to support JOs. RADM Giberson also requested a copy of the promotional checklist as a souvenir!



LT Meron Tsige with ADM Giroir



LT Yen Phan with RADM Giberson

#### The JOAG Uniform Inspection Booth

LT Eric Mangahis, Safety Engineer, Center for Medicare Medicaid Services

One of the tenants of being a member of any uniformed service is esprit de corps, a sense of unity and common interest. What better exemplifies this unity than the uniform that every USPHS officer wears?

Proper wear of the uniform takes time and effort. For those officers stationed outside the Washington metropolitan area there may not be the option of asking other officers for help with uniform details. Even for prior service officers, having to adjust to the specifics of USPHS uniform regulations can be a challenge.

That is where JOAG and the Uniform Inspection Booth (UIB) at the USPHS Scientific and Training Symposium fit in. The UIB gives junior officers the opportunity to teach fellow officers of all ranks the proper wear of the USPHS uniform. Armed with rulers, a binder full of uniform regulations, images, and PowerPoint presentations of proper uniform wear, 37 junior officers volunteered their time at the USPHS Symposium to answer



From left to right: ADM Brett Giroir, LCDR Carlos González-Mercado, LCDR Laura Annetta, LT Eric Mangahis

questions regarding uniform regulations, and provide informal uniform inspections. Both junior and senior officers were also able to test their uniform knowledge by identifying errors on uniforms displayed at the booth.

This year, the UIB was available the evening of the Anchor & Caduceus Dinner. For many officers, dinner dress uniforms are only worn one to two times per year. UIB volunteers were on hand to assist fellow officers in proper placement of their miniature medals and to properly convert their Service Dress Blues (SDBs) to Dinner Dress Blues (DDBs).

The UIB was also honored by visits from many of the Commissioned Corps leadership, including the Assistant Secretary for Health, ADM Brett P. Giroir; the Principal Deputy Assistant Secretary for Health, RADM Sylvia Trent-Adams; and the U.S. Surgeon General, VADM Jerome M. Adams.

Regardless of whether it is Service Khaki, Summer White, Service Dress Blue, Operational Dress Uniform, or Coast Guard Blue, our uniforms are the common thread that unite us all. Always remember to wear your uniform with pride and distinction!

### **Outreach Committee Survey Results: Engagement of New Officers**

LCDR Cindy Chee, LCDR Ji Hyun LaRose & LT Daniil Marchuk Outreach Committee, New Officer Subcommittee

The Junior Officer Advisory Group (JOAG) Outreach Committee is charged with connecting new commissioned Junior Officers (JOs) to JOAG activities. During the Officer Basic Course (OBC) Open House, the Outreach Committee's New Officer Subcommittee operates an informational booth on behalf of JOAG. At the OBC Open House, JOAG representatives meet new officers for the first time to provide information about JOAG initiatives and invite officers to register for the JOAG Listserv. Thereafter, the New Officer Subcommittee sends a welcome email to new officers who register for the JOAG Listerv. The welcome email includes informational flyers and encourages new officers to volunteer with JOAG committees or with other opportunities sent through the JOAG Listserv.

JOs participation and contributions are essential to JOAG's success. We know there are barriers that prevent JOs from participating in JOAG activities. As a result, we surveyed fellow officers to gain a better understanding of what prevents their involvement. The JOAG's New Officer Subcommittee sent out a six-question survey to 230 new JOs who signed up for the JOAG Listserv during the April 2017 to February 2019 OBC Open Houses. The officers were sent the survey six to twelve months after their commission to receive feedback on their JOAG involvement. Ninety-eight officers (43%) completed the survey.

The top five agencies for respondents were: (1) Indian Health Service 46%, (2) Food and Drug Administration 16%, (3) National Institutes of Health 9%, (4) Centers for Disease Control and Prevention 6%, and (5) Federal Bureau of Prisons 3%. Interestingly, of those who responded, 25% were stationed in remote and/or isolated hardship areas. The majority of JOs reported the JOAG booth and resources at the OBC Open House were helpful.



Continued on next page

### **Outreach Committee Survey Results: Engagement of New Officers** (Continued from page 17)

The survey was designed to evaluate the extent of JOAG engagement and potential barrier(s) inhibiting JOAG involvement. Survey results showed that about one-third of respondents were currently engaged with JOAG through one of its nine committees.

70% of those surveyed responded that they were not involved in any JOAG activities. This statistic poses a challenge for the JOAG committees, and presents us with a great opportunity for improvement in our outreach efforts to engage newly commissioned JOs. The various reasons for lack of JOAG involvement were as follows:

- Competing priorities that did not allow time for JOAG participation
- Lack of supervisor/agency support
- Lack of information on JOAG committees
- Officers focused on their primary duties
- No vacancies in the JOAG committees of their interest

Lastly, when officers were asked what services or programs JOAG could provide to facilitate and improve JO's connection with JOAG or the officer community, JOs provided excellent recommendations, including:

- A sign-up sheet for JOAG committees at OBC
- More accessible JOAG meeting times
- Local site events
- Small scale seminars or workshops
- Better introduction to JOAG and its committees, and how new officers could join the committees
- New Call to Active Duty webinars or information sessions
- A checklist of key action items to accomplish within the first year of commissioning and in-person meeting times or phone meetings on a regular basis

Through this survey, JOAG received invaluable feedback on ways to improve its outreach efforts to meet the needs of JOs seeking avenues for involvement. The Outreach Committee looks forward to further discussing ways to implement the recommendations provided to better serve and support JOs, especially officers stationed in remote and/or isolated hardship areas.

If you have a special interest in the Outreach Committee mission, and would like to assist with improving JOAG outreach efforts, please contact LCDR Beth Wittry and LT Lusi Martin-Braswell.

### Junior Officers Leading the Tuba City Surgeon General's 5K Run

LT Austin Van Horn, Pharmacist, Indian Health Service LT Rachel McBride, Dietitian, Indian Health Service

When the call went out for volunteers to host the PHS Athletics Surgeon General's 5K, the junior officers in Tuba City, Arizona answered enthusiastically. Within days there were three volunteers, Lieutenants Austin Van Horn, Rachel McBride, and Jen Eng, who were ready and eager to help coordinate the event.



Racers are starting the Tuba City Surgeon Generals 5k

These three officers brought a great deal of energy and enthusiasm to their planning sessions, and kept dreaming big for what the event could be. We knew that with our passion for exercise and public health we would be able to recruit a decent number of community members to participate. In order to excite potential participants, we chose to have the race at a local landmark and unique racing location, the Dinosaur Tracks. We also began to vigorously advertise the event through Facebook, flyers at the local fitness center and businesses, emails, and word of mouth. We even enlisted the help of a local DJ in order to make the event more appealing to community members.

We also made the decision to have this race become a Prevention through Active Community Engagement (PACE) event in order to effectively educate the community and further encourage healthy lifestyle changes. To do this, we decided to have an officer at a table with handouts on the benefits of exercise, the importance of staying hydrated, and how to maintain a balanced diet.

After three months of hard work and planning the event day finally arrived, but unseasonal rain storms required us to make the hard call to postpone the race for one week in order to increase community members engagement and keep the event safe for participants. We worked quickly to choose a new day and time



LT Jen Eng is watching racers finish

the event safe for participants. We worked quickly to choose a new day and time and to spread the word to any potential participants.

After an additional week of waiting, we had 7 officers and 10 community volunteers arrive on a spectacularly sunny day to perform various tasks, to include: marking the course, setting up registration, and acting as trail guides. We were unsure of how many people to expect with the date change, but ecstatic when we found out that 174 people ranging from a few months old in strollers to 70+ years old showed up to run, walk, and support the racers.

### **People Serving People Partnership**

LCDR Toscha Stanley, Staff Program Management Officer, Centers for Disease Control and Prevention LT Kodilichi Echeozo, Analyst, Food and Drug Administration

One of the most rewarding pieces of work during the USPHS Scientific and Training Symposium is the planning of the community service events. Regardless of what type of event or the time, officers are always so enthusiastic about participating!

In 2018, the Wilder Research Minnesota Homeless Study counted 10,233 people experiencing homelessness in Minneso-

ta. Within the city of Minneapolis, you may have encountered a homeless person seeking shelter in the Skyway on your way to the Convention Center. This year, we had the opportunity to partner with the People Serving People (PSP) organization to assist those struggling with homelessness.

Established in 1982 and located in downtown Minneapolis, PSP is the region's largest comprehensive emergency shelter for families. PSP helps homeless and at-risk children and their families manage crisis situations and build a strong foundation for their long-term success. It provides a variety of services including: Advocacy, Culinary Arts Training, Early Childhood Development Program, Employment Services, and much more.

The unanticipated rainy weather on the day of the event did not prevent officers from showing up to roll up their sleeves and pitch in to help. Initially, we were scheduled to perform outside area beautification. However, the unfriendly

Minneapolis weather quickly caused the facility coordinators to adjust their plans. Instead of being handed shovels and rakes, we were given mop buckets, brooms, and cleaning supplies.



Left to right: LCDR Javonna Stevens, LT Valeria Moore, LCDR Eric Butcher, LCDR Carla Tuite, LCDR Toscha Stanley, LCDR Josephine Zepeda, LT Kimberly Bissohong, LCDR Byungyong Choi and LCDR Chelsea Sealey.

Aligned with the theme of the 54<sup>th</sup> USPHS Symposium, we created a memorable partnership that promoted positive outcomes for vulnerable populations. Additionally, this supported the "Healthy and Safe Community Environments" tenet of the Surgeon General's National Prevention Strategy. We feel that our small contribution has made a difference in the community and, most of all, it was a friendly and meaningful experience.

### **Drownproofing for Kids** (Continued from page 11)

Anne Arundel County Public School System (AACPS) in Maryland has established a program that teaches all 5th graders about water safety, potential hazards, personal flotation devices (PFD), how to make non-swimming rescues, hypothermia, and ice safety. Heather McCarthy, MD Certified Environmental Educator, Director of Drownproofing leads a team of trainers and chaperons via the AACPS Environmental Literacy and Outdoor Education Office through the Arlington Echo Outdoor Education Center. Mrs. McCarthy and her teams spend four 1-hour training sessions with every 5th grader in the county, approximately 6,500 students. I was comforted to know that my daughter and over 6,000 more children in AACPS will have strategies to swim, boat, and water ski safely this summer. They know what threats to look for while in the water and what to do during a water disaster to increase their chances of survival.

With reinforcement from the classroom teachers and Mrs. McCarthy's lessons, the 5th graders learned valuable safety lessons that everyone can use: PFDs must be U.S. Coast Guard approved and have an official seal, and how to identify which type of PFD (i.e., offshore, near-shore, flotation aid, throwable device, or special use device) should be used and when. Living in a cold climate, many of the children like to play in the snow and on ice during the winter. During this drownproofing class, they learned about hypothermia and how to get in the Heat Escape Lessening Posture (H.E.L.P.) if they are in cold water and cannot escape or to huddle if there are people in the water to preserve heat.

The students explored rescue equipment (shepherd's crook, heaving jug, rope, pole, ring buoy, and rescue tube) that may be used to assist in a non-swimming rescue. Lexi, my daughter, and her classmates learned how to float, how to preserve energy in the water,



Lexi, donning her flotation device, was treading water.

how to tread water, proper technique for the breaststroke, safe jumps into shallow and deep waters, and backstrokes. These drownproofing lessons can be used to combat the statistics on accidental drowning that have unfortunately permeated news, such as country star Granger Smith's tragic loss of his three year old son River.

#### References

https://safeboatingcampaign.com/life-jackets/

Connor Cares is an organization that promotes drowning awareness after the death of a 5 year old boy <a href="http://connorcares.org/">http://connorcares.org/</a>

### **Junior Officers Leading the Tuba City Surgeon General's 5K Run** (Continued from page 19)

After the event, many participants expressed their pleasure with the race and asked when we would be hosting another run. We also had other race planners in the area who provided positive feedback and they wanted to borrow some of our ideas for their races. It was an honor to serve the community and lead such a successful event, which was significantly reinforced when the Surgeon General tweeted about the event! We look forward to using what we learned in order to make our next race even better for the community.

### Response to Hepatitis E Virus Outbreak in Namibia – 2018 (Continued from page 9)

The survey helped us better understand why the informal settlement areas have been so vulnerable to HEV and detailed common practices, perceptions, and beliefs of its residents. Following completion of the survey, findings were submitted to MoHSS in a formal report with recommendations to address open defecation, handwashing practices, and hygiene messages. This information, along with other data captured in the survey, will be vital to Namibia's response to the current HEV outbreak.

Centers for Disease Control and Prevention (CDC), Division of Viral Hepatitis. Hepatitis E Information. <a href="https://www.cdc.gov/hepatitis/hev/index.htm">https://www.cdc.gov/hepatitis/hev/index.htm</a>

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*



Do you know of a deserving officer?

Do you know a junior officer that has a unique duty station? Is the officer a super star at work? Do they work tirelessly to support community endeavors, or just have a story to tell? We want to hear from you! Submit the officer's name and a short (50 words or less) narrative on why you think this officer's story should be shared. Submissions should be sent to: <a href="LCDR Tara Jatlaoui">LCDR Tara Jatlaoui</a> and LT Roseline Boateng. All submissions will be reviewed and one junior officer will be selected and showcased in the Fall 2019 Edition of the JOC.

### JOC Summer/Symposium 2019 EHOs WORK hard and PLAY hard! (Continued from page 10)

Later that night, as a way to build some EHO esprit-de-corps and foster some healthy competition, the EHOPAC Readiness Subcommittee organized a team-building "deployment" escape room activity. They invited junior and senior officers to participate in a night of exciting clue search and final escape of a mystery room in Minneapolis, MN. One team of ten junior EHOs arrived at the location and waited for their senior leadership to finish their turn. As the senior officers left the room, gloomy that they hadn't been able to save themselves from the escape room, the junior officers took it upon themselves to seek vengeance for their leadership, find "the mole within the agency", and conquer the room! Among the junior officer group were newbies to the escape room concept, and some that had tried other rooms in their home states before. Resourcefulness, ingenuity, team work and tenacity were present in the room from the beginning. Numbers, pictures, faces, luggage, a vault and lots of laughs: all led the junior officers to discover the mole in the "Agency" and save themselves not just in time, but with a good 6+ minutes window remaining for the escape. Victory is ours! Because EHOs work hard and play hard!

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

### Education is the Key to Reducing Stigma on Alcohol Misuse and Substance Use Disorder (Continued from page 7)

After reviewing the poster presentation, the participants acquired several key educational points, including: information on effective strategies for prevention and resiliency, common risk factors contributing to alcohol misuse/abuse and other drug use, signs of misuse/abuse, awareness of barriers to seeking assistance, and the prevalence of alcohol misuse/abuse and other drug use amongst social workers. Participants were also provided conversation starters, examples of intervention tools using compassionate confrontation, and a list of available resources for recovery.

Within our respective agencies, Immigration and Customs Enforcement (ICE) Health Service Corps and the Substance Abuse and Mental Health Services Administration (SAMHSA), we frequently encounter this subject in our professional positions. We felt that it was important to speak on a topic that affects society as a whole and our subset population as social workers.

In summary, none of us are immune from the harmful effects and impact of alcohol misuse/abuse and other drug use. It is our collective effort to prevent, identify, and intervene when these challenges are present. If you or someone you know is having difficulty with alcohol or drug use, please reach out to a trusted person and consider making use of the myriad of resources available to you, your dependents, and fellow Officers via Tricare and Corps Cares.

"Alone we can do so little; together we can do so much." – Helen Keller

#### REFERENCE:

Strozier, A.L, Evans, D.S (1998). Health and Distress in Social Workers: Results of a National Survey. Smith College Studies in Social Work, 69:1, 60-77.



#### **September**

National Preparedness Month

Sexual Health Awareness Month

- 2 | Labor Day
- 8 14 | National Suicide Prevention Week
- 18 | National HIV/AIDS and Aging Awareness Day
- 23 | Falls Prevention Awareness Day
- 28 | World Rabies Day
- 29 | World Heart Day

#### **October**

American Pharmacist Month

Domestic Violence Awareness Month

Health Literacy Month

National Breast Cancer Awareness Month

National Bullying Prevention Month

National Dental Hygiene Month

- 1 5 | National Primary Care Week
- 6 12 | Mental Illness Awareness Week
- 13 19 | International Infection Prevention Week
- 16 | World Food Day
- 20 26 | National Healthcare Quality Week
- 20 26 | Respiratory Care Week
- 21 | National Check Your Meds Day

Share your photos and ideas with the rest of your junior officers across all social media platforms with the #hashtag #JOAG throughout the year!





@PHS\_JOAC



PHS\_JOAG

### THE OFFICIAL JOAG MAGAZINE DESIGNED FOR JUNIOR OFFICERS BY JUNIOR OFFICERS

