# AMERICAN INDIAN/ALASKA NATIVE COMMISSIONED OFFICER ADVISORY COMMITTEE

# 2016 CHARTER

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## MISSION (I)

The American Indian/Alaska Native Commissioned Officers Advisory Committee (AIANCOAC) was created by, and is to advise and serve, the Surgeon General and the Public Health Service (PHS) through the Minority Officers Liaison Council (MOLC) on issues relating to the professional practice and the personnel activities, civil service (CS) and commissioned corps (CC), of the American Indian and Alaska Native professional. Working in collaboration with the MOLC, the AIANCOAC provides similar advisory assistance, upon request, to the Operating Divisions (OPDIVs) or Staffing Divisions (STAFFDIVs) of the Public Health Service, and to non-PHS programs that routinely use PHS personnel.

## RELATIONSHIP OF THE AIANCOAC TO THE UNITED STATES PUBLIC HEALTH SERVICE (USPHS) (II)

In carrying out its responsibilities, the AIANCOAC operates in a staff capacity. It does not substitute for line management or in any way exercise the prerogatives of the operating programs. Thus, the AIANCOAC advises the MOLC Chair who in turn advises the Surgeon General. While AIANCOAC members are chosen from the respective Health and Human Services (HHS) and non-HHS OPDIVs and organizations, they neither represent OPDIV management nor speak for the OPDIV. They are knowledgeable professionals from HHS OPDIVs and non-HHS organizations who represent the interests and concerns of American Indian and Alaska Native Officers.

## OBJECTIVES (III)

The AIANCOAC serves in a resource and advisory capacity through the MOLC chair to assist in the development, coordination, and evaluation of activities related to American Indians and Alaska Natives in the PHS with the specific objectives of:

1. Identifying and facilitating resolution of issues of concern as they relate to the professional development of American Indians and Alaska Natives in PHS.
2. Assessing PHS personnel needs and assisting in meeting these needs through activities in recruitment, training, and recognition of American Indians and Alaska Natives.
3. Providing assistance in developing position papers, statistical reports, and/or guidelines where appropriate, to advise and comment on personnel issues and professional practices related to American Indians and Alaska Natives.
4. Promoting the development and utilization of American Indians and Alaska Natives by the PHS and other Government programs.
5. Promoting cooperation and communication among American Indians and Alaska Natives in the PHS and other health professionals.
6. romoting all aspects of professional and personal development of American Indians and Alaska Natives throughout the OPDIVs and programs of the PHS.
7. Providing liaison among American Indians and Alaska Natives within and among PHS components, providing advice and consultation to the OPDIV Heads and operating programs upon request.
8. Advocating for best practices within the PHSs.
9. Facilitating relationships with professional organizations and academia to promote the linkage between public health and the professions and disciplines of the USPHS.

## FUNCTIONS (IV)

In carrying out its broad mission and objectives, the functions of the AIANCOAC shall include, but are not limited to, the following:

1. Provide general professional advice and recommendations:
2. Review and comment on issues referred to the AIANCOAC by the Surgeon General, MOLC, Chief Professional Officers, OPDIV Heads, and/or STAFFDIV Heads.
3. Deliberate issues; develop findings, and present recommendations to the MOLC, PHS Surgeon General, and Chief Professional Officers.
4. Provide advice on the professional aspects of American Indian and Alaska Native personnel, i.e., new technologies, regulations, curricula, roles, etc.
5. Provide advice on ethical and professional standards.
6. Review and provide recommendations concerning proposed or needed changes to appointment standards and professional requirements, e.g. licensure required to maintain high quality staff.
7. Act as primary resource for career development:
8. Advise on CC and CS practices related to career development.
9. Advise on operating practices concerning the appropriate and optimum use of personnel designed to best meet PHS needs and the needs of the individual.
10. Advise on issues related to PHS promotion practices for PHS CC officers and assimilation into the Regular Corps for American Indians and Alaska Natives.
11. Formulate criteria for the selection of candidates for training and other career development options.
12. Identify continuing and long-term intramural/extramural education needs; assist in identifying and recommending training and professional experience opportunities designed to meet these needs.
13. Provide advice and assistance on staffing issues:
14. Assess and project the need for American Indian/Alaska Native staffing levels, both CC and CS, throughout the PHS.
15. Provide advice on the goals, objectives, and procedures designed to meet the PHS staffing needs and assist in American Indian and Alaska Native retention initiatives.
16. Provide guidance for recruitment in short-term student affiliation programs, i.e., Commissioned Officer Student Training and Extern Program (COSTEP), summer students, etc.
17. Develop, review, and critique PHS recruitment materials, procedures, and programs to include American Indian and Alaska Native specific information.
18. Help establish networks of current, as well as, former PHS professionals who can assist and facilitate recruitment activities.
19. Provide guidance to approved PHS “Associate Recruiters” and other recruiters concerning the recruitment of qualified American Indian and Alaska Native candidates to the PHS and related civil service professional disciplines.
20. Assist in the development of orientation materials for newly hired American Indian and Alaska Native professionals; providing advice and recommendations concerning orientation programs.
21. Communicate and encourage appropriate use of awards/recognition systems:
22. Identify, establish, and help administer AIANCOAC awards.
23. Maintain cognizance of existing CC and CS award programs and opportunities to encourage the nomination of qualified individuals for such awards.
24. Serve as a communication link and information resource for American Indians and Alaska Natives:
25. Communicate important information concerning professional, ethical, and technical issues (via newsletter and website) to CC and CS American Indians and Alaska Natives.
26. Encourage individual membership and involvement with professional organizations and societies in order to promote open communication with non-federal colleagues.
27. Ensure the distribution of minutes and other AIANCOAC developed materials to MOLC. MOLC will then distribute the information to the Surgeon General and, to the extent possible and appropriate, to American Indian and Alaska Native CC and CS professional staff via newsletter and website.

## MEMBERSHIP (V)

1. Basic Eligibility Requirements: Members must be full-time CC and CS personnel, at the time they are nominated and appointed to the AIANCOAC. Members must meet the eligibility requirements for initial appointment to their respective professional category and personnel systems. In addition, all CC personnel must meet the Division of Commissioned Corps Personnel and Readiness (DCCPR) basic readiness standards at the time they are nominated and appointed to the AIANCOAC and throughout their term of service on the AIANCOAC.
2. Staff from the Office of the Secretary (OS) and the Office of Public Health and Science (OPHS) may serve on an advisory committee providing that they recues themselves from voting on issues and decisions that may have the appearance of a conflict of interest with respect to their duty assignments.
3. Size of the AIANCOAC: The AIANCOAC shall have no fewer than seven and no more than twenty voting members.
4. Organizational Representation: In order to provide the range of experiences and perspectives necessary for addressing issues before the AIANCOAC, every effort must be made to have the broadest representation possible among all agencies that are routinely staffed by American Indian and Alaska Native Commissioned Corps Officers.
5. Geographic Considerations: The AIANCOAC will have, as voting members, at least two individuals whose regular duty station is geographically removed by a distance of 75 or more miles from the Washington D.C. Metropolitan Area.
6. Gender and Minority Representation: Every effort will be made to assure that the AIANCOAC does not consist entirely of men or entirely of women.
7. Personnel System: The AIANCOAC will make a concerted effort to include CS personnel in the composition of its membership.
8. Professional Seniority: The AIANCOAC will have as a voting member a minimum of one individual who at the time of appointment to the AIANCOAC has less than five years of professional experience.
9. Professional Discipline Composition: Cognizant of the fact that the AIANCOAC is structured around the PHS Commissioned Corps-defined professional categories and that some of these categories, i.e., the Health Service category, encompass more than one major professional discipline, to the extent possible the AIANCOAC should attempt to be as inclusive as practical in selecting members who possess the requisite credentials for each, at least one voting member should be selected who possesses the requisite credentials for each of the respective sub-disciplines.
10. Ex-Officio Members (non-voting): Representatives of other minority officers’ committees in the MOLC are ex-officio members of the AIANCOAC [see AIANCOAC Bylaws Section VII (11)]. The former chair of the AIANCOAC may serve one additional year as an ex-officio member of the AIANCOAC

[see AIANCOAC Charter Section VIII (3)]. The AIANCOAC may request AIANCOAC Advocates and other individuals serve as ex-officio members.

1. Liaison Members (non-voting): The AIANCOAC may identify individuals to serve in a liaison capacity to provide information or assist with activities, e.g., staff from the Office of the Secretary or the Office of Public Health and Science.

## NOMINATION PROCESS (VI)

1. Annually, the AIANCOAC will solicit, through newsletters and other appropriate means, nominations for vacancies on the AIANCOAC. Self-nominations will be solicited. The names will be transmitted by the AIANCOAC to the nominee’s respective OPDIV Head who may endorse the nominee(s) or provide alternate or additional nominations meeting the general representation requirements demonstrated by the original nominees. The OPDIV Head’s response will be reviewed by the AIANCOAC who will identify, by name, those highly qualified to fill anticipated vacancies. A final list of nominees will be sent by the AIANCOAC to the Surgeon General for selection and approval.
2. This nomination process shall be conducted so that the final nomination package is available for the Surgeon General’s consideration no less than 60 calendar days prior to the expiration of the regular term of the voting member. Generally, this requires AIANCOAC to solicit new members no later than June for a membership vote no later than November.
3. This nomination process shall be conducted so that the final nomination package is available for the Surgeon General’s consideration no less than 60 calendar days prior to the expiration of the regular term of the voting member. Generally, this requires AIANCOAC to solicit new members no later than June for a membership vote no later than November.

## TERM OF APPOINTMENT (VII)

1. The term of appointment for a voting member will be three years. Terms will be staggered to ensure rotational balance.
2. Once a member has accumulated a lifetime total of 6 years of service on the AIANCOAC, he/she is not eligible for reappointment. Terms of office may be served consecutively at the discretion of the AIANCOAC.
3. Alternates: Cognizant of the demands of the member’s primary work responsibilities and the AIANCOAC’s need to conduct business, the AIANCOAC has the option of establishing procedures to allow each voting member to appoint, and inform the Chairperson of, a single individual who can serve as his/her alternate. Such alternates shall have voting privileges when serving in the place of the primary member. It is the responsibility of the primary AIANCOAC member to keep the alternate fully informed and knowledgeable of the AIANCOAC’s activities. Any OPDIV clearance or approval requirement for travel/per diem will have to be handled within the OPDIV by the primary AIANCOAC member. All alternates must meet DCCPR basic readiness standards.
4. Attendance: Any member of the AIANCOAC who frequently misses meetings without just cause can, at the discretion of the AIANCOAC, be asked to voluntarily resign from the AIANCOAC, or the AIANCOAC caN initiate a request to the Surgeon General to terminate said membership and so inform the OPDIV Head.

## CHAIRPERSON (VIII)

1. The chairperson will be elected by the voting membership of the AIANCOAC.
2. Term of the Chairperson: The Chairperson will serve a one-year term and may be re-elected for one additional year. The AIANCOAC may choose to elect the Chairperson for one two-year term with no opportunity for re-election to that post. Additionally, each advisory committee may elect to have a Chair-Elect post so that after one year in this capacity the Chair-Elect automatically becomes the Chair for one year.
3. Term of Appointment: If the term of Chairperson coincides with the expiration of that individual’s membership on the AIANCOAC, the former Chair may serve one additional year as an ex-officio member of the AIANCOAC provided the OPDIV Head is informed and concurs with the extension, unless reappointed as a regular member [see AIANCOAC Charter Section VIII (3)].

## OPERATIONS AND PROCEDURES (IX)

1. The AIANCOAC shall develop its own internal operations and procedures (e.g. Bylaws). These shall include, at the minimum, provisions covering the following:
2. Operational Year: The operational year of the AIANCOAC for term of appointments, elected offices, and MOLC representation effective January 01 of the calendar year and terminating December 31 of the same calendar year.
3. Frequency of Meeting: Meetings will be held once per month.
4. Agenda: A meeting agenda and appropriate background material is to be made available to the members prior to the meeting.
5. Records and reporting:
6. Minutes of each AIANCOAC meeting will be developed and approved by the AIANCOAC voting members.
7. Minutes and reports of the AIANCOAC will be distributed in accordance with AIANCOAC Charter Section IV (5) (C) FUNCTIONS.
8. The AIANCOAC must establish a system to maintain a permanent file of the official minutes and reports of the AIANCOAC.
9. Secretary: The Executive Secretary must be a voting member of the AIANCOAC.
10. Quorum: A quorum consists of 50 percent of the AIANCOAC voting membership. An alternate attending in lieu of the member shall be counted in determining the quorum requirement.
11. Voting: Where voting is required or appropriate, i.e., election of the Chair, action will Subcommittees: The AIANCOAC may elect to establish standing or ad hoc subcommittees. Each voting member must chair at least one subcommittee.
12. Subcommittees: The AIANCOAC may elect to establish standing or ad hoc subcommittees. Each voting member must chair at least one subcommittee. Subcommittee membership may include non-voting members provided that the Chair and Co-Chair of the subcommittee are voting members of the AIANCOAC.