



SOCIAL WORK PROFESSIONAL ADVISORY GROUP OF THE COMMISSIONED
CORPS OF THE US PUBLIC HEALTH SERVICE

SWPAG NEWSLETTER

INSIDE THIS ISSUE:

Deployment Team	pg1
From the Chair	pg2
Readiness Tips	pg3
Officer Spotlight	pg4
Clinical Corner	pg7
Mentoring	pg8
SW on the move	pg9
AMSUS SW event	p 10



News letter created by
Communications
Committee:

LCDR Booker
LCDR Peglowski



Two Tier II Team Become One Effective Unit When Deployed to Roseburg Oregon By CDR Dale Thompson

As America's uniform service of public health professionals, Public Health Officers work on the front lines of some of our Nation's most critical issues. In an effort to address acute public health emergencies and disasters both natural and man-made, the Office of the Surgeon General has the ability to mobilize and deploy US Public Health Officers to disaster locations through the Readiness and Deployment Operations Group (RedDOG). There are approximately 50 deployment groups available for deployment. Public health emergency [planning, mitigation, and response efforts](#) increasingly consider the mental health effects of natural disasters, pandemics, and other catastrophic events on local and national levels. Much has been accomplished in terms of addressing stigmatism such that mental health services are widely recognized as crucial to the healing process in disaster management. While mental health providers (i.e., Social Workers, Psychologists, and Psychiatrists) have been part of early PHS deployment team development, they are now stand alone teams with a high activation frequency.

On the morning of October 1st, 2015, the Umpqua Community College in Roseburg, Oregon a 26 year old student enrolled in the college fatally shot 9 and injured 9 individuals. This event represented the deadliest shooting in the state of Oregon's history. The Roseburg County Commissioner's Officer in coordination with the representatives from the Regional Emergency Preparedness Officer collaborated on a deployment request through HHS given the immediate and growing public health need for the affected population. The consensus was that experienced mental health resources were needed on the ground in Roseburg Oregon. A call for action went out the evening of October 1st, the same day as the shooting incident. Mental Health Team III and Services Access *Team III* "formed ranks" for deployment. The team demonstrated a rapid, coordinated, effective, and professional disaster response. The unit consisted of 11 members, to include 9 Social Workers, 1 Psychologist, and 1 Public Health Advisor. All personnel had boots on the ground in less than 20 hours of deployment notification. Both teams are Tier II, but this and recent deployments have reflected an availability and deployment request more reflective of Tier I expectations. The effort focused on providing strategic plans for community leaders (e.g., college, city, county, and stat government) (continued page 6)



from the *SWPAG Chair*

Well, another year has come and gone. I wanted to take this time to thank each and every one of you for the work you do day in and day out in each of your respective OPDIVs and for the SWPAG. Some of your notable accomplishments have been revision of the mentoring tool, such that our parent PAC has shown an interest in promoting this further within PHS, and conducting VA/DoD/USPHS Social Work Training Consortium provided free monthly trainings at which over 2,000 attended! In addition, various cooperative outreach efforts to new calls to active duty and updates and improvements to the SWPAG welcome packet were made. There are so many other areas where many of you have been involved and you are appreciated. Many of you serve on multiple subcommittees and other areas within our larger HSPAC as well keeping, you very busy.



I'd like to also thank our SWPAG Chair-Elect, CDR Malaysia Gresham for all of her efforts, many of which are "behind-the-scenes" to many of us, but which have been invaluable for the functioning of our SWPAG this year. I am confident she will lead the SWPAG to greater heights in 2016 as we move ahead.

It has been a pleasure to serve as your 2015 SWPAG Chair and I wish you all the best! Also, on a personal note, have a Merry Christmas and Happy Holidays!"

Very Respectfully,

CDR Scott Eppler, LCSW-BCD
 Irwin Army Community Hospital
 OIC, Warrior Transition Battalion Social Work Service
 600 Caisson Hill Rd, Fort Riley, KS 66442



SWPAG has a FACEBOOK Page. Please go and request to join. The plan is to keep it updated with information that pertains to our SWPAG. We want to know all the good stuff that happens to you

If you want to post something, please send to:

tricia.h.booker.mil@mail.mil or justin.pegowski@ihs.gov

As usual, keep the articles coming for the newsletter!!

LIKE US ON FACEBOOK !! Under USPHS SWPAG

Readiness Quick Tips-Winter 2015:

This has been a busy year for USPHS deployments! If you deployed this year, you may be eligible for an award. The Readiness and Deployment Operations Group (RedDOG) lists deployment and readiness awards that officers are eligible for under a variety of circumstances. In this quarter's Readiness Quick Tip, I will summarize the requirements and then provide a link that you can use to get additional information.

Crisis Response Service Award (CRSA) ~ for direct participation in a Corps deployment to a designated domestic response.

Global Response Service Award (GRSA) ~ for direct participation in a Corps deployment to a designated non-domestic or international response.

Response Service Award (RSA) ~ for direct participation in a Corps deployment to a designated public health need or National Special Security Event.

National Emergency Preparedness Service Award (NEPA) ~ for officers who have served a minimum of two consecutive years as an active member on a Tier 1 or Tier 2 Corps managed response team.

Field Medical Readiness Badge (FMRB) ~ for officers who have met criteria beyond the required basic force readiness standards.

Ebola Campaign Medal and Expeditionary Attachment ~ for officers who participated in the Ebola response.

Follow the link below for details on the awards mentioned here:

http://dcp.psc.gov/ccmis/ReDDOG/REDDOG_awards_m.aspx

Brought to you by SWPAG-Readiness Subcommittee



**Congratulations to
CDR Sonja Howard on being
elected 2016-SWPAG Chair
Elect
and LCDR Tricia Booker on
her elections as SWPAG Exec-
utive secretary.**

**For more information
about our PAG, visit the
SWPAG website at
[http://usphs-hso.org/?
q=pags/swpag](http://usphs-hso.org/?q=pags/swpag)**

Officer Spotlight: CAPT JAY SELIGMAN

Written by: LCDR Monique Richards on behalf of SWPAG Mentoring Subcommittee



Current Duty Station: Bureau of Prisons, Central Office located in Washington, D.C.

Hometown: Born in Brooklyn, New York and raised in Fort Lauderdale, Florida.

Educational Background: CAPT Seligman obtained his B.S. in Psychology in 1990 and Masters in Social Work from Florida State University in 1993. In 2006, he conferred with the Doctor of Health Science from Nova Southeastern University, located in Fort Lauderdale, Florida.

Years of Active Duty in USPHS: Transferred from United States Air Force as a social work officer to the Commissioned Corps in 1998

Why did you join the USPHS?

“I joined the Commissioned Corps, because I was interested in the connection where mental health prevention and intervention intersect. Interestingly enough, I interviewed for my first Corps position while deployed to Operation Southern Watch in Saudi Arabia providing mental health counseling to active duty members. It was challenging interviewing from Saudi Arabia, since I was only permitted a ten minute phone call while contending with removing daily accumulation of sand from my laptop since I lived and worked out of a tent”.

How would you best describe your current position?

“I am the Chief Social Worker at the Bureau of Prisons (BOP) Central Office located in Washington, D.C. My duties include providing direction to 53 BOP social workers and oversee numerous prisoner reentry initiatives with emphasis on justice involved individuals that have extraordinary medical and mental health needs”. He shared, “I feel fortunate that I am back at BOP where I started my USPHS career. It’s very rewarding to have is boots on the ground and work with an underserved population”.

When asked to describe some of his career highlights and major accomplishments?

I was excited to learn that CAPT Seligman has been afforded the opportunity to work in both traditional and non-traditional social work roles. These positions included Chief Social Worker, Ready Responder, Assistant Health Services Administrator, Policy Analyst, Deputy Director of Commission Corps Activity (con’t pg5)

(Continued from page 4)

and Commission Corps Liaison. One major accomplishment worth noting is he was the first MSW hired at Immigration Health Services Corps (IHSC) where he served as the Assistant Health Services Administrator. In fact, serving in this capacity was quite impactful for he authored a position paper that focused on the benefits of hiring social workers to address mental health shortages across IHSC. As result of his efforts, IHSC established a social work program and now has 15 Clinical Social Workers serving across the United States. He also expressed that he enjoyed working as a Ready Responder with the Health Resources Services Administration which permitted him to return to direct clinical practice.

Conversely, some of CAPT Seligman's nontraditional social work positions included Policy Analyst with the Division of Commission Corps Personnel (DCCP) where he noted, "this position expanded my skill set by providing me an opportunity to write executive memos and actively engage in Commissioned Corps policy". Additionally, while working at the United States Marshals Service (USMS) he held 3 different positions to include Assistant Chief of Medical Services, mental health subject matter expert and Commissioned Corps Liaison. While at USMS, one of his most notable accomplishments was revising a private prison hospital contract which saved taxpayers over \$1 million annually. Lastly, as the as Deputy Director of Commissioned Corps Activity he provided oversight 940 Officers assisting with matters regarding the Commissioned Corps including promotions, retirements and special pays

What is one fun fact about you?

"I use all my annual leave exploring the globe and look forward to traveling to Spain and Morocco next Spring! There is only one continent I have not been, which is Antarctica but I plan to get there someday"!

What do you enjoy doing in your spare time?

"I really enjoy educating others about financial planning and I may pursue this as a second career when I retire from the Corps".

What is one of your favorite inspirational quotes or mantras?

"Those that take risks and get out of there comfort zone are the ones that can reap the most rewards".

If you could go back in time, what advice would you tell yourself as a Junior Officer?

"I would not change a thing about my career choices". He candidly admits that not all positions were a perfect fit but he learned from each and every assignment. He recommends that Officers take opportunities to explore new positions with other agencies. He also suggests that Officers accept collateral duties and assignments outside of their typical duties to broaden their occupational skill sets. He stressed the importance of junior officers seeking mentors that not only review HSO Benchmarks but provide support and guidance with career progression while keeping the mentee accountable



(continued from page 1)

resource management, and temporary mental health support services for school personnel, community members, college students, and city/county personnel. There were approximately 2,000 total contact encounters for this deployment. Recognizing deployments are a temporary augmentation of overwhelmed local mental health resources, responsible and ethical exit strategies were developed by team leadership and implemented by team members. Given the high utilization of providers in these deployment events, daily care must be taken to maintain the exit strategy in a compassionate and supportive manner. Addressing mental health needs relative to tragedies, such as the one at Umpqua Community College, is a critical component of the healing process for individuals and communities.



If history is any indication of the future challenges we will face as a nation, the Public Health Service and our mental health officers must stand ready. The challenges we have and will continue to confront will likely continue as calculated attacks that aim to create panic, chaos, and fear. Within the Commission Corps ranks, we maintain units capable of facing these challenges “head-on”. We will continue to rise-up when called, stand firm in applying our craft, and ultimately prevail in applying our “salutem cura ad omnes” (e.g., Health Care for All; Latin).

Ad Salutem (e.g., To Health; Latin)



Team Picture in Roseburg Oregon

Clinical Corner: Being a Blue Suiter in a DOD World!

By

LT Robert E. Van Meir, MSW, LCSW, BCD

I recently PCS to my second duty station (the place I worked before as a contractor). Ft Bragg Fayetteville, NC. Ft Bragg is one of the largest United States Army installations in the world. It is the home of the US Army airborne forces and Special Forces, as well as US Army Forces Command, US Army Reserve Command and Womack Army Medical Center. Here being airborne is king. In fact when you enter the post via one of its gate the soldier who checks your ID card often says "All the way". The correct response is to say "Airborne".

The Department of Defense and the U.S. Public Health Service signed in 2008 a memorandum of agreement to establish the DoD-USPHS Partnership for Psychological Health

Initiative. This was seen as way to increase the number of providers to provide behavioral health services to active duty serve members, their families and received therapeutic services.

When I arrived for in processing the difference between this and other duty station are immediately apparent. I am used to the stares and notice how other service members try to figure out "What Service are You". The question: "are you Navy?" "What is the Coast Guard doing here"-type of statements are common place. But when I was asked "what is my ETS?" "what company are you assigned too?" The expression on my face was one of confusion, bewilderment, and embarrassment. I have no idea.

Lucky for me the SFC (Sergeant First Class) was patient and walk me through it. The "Blue Suit" our ODU really sticks out is a sea of green. During our Behavioral Health Monthly meeting you can count all 5 of us. You cannot blend into the crowd. When I work with clients I always ask them at the end of the first session: "Do you have any questions for me?" They have been staring at the uniform trying to figure out what the USPHS in gold letters mean. The majority of them answer "no". Those that ask usually get the "I am a Commissioned Corp Officer of the United States Public Health Service Speech".

When you walk around the post at Ft. Bragg which has thousands and I mean tens of thousands soldiers you quickly learn the dynamics of military courtesies and privileges. At first being saluted is "cool" and after about the 10th one as you are walking into the food court the coolness factor start to wane. You even began to look for the fastest way into and out a place to keep the saluting to a minimum. Also you are saluting senior officers. However being able to tell the difference between a SPC (E-4) and LT Colonel (O-5) at 20 paces can become challenging. After one mix-up I knew it was time for some new glasses.

Being in uniform and working with army soldiers they assume that you understand the working of the army. They think you know what a platoon, company, or battalion means. They use words like 1st Sergeant, Commander, and NCO. They talk in anonyms and use them has adjectives, verbs, and nouns. It is a special language all their own. You can ask them what each one means and they are happy to explain it to you.

Being a "Blue Suiter" (Army personal are Green Suiters) you are part of the Army team. You now are following many rules and regulations and it can feel like you are playing catch-up for the first few months. I find that I have to introduced myself over the phone as "This is LT the O-3 kind Van Meir" because in the Army an O-3 is a Captain. The Noncommissioned Officer In Charge told me to just call myself Captain on the phone because if not they might think I am a "Butter Bar"- or an ensign in our service. I said well that would be calling myself a Colonel (O-6) so I will just stick with the awkward introduction I have now.

Working with the Army is challenging and exciting work. I am proud to be a "Blue Suiter" having the opportunity to display the talents, skills, and ability that we PHS Officers bring to the table. Several Army Officers have asked about the "Best Kept Secret" that is the USPHS. I imagine in the future some of those Green Suiters will trade their uniform in for a Blue one.

Social Work Networking and Mentoring Initiative Spreads across Regions

SW PAG Mentoring Subcommittee

Starting in 2013, the SW PAG's initiative to boost social work mentoring and networking opportunities on a national scale has grown significantly. The SW PAG Mentoring Subcommittee created a vision for and assumed the lead on the initiative. The initiative has spread across regions, across the uniformed services, and has brought together social work officers and civilians to build knowledge, mentoring relationships, career development opportunities and collaboration throughout the field.

This year, the Mentoring Subcommittee refined aspects of the program, considering factors such as the high concentration of social work officers in certain [HHS] Regions, areas with minimal U.S. PHS social work presence, and the opportunity to partner with civilian counterparts. The Subcommittee also refined the role of the Regional Points of Contact (POCs) and revised the system for sharing and collecting information on social work mentoring/meet-and-greet events held across the nation.

Three meetings were held with the POCs and, according to information reported as of November 2015, 31 social work mentoring/meet-and-greet events were held, with over 300 social workers (including civilians and officers across the uniformed services) participating. Some events were held as regular occurrences (in particular areas) and most included topics such as mentoring, career growth and family balance, career development, etc.

The SW PAG Mentoring Subcommittee continues to seek volunteers who wish to serve as Regional POCs, particularly in HHS Regions 5 and 2. The POC meetings will be held quarterly and will serve as learning community for sharing information on events, best and promising practices, ways to most effectively advise those who are planning mentoring/meet-and-greet opportunities. Serving as a POC provides an opportunity to network with other social work officers (and civilians) across HHS Regions, create partnerships, and to learn more about what is happening in the field on a regional and national basis.

For more information on the SW PAG Mentoring Subcommittee or the Social Work Mentoring/Meet-and-Greet initiative, please contact any of the following members:

Chair, LCDR Holly Berilla at HBerilla@hrsa.gov or Co-Chair, LT Israel Garcia at IGarcia@hrsa.gov
Social Work Meet & Greet Liaisons, CDR Fields at Marivic.Fields@samhsa.hhs.gov and CDR Mahlau-Heinert at Jerald.L.Mahlau-Heinert@uscg.mil

Publication Coordinator, CDR Thompson at Dale.K.Thompson2.mil@mail.mil

Members, LCDR Alexia Blyther at Alexia.Blyther@samhsa.hhs.gov and LCDR Monique Richards at MRichards@hrsa.gov

MAKING A STATE AND NATIONAL IMPACT

Recognition for LCDR Anthony Johnson PhD

In January 2015, LCDR Anthony Johnson, Director of Social Services, Colorado River Service Unit, Parker Indian Health Center was nominated to be on the Board of Directors for the National Association of Social Workers - Arizona Chapter. It is with excitement that we report the votes are in and LCDR Johnson was selected and thus began his service on the Board of Directors July 2015. This is a great recognition for the Indian Health Service and Colorado River Service Unit as he serves on the frontline with other social work leaders and researchers to address social service policies, academics, program development for healthcare systems addressing the needs of all populations and elements of clinical infrastructure regarding the social work discipline at a state and national level. LCDR Johnson was requested by the Board to draft a social work platform in which he outlined the need for enhanced interdisciplinary forums in addressing the growing challenges with pharmacology and pain management and the necessity in seeking alternative ways for patient intervention from a clinical and social perspective. We are excited as the selection reflects LCDR Johnson's commitment and passion in promoting the mission of the United States Public Health Service and the Indian Health Service in advancing the health and wellness of Native Americans and all populations of service.



Congrats to CDR Malaysia Gresham for being awarded the 2015 Military Health System Allied Healthcare Senior Non-Provider of the Year Award during the 2015 AMSUS conference in San Antonio , Texas

Presented by Dr. Jonathan Woodson, Assistance Secretary of the Defense for Health Affairs

AMSUS 2015 Joint Social Work Meeting



On Wed 2 Dec 2015 from 0900 - 1100 during the 2015 AMSUS Meeting held at the Henry B. Gonzalez Convention Center in San Antonio TX , a number of USPHS Senior Leaders and other PHS Officers to include CDR Malaysia Gresham who spoke as the USPHS Social Work Consultant as well as several other Uniformed Service Members across the Army, Navy, & Marines to include Social Work civilians convened at the Joint Federal Partners Meeting to share and exchange information as well as to discuss the impact of Integrated Behavioral Health Healthcare for not only Service Members but all Tri-care beneficiaries.



The meeting was supported by 3 USPHS Flag Officers to include Rear Admiral Epifanio Elizonda, RADM Peter J. Delany, who delivered the keynote address, and RADM Dawn Wyllie. CAPT Davis Lau and CDR Josef Rivero were among the leaders in the audience.

The planning committee was lead by CDR Sonja Howard, with over sight from USPHS advisors CDRs Maylaysia Gresham, Aimee Williams and Marivic Fields. The planning team for this event included LCDRS Holly Berilla, Karis Harris, Tricia Booker and Kymberly Spady- Grove.

