

U.S. Public Health Service

# **A Guide to Career Development for USPHS Commissioned Corps Pharmacy Officers**



**Pharmacist Professional Advisory Committee (PharmPAC)  
Career Development Subcommittee**

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## Purpose Statement

The purpose of this document is to provide a guide to career development for pharmacy officers in the U.S. Public Health Service (USPHS) Commissioned Corps. This document will provide baseline knowledge about the USPHS Commissioned Corps, the pharmacy category, and lay the foundation of principles needed to help officers make decisions throughout their careers in order to achieve their professional goals. This document is not all-inclusive; rather, it provides valuable career advancement information for USPHS pharmacy officers.

## Career Development Definition

Career development is defined in the electronic Commissioned Corps Issuance System (eCCIS) as a series of steps that will form a logical progression toward a desired career goal. The purpose of career development is to enhance the mission, performance, and overall impact of the USPHS Commissioned Corps by providing opportunities for professional growth for USPHS officers.

## USPHS Mission Statement

***“Protecting, promoting, and advancing the health and safety of the Nation.”***

The USPHS Commissioned Corps is a uniformed service of public health professionals achieving this mission through:

- Rapid and effective response to public health needs,
- Leadership and excellence in public health practices, and
- The advancement of public health science.

As an officer thinks about career development, the USPHS Commissioned Corps mission should influence all considerations from career planning to personal development. There should be an increased emphasis on leadership and scope of impact as an officer gains seniority. When developing personal materials such as an award write-up, curriculum vitae (CV), Commissioned Officers' Effectiveness Report (COER), Officer Statement (OS), and Reviewing Official Statement (ROS), officers who clearly and explicitly articulate how their roles and accomplishments serve to protect, promote, and advance the health and safety of the Nation will generally find greater success within their USPHS Commissioned Corps career.

## Core Values of the USPHS Commissioned Corps

**Leadership:** Provides vision and purpose in public health through inspiration, dedication, and loyalty.

**Service:** Demonstrates a commitment to public health through compassionate actions and stewardship of time, resources, and talents.

**Integrity:** Exemplifies uncompromising ethical conduct and maintains the highest standards of responsibility and accountability.

**Excellence:** Exhibits superior performance and continues improvement in knowledge and expertise.

# The Foundation of Being a Public Health Service Officer

The motto of the USPHS Commissioned Corps *In Officio Salutis* means “in the service of health.” It is a calling higher than that of being an individual, a category, or an Operating Division (OPDIV) employee. It is a calling that comes an expectation of growth throughout a career.

The most successful officers display the following characteristics in advancing their career:

## 1. Stay informed

Being an officer means there are expectations beyond that of the OPDIV position. Policies, procedures, deployments, and trainings are examples. Keeping up with these changes and requirements is key to being a successful officer.

## 2. Stay active and responsive

There are many time-sensitive items that should be monitored throughout a career. Readiness checks, eOPF verifications, licensing requirements, and timely document submission are examples. Staying abreast of these recurring responsibilities is a requirement of USPHS officers.

## 3. Set goals with maximum value

Having a successful career is like following a map: without a destination in mind, it is easy to become lost with no direction to advance. Setting goals for oneself, the OPDIV, and the USPHS Commissioned Corps is a key component to ensure progress towards overall career goals. When setting goals, be flexible, as goals are likely to change throughout a career. The COER is a great opportunity to regularly evaluate progress towards such goals.

## 4. Document success

Anyone can say they have done great things, but the most successful officers *demonstrate* their impact. CVs, Officer Statements, Reviewing Official Statements, and award narratives are examples of documents where it is important to show impact objectively and clearly. The most successful drivers of change ensure their impact is measurable.

## 5. Cultivate professional habits

It is important to be a lifelong learner and strive for continuous professional development. Accept advice and constructive criticism, use failures and challenges as learning moments, and don't shy away from healthy conflict.

## 6. Maintain helpful networks

The importance of having mentors to provide guidance throughout a career cannot be overstated. Trust the information the mentor is providing, but verify by doing personal research. No one officer in the USPHS Commissioned Corps has been successful completely on their own. Everyone has benefited from the officers who served previously. It is recommended to have more than one mentor and to have mentors with diverse experiences and career successes.

## 7. Maintain relationships and work-life balance

Being an officer is a high calling that can be incredibly demanding at times. Having a solid work-life balance minimizes potential burnout and maintains engagement.

# Overall Career Development

## Benchmarks

Benchmarks introduce a standardized process to guide officers throughout their career and serve as the blueprint for promotion. It is important to understand the benchmark precepts and how they are used to determine promotions. Benchmarks can be found on the CCMIS website under Promotion Information: [CCMIS - Promotion Information - Promotion Benchmarks](#).

Benchmark Precepts	Percent
1. Performance Rating and Reviewing Official's Statement (Performance)	40%
2. Education, Training, and Professional Development	20%
3. Career Progression and Potential	25%
4. Professional Contributions, Basic Level of Force Readiness History, and Service to the PHS Commissioned Corps (Officership)	15%

- Chief Professional Officers (CPOs) develop promotion benchmarks to assist officers with career progression.
- These precepts are further outlined as benchmarks. **Benchmarks are not requirements** but merely serve as a guide to assist officers in successful career planning.
- Benchmarks inform officers and promotion boards about the levels of achievement generally considered to describe the “best-qualified” officer for a specific grade.
- Benchmarks can serve as important guides to setting short-term and long-term goals throughout a career.
- The individual factors within each precept are not listed in priority order. It may not be possible for officers to meet every precept, but promotion board members will take into account the overall impact of each officer’s activities and accomplishments. If a particular precept is not met, the officer should demonstrate how they excel in other precepts.
- While the officer’s activities and accomplishments over the course of the career are considered, activities and accomplishments since the officer’s last promotion receive priority consideration.

## Performance Rating & Reviewing Official's Statement

The performance precept is the largest section by percentage, representing 40% of an officer’s overall score.

Expectations for an officer’s performance start at the OPDIV-level. At a minimum, Public Health Service officers are required to meet all assigned agency performance standards throughout their careers; however, the expectations for officers are higher than those of their civilian counterparts. Officers are expected to bring high levels of initiative, creativity, and leadership toward solving problems and meeting the agency mission.

1. Opportunities to improve patient health, customer service outcomes, business processes, and quality of work at each assignment should be sought out.
  - a. Each officer should check with their supervisor, the OPDIV liaison, or fellow officers assigned locally to determine OPDIV performance evaluation plans that may exist in addition to the USPHS Commissioned Corps requirement.
  - b. While the COER includes numerical scores, the true value lies in the rater's comments. These comments should support other documents in demonstrating the impact of an officer to the agency.
2. Awards
  - a. All information pertaining to awards is available in the policy manual within the eCCIS ([CCI 511.01](#)).
  - b. Awards formally recognize officers whose accomplishments or achievements are of outstanding or unique significance to the missions of the USPHS or other programs to which officers are assigned.
  - c. All allowable decorations and instructions for their wear are detailed in [CCI 512.01](#), titled "Wear of Awards and Badges."
  - d. Deserving officers whose accomplishments or achievements are of significance are highly encouraged to seek the formal recognition they deserve through the Commissioned Officers' Awards Program (COAP). Successful (and higher-level) awards are based on the officer being able to document their level of involvement and the quantitative/qualitative impact of their efforts. Officers are encouraged to devote the time necessary to record noteworthy activities and the subsequent outcomes of those activities to ensure they can be appropriately recognized.
  - e. There are six individual honor awards for which USPHS Commissioned Corps officers may be nominated: Distinguished Service Medal (DSM), Meritorious Service Medal (MSM), Outstanding Service Medal (OSM), Commendation Medal (CM), Achievement Medal (AM), and Citation (CIT).
  - f. There is no required progression or order by which an officer must receive awards. Rather, the individual award criterion determines the appropriate level of an award, in conjunction with:
    - i. scope of impact.
    - ii. level of achievement.
    - iii. demonstrated leadership.
    - iv. length of time involved.
  - g. Officers typically achieve higher-level awards as their careers progress due to increasing scope of responsibilities, higher levels of achievement, and increasing levels of leadership.
  - h. Awards boards are not necessarily composed of officers from within the same category as the submitting officer, so it is essential to ensure that award submissions cater to an audience who may not be familiar with a particular field of work.
  - i. Nomination forms are [PHS-6342-2](#) for Individual Honor Awards and [PHS-6342-1](#) for Unit Honor Awards.

- j. Award narratives may not exceed one single-spaced typed page with 1” margins and Times New Roman 12-point font (or comparable). Use of double space between paragraphs and use of bullets are suggested where appropriate.
- k. Narratives should clearly describe the impact and/or achievement of the officer(s), emphasize leadership/initiative, and provide a clear indication of the officer(s) exceeding expectations.
- l. Awards must be submitted within 13 months from the end of the “Period Covered” on the form.

For detailed information, please refer to the below CCIs and POM:

- [CCI 511.01: Awards Program](#)
- [CCI 512.01: Wear of Awards and Badges](#)
- [POM 821.14: Awards Processing](#)

## Education, Training, and Professional Development

### 1. Post-Entry Level Degrees

- a. Officers are expected to be lifelong learners. While most pharmacists have a doctoral-level degree as the qualifying degree, obtaining a post-entry level degree may develop additional skills to enhance leadership and value of the officer to the OPDIV and the USPHS Commissioned Corps.
- b. A post-entry level degree should be relevant and fit with the short and long-term goals of the officer. It is advisable to speak with a mentor when selecting and pursuing a degree program.
- c. Document coursework progress and completion by [submitting transcripts](#).

### 2. Certifications and Credentialing

Pharmacy officers are required to maintain pharmacist licensure, and it is the officer’s responsibility to ensure that CCHQ receives the necessary documents when required. Ideally, officers should seek, obtain, and maintain additional certifications that enhance performance in the job role, professional capacity, or deployment status. Documentation of certifications and credentials should be listed in the CV with a description of the benefit to the OPDIV and PHS missions. Examples of certifications include:

- a. The [Board of Pharmacy Specialties](#) (BPS) is recognized as the gold standard for determining which pharmacists are qualified to contribute at advanced practice levels. BPS provides certifications in multiple specialties.
- b. [Rx for Change: Clinician-Assisted Tobacco Cessation](#), which draws heavily from the Clinical Practice Guideline for Treating Tobacco Use and Dependence, is a comprehensive program for training students and licensed clinicians in virtually any health professional field.
- c. [APhA Certificate Training Programs](#).
- d. [APhA Advanced Training Programs](#).
- e. [ASHP Professional Certificates](#).



- f. The [National Clinical Pharmacy Specialist \(NCPS\) program](#) was established to provide a mechanism to ensure that all clinical pharmacy specialists in federal pharmacy demonstrate a uniform level of competency.
- g. [Regulatory Affairs Certification](#) (RAC) is a recognized credential for regulatory professionals to become certified in specific subject matters to demonstrate essential knowledge, critical thinking abilities, and a commitment to pursue professional development to augment the regulatory skillset in Regulatory Product Development.
- h. The globally recognized [Project Management Professional](#) (PMP) certification adds value to a management professional's portfolio by developing managerial, leadership, and technical skills for project management.

### 3. Leadership Training

Leadership courses are highly recommended throughout an officer's career. Officers should seek out opportunities to attend leadership courses through their OPDIV, the Commissioned Officer Training Academy (COTA) Learning Management System (LMS), or the private sector. Leadership courses help prepare officers for the roles and responsibilities for a successful career. These training courses should be documented in the eOPF and CV. Trainings should support agency/PHS missions.

Examples of leadership trainings opportunities include:

- Association of Health-System Pharmacists' (ASHP) [Pharmacy Leadership Academy](#).
- American Pharmacists Association (APhA) leadership opportunities.
- Organizations such as the [Arbinger Institute](#) or through university programs.
- Agency-specific leadership training courses.
- Trainings announced through the CCHQ listserv, including Officer Intermediate Course (O-3 and O-4) and Advanced Leadership Development Program (O-5 and O-6).
- Other organizations such as the Commissioned Officers Association (COA), Junior Officer Advisory Group (JOAG), PharmPAC, etc.

### 4. Public Health Training and Experience

Additional training opportunities and experience related to public health can help meet benchmarks. Training opportunities in healthcare management, public health policy, bioterrorism, advanced leadership, and emergency preparedness may be beneficial. It is recommended these trainings start at the local level and progress to national levels to align with levels of increasing responsibility throughout a career.

- The [National Incident Management System](#) (NIMS) is a systematic, proactive approach to guide departments and agencies at all levels of government, nongovernmental organizations, and the private sector to work together seamlessly and manage incidents involving all threats and hazards—regardless of cause, size, location, or complexity—in order to reduce loss of life, property, and harm to the environment.
- The [Certified in Public Health](#) (CPH) credential demonstrates maintenance of a national standard in public health focused on emerging and established public health issues.
- [CDC Learning Connection](#) helps locate training opportunities developed by CDC, CDC partners, and other federal agencies.
- [CDC TRAIN](#) operates through collaborative partnerships with state and federal agencies,

local and national organizations, and educational institutions.

- CCHQ sends emails about other public health training opportunities, such as D-SAFE (Deployment Safety Academy for Field Experience). Some of these are open to all officers, while others may be region- or discipline-specific.

## Career Progression and Potential

### 1. Mission Priority

- Throughout an officer's career, assignments fulfilling Mission Priority (MP) buckets will be measured for quality and impact by the promotion board. MP buckets are defined as follows:
  - **[MP Bucket 1]** Permanent duty assignment in organizations that primarily serve underserved and vulnerable populations (e.g., IHS, BOP, DHS-IHSC).
  - **[MP Bucket 2]** Permanent duty assignment in organization that provides direct clinical care (e.g., IHS, BOP, DHS-IHSC, NIH Clinical Center, DoD, USCG).
  - **[MP Bucket 3]** Serve in a difficult to retain discipline (physician, veterinarian, nurse practitioner, dentist, physician assistant). **This MP does not apply to pharmacists.**
  - **[MP Bucket 4]** Permanent duty assignment in a hazardous duty or isolated hardship location, or in national health security.
  - **[MP Bucket 5]** Assignments that demonstrate leadership (e.g., supervisor, manager, executive); considered a subject matter expert; independently leads programs, projects, and/or team.

### 2. Billet

- The position a USPHS Commissioned Corps officer encumbers has a defined billet, which is designated in an increasing level of responsibility as O-1, O-2, O-3, O-4, O-5, and O-6, and higher for flag-designated positions.
- Each position filled by an officer belongs to the OPDIV to which the officer is assigned. As such, the billet designation has been defined and determined by OPDIV leadership in consultation with Commissioned Corps leadership.
- Position billets reflect the ideal level of skills, qualifications, and responsibilities required to perform the duties of a position. The billet does not reflect the skills and qualifications possessed by the officer encumbering the position. The billet level of a position may only be increased by OPDIV leadership when the minimum skills, qualifications, and responsibilities necessary to perform the duties of the position permanently increase.
- Current billet and history of billets of previous positions are among the factors which promotion boards use in the promotion process. It is recommended that an officer's billet be at or above the officer's current rank when up for promotion, although this is not a requirement.
- An officer must be in a billet that has a rating at or above the grade of the proposed promotion to qualify for Exceptional Proficiency Promotion ([EPP](#)).

For more information regarding billets, see the following links:

- [CC23.5.4 – Billet Program](#)
- [Billet Forms](#)

### 3. Scope of Assignments

It is expected that officers will continue to grow in the scope of their responsibilities across their careers. This is shown by increasing levels of responsibilities in positions, an increase in billet, or by the scope of impact outside of the institution, agency, or discipline.

### 4. Geographic/Programmatic/Agency Moves (Mobility)

Geographic and programmatic moves are encouraged but are life-changing decisions that have impact on more than just duties. A geographic move is defined as a change in geographic location. A programmatic move is defined as a change in programs which may or may not be associated with a geographic move. These decisions should be carefully weighed and discussed with mentors to ensure that positions show growth across the career and meet the officer's overall career goals.

### 5. Collateral Duties

A collateral duty is an additional duty performed outside of any assigned roles. Collateral duties are an effective way to become more involved with the OPDIV and the USPHS Commissioned Corps. This involvement may foster teamwork, leadership skills, and becoming a subject matter expert. Involvement and growth in these activities throughout a career sets up an officer for continued levels of increasing responsibility. Involvement in collateral duties should be performed in a way that will not cause day-to-day performance to suffer.

### 6. Mission Contributions

Mission contributions may be different depending on the agency an officer serves. Officers should find opportunities that meet the agency needs through Temporary Duty (TDY) assignments, deployments, and other contributions.

### 7. Career Pathways

[Career pathways](#) are a CCHQ-created resource to help officers advance professionally and identify relevant trainings and competencies. The four pathways include clinical care, applied public health, national security, and health strategy and innovation. Pathways are not fixed and are meant to provide a resource for officers to identify professional development opportunities. Furthermore, career pathways are distinct from promotion benchmarks.

## Officership: Professional Contributions and Services to PHS Commissioned Corps

### 1. Office of the Surgeon General Initiatives and Groups

#### PharmPAC

Getting involved in the PharmPAC can be a rewarding way to demonstrate officership. In addition to serving as a voting member, the PharmPAC is made up of subcommittees and workgroups that regularly look for volunteers. Once involved, stay active and keep track of work performed. Being a member of a group isn't enough; promotion boards

look for the impact of contributions as a member. More information can be found at: [USPHS PharmPAC](#).

### **Other Chartered Advisory Groups**

There are a number of other chartered advisory groups that officers can get involved with: [USPHS Office of Surgeon General](#).

## **2. Mentoring**

Officers should have multiple mentors to navigate a successful career. Mentoring can be done informally or through a formal program. Mentors provide professional and career development guidance based on their experience. A mentor should be someone who can be trusted and who understands an officer's career goals so they can help the officer achieve those goals. Officers are encouraged to become mentors while progressing in their careers. Serving as a mentor provides opportunities to participate in the career development of junior officers and colleagues through the sharing of expertise and knowledge. Check with the agency liaison to see if a formal mentoring program is available. The Commissioned Corps Pharmacy Mentoring Network (CCPMN) is a one-on-one voluntary mentoring program that matches mentees and mentors: [USPHS PharmPAC - Career Development - Mentoring](#).

## **3. Local/Regional/National Committees**

Involvement in local, regional, and national committees is an excellent way to show officership. Choosing to lead a committee can improve subject matter expertise and leadership skills. Keep track of positions held and accomplishments within the committee to show impact.

## **4. Presentations and outreach**

Presentations and outreach are an effective way to demonstrate passion. Examples include returning to an alma mater to discuss USPHS career options, presenting at a professional meeting to showcase noteworthy outcomes in a newly established outreach program, or highlighting the newest innovative idea that has led to improved clinical outcomes. Keep track of each presentation and audience for documentation in the CV.

## **Documents: CV, COER, OS, and ROS**

The PharmPAC Career Development page is an excellent resource for these key documents related to promotion: [PharmPAC-Career Development](#).

### **CV and Cover Page**

- The CV is a document that highlights the experiences, knowledge, skills, and accomplishments of an officer. It serves as a one-stop shop for showing impact in each of the promotion precepts.
- CVs are used in multiple ways, including when applying for a new position, as a reference for preparing an award, and as an important piece of a promotion packet.
- When applying for positions, the promotion CV and cover page may or may not be an acceptable format. Consider having a resume if applying to positions at multiple agencies.
- Officers should emphasize current professional duties and address specific criteria and selective factors required to perform the job. When preparing a CV for

promotion, the officer should emphasize ways they meet and exceed the benchmarks for the newly eligible rank.

- All officers should utilize the provided CV format: [Curriculum Vitae Guidance](#). Officers should list accomplishments and impacts as related to the promotion benchmarks. Officers should update their CV at least annually in their eOPF; only the latest CV is maintained in the eOPF. Officers should seek feedback and input from experienced mentors and officers to ensure all information is presented in the most effective manner possible.

### Commissioned Officers' Effectiveness Report (COER)

The COER is an officer's annual performance assessment. This required document reviews and reflects the officer's performance for their assigned OPDIV annually from 1 October through 30 September. Officers are encouraged to have discussions with supervisor(s) about the COER elements and performance expectations throughout the year.

It may be helpful to record accomplishments throughout the year to help complete the COER. Suggested methods include a notebook, self-email, journal, Microsoft OneNote, Outlook Calendar, Word Document, Excel Spreadsheet, or even sticky notes on the desktop.

### Officer Statement (OS)

The Officer Statement is part of the promotion packet. This document should be focused on the officer's USPHS Commissioned Corps-related duties and impact, such as involvement with OSG-chartered advisory groups, the Commissioned Officers' Association, professional organizations, and community engagements that promote USPHS visibility and outreach. The OS should expand upon the officership highlights listed on the CV cover sheet. Objective information, when possible, is important to show the impact of the officer's actions. The OS is limited to one page and should summarize:

- Support of USPHS Commissioned Corps activities,
- Commitment to visibility as an officer, and
- Vision and expectations of a career in the USPHS Commissioned Corps and how they align with the USPHS Commissioned Corps' mission.

### Reviewing Official Statement (ROS)

The Reviewing Official Statement is included in the annual COER and serves as another important document in the promotion process. This document should describe the officer's agency/OPDIV involvement and impact and substantiate, but not repeat, the information included in the officer's CV. The ROS should be written in plain language, include objective measurements for accomplishments and impacts, and avoid agency-specific jargon and highly technical language.

The ROS:

- Is a one-page document at the end of the COER that allows the agency to provide input to the promotion board regarding readiness for promotion.
- Should address the time period in the position or program, or longer if the reviewing official (RO) has knowledge of the officer's performance and contributions.
- Is completed by the reviewing official during the COER submission process (usually the second line supervisor – "supervisor's supervisor").

- Is the only official letter of recommendation allowable in the eOPF.

## How the Promotion Documents Work Together

In general, agency-related work should be included in the CV (cover sheet and body), COER, and ROS. The CV cover sheet should serve as an outline, while the COER, ROS, OS, and CV body go into more detail.

The COER should be limited to the current year, and the CV and ROS should showcase career highlights, generally since last promotion. The ROS should focus on the leadership perspective of agency work and how it impacts the agency's mission.

Officership/Corps-related work should be included in the OS and the CV (cover sheet and body).

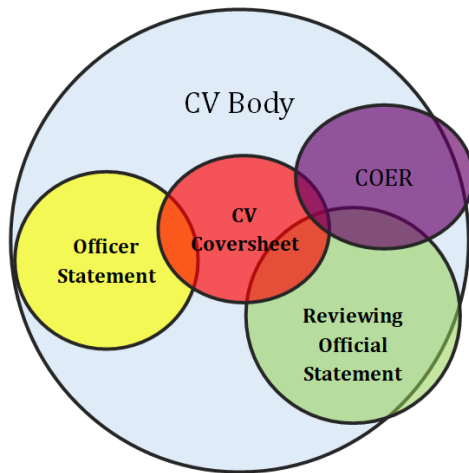


Figure 1: Officer performance documentation content Venn diagram

## Accuracy of Documents

Each officer is responsible for ensuring the correct and relevant documents are accounted for in the appropriate Commissioned Corps sites. Keep copies of documents and proof of submission. Official personnel document repositories include:

1. eOPF (electronic Official Personnel File)
2. PIR (Promotion Information Report)
3. Others:

**Documents uploaded directly to the eOPF by the officer:** CV, thank you letters, certificates or letters of appreciation, special skills documents, and other support activity documentation. During a promotion-eligible year, an officer must also submit an OS. Submission guidelines and FAQs for eOPF documents are available on the [CCMIS website](#).

**Documents sent to program staff for processing:** applications, awards, and long-term training documentation.

**Documents routed through Agency/Operating Divisions (OPDIV) Liaison:** COERs, billet changes, Permanent Change of Station (PCS), and all other Personnel Actions (Form PHS-1662).

## Readiness/Deployments

All Public Health Service officers are expected to maintain the basic level of force readiness at all times throughout their career.

Officers should review the Officer Secure Area Dashboard and the Readiness and Deployment Branch ([RDB](#)) resource pages to ensure readiness compliance. For more information about readiness requirements, officers can visit the [RDB Essentials](#) on the CCMIS website.

### RDB Self-Service

The RDB Self-Service area is accessed through the [CCMIS Secure Area](#). The home page of the RDB Self-Service area contains updates and important messaging related to readiness updates, waivers, new guidance, etc.

Officers are responsible for maintaining their current information using the RDB Self-Service function and ensuring that auto-populated information is carried over correctly from other systems, such as training history from the Commissioned Corps Learning Management System (CCLMS). It is important to remember to update personal information especially after changing positions or completing a permanent change of station (PCS).

The information on the RDB Self-Service site includes:

- **Personal Information:** phone numbers, email addresses, home and mailing addresses, emergency contacts, supervisor information, and ethnicity.
- **Readiness Information:** readiness status and history, physical fitness history, waivers, verified weight reports, weight management plans, immunization history (with downloadable immunization report), deployment roles, and deployment preparation plans.
- **Deployment Information:** passport information, visa information, language proficiency, airport(s), specialty information, team information, and deployment history.
- **Certification and Training:** certification expiration dates for Basic Life Support (BLS) and Advanced Cardiac Life Support (ACLS); training history from CCLMS; and Field Medical Readiness Badge (FMRB) status.

### Periodic Health Update (PHU)

All officers must complete and submit a [Periodic Health Update](#) (PHU) annually between the first day of the month prior to the officer's birth month through the last day of the month after the officer's birth month (3-month window). This must be completed at least once a year.

The PHU has five components:

1. Medical History.
2. Physical Examination.
3. Behavioral Health Survey.
4. Dental examination.
5. Additional tests, as deemed necessary.

## Deployment Preparation Plan (DPP)

Officers must complete and submit an annual [Deployment Preparation Plan](#). A DPP is valid for twelve months and must be updated when a change in family circumstances occurs.

## Licensure

Public Health Service pharmacists must possess and maintain a current unrestricted professional pharmacy license in at least one U.S. state and maintain current documentation in their eOPF.

## Immunizations

Officers must be up-to-date with their [immunizations and documentation](#).

## Annual Physical Fitness Test

Officers must pass the Annual Physical Fitness Test (APFT) once a year. Information on the APFT is available at: [RDB - APFT](#).

## Training

### Public Health Service Officer Readiness Training Modules

To qualify at the Basic Readiness level, an officer must successfully complete 12 online training modules within the first 12 months of active duty. There are eight RDB courses available at [Responder e-Learn 2.0](#) and four Federal Emergency Management Agency (FEMA) courses available at [National Incident Management System](#) (NIMS). USPHS Commissioned Corps officers can complete additional online training on the [Commissioned Corps Learning Management System \(CCLMS\)](#). The wear of the [Field Medical Readiness Badge \(FMRB\)](#) will be reviewed and authorized upon completion of these modules within a three year period involving a CCHQ deployment lasting at least seven days and passing the APFT with an "Excellent" overall rating (score 75 or greater).

### Basic Life Support (BLS) Training

Officers must successfully complete and maintain an active Basic Life Support certification.

## Deployment Role

All officers must identify a deployment role in RDB under the Self-Service section, which does not need to be a clinical role such as "Pharmacist." Per [POM 821.77](#), all USPHS Commissioned Corps officers who are in clinical deployment roles or who are applying for Health Professional Special Pay (Incentive Pay [IP] and/or Retention Bonus [RB]) must obtain [80 practice hours annually](#). Clinical hours may be completed through various methods, and documentation through the appropriate form must be completed and submitted by the anniversary of the IP/RB agreement.

## Uniforms

Officers shall acquire and maintain [all required uniforms](#). A one-time uniform allowance is provided for all officers. Officers are required to have all required uniforms on hand and be ready when called to respond to any need.



## Resources

### CCMIS

Officers are strongly encouraged to visit the [CCMIS website](#) regularly. This website is the gateway to information for USPHS Commissioned Corps officers. Contact information, FAQs, eOPF, eCCIS, payroll information, information pamphlets, training information, important contact numbers, and other links are all available.

### PharmPAC

The [Pharmacy Professional Advisory Committee](#) monthly meetings and committees provide pharmacy officers with timely category updates, category benchmark information, career development resources, and collaborative project opportunities.

### Listserv Communication

Listservs are email-based mailing lists and serve an important role in keeping officers up-to-date with information. Pharmacy officer listservs are available at: [USPHS PharmPAC - PAC Subcommittees - Communications - Listservs](#).

## Appendix: Acronym Dictionary

<b>Acronym</b>	<b>Meaning</b>
<b>APFT</b>	Annual Physical Fitness Test
<b>APhA</b>	American Pharmacists Association
<b>ASHP</b>	American Society of Health-System Pharmacists
<b>BOP</b>	Bureau of Prisons
<b>CAD</b>	Call to Active Duty
<b>CCHQ</b>	Commissioned Corps Headquarters
<b>CCLMS</b>	Commissioned Corps Learning Management System
<b>CCMIS</b>	Commissioned Corps Management Information System
<b>CCPMN</b>	Commissioned Corps Pharmacy Mentoring Network
<b>CDC</b>	Centers for Disease Control and Prevention
<b>CMS</b>	Centers for Medicare & Medicaid Services
<b>COER</b>	Commissioned Officers' Effectiveness Report
<b>CPO</b>	Chief Professional Officer
<b>COTA</b>	Commissioned Officer Training Academy
<b>CONUS</b>	Continental United States
<b>CV</b>	Curriculum Vitae
<b>DoD</b>	Department of Defense
<b>eCCIS</b>	Electronic Commissioned Corps Issuance System
<b>eCORPS</b>	Electronic Commissioned Officer Resources Processing System
<b>eOPF</b>	Electronic Official Personnel Folder
<b>EPP</b>	Exceptional Proficiency Promotion
<b>HHS</b>	Department of Health and Human Services
<b>IHS</b>	Indian Health Service
<b>IP</b>	Incentive Pay
<b>HOR</b>	Home of Record
<b>HOS</b>	Home of Selection
<b>HPSP</b>	Health Promotion Special Pay

<b>Acronym</b>	<b>Meaning</b>
<b>HRSA</b>	Health Resources and Services Administration
<b>FDA</b>	Food and Drug Administration
<b>ICS</b>	Incident Command System
<b>IRA</b>	Individual Retirement Account
<b>MAB</b>	Medical Affairs Branch
<b>MTF</b>	Military Treatment Facility
<b>OBC</b>	Officer Basic Course
<b>OCONUS</b>	Outside Continental United States
<b>OPDIV</b>	Operating Divisions
<b>OMC</b>	Officer Mid-level Course
<b>OS</b>	Officer Statement, or Office of the Secretary
<b>OSG</b>	Office of the Surgeon General
<b>PCS</b>	Permanent Change of Station
<b>PharmPAC</b>	Pharmacy Professional Advisory Committee
<b>PIR</b>	Promotion Information Report
<b>PLANT</b>	Pharmacists Learning and Networking Together
<b>PLW</b>	Pharmacists Leading the Way
<b>PMAP</b>	Performance Management Appraisal Plan (civilian equivalent to COER)
<b>RDB</b>	Readiness and Deployment Branch
<b>ROS</b>	Reviewing Official Statement
<b>T&amp;E</b>	Training and Experience
<b>SAMHSA</b>	Substance Abuse and Mental Health Services Administration
<b>SES</b>	Senior Executive Service
<b>TSP</b>	Thrift Savings Plan
<b>TIS</b>	Time in Service
<b>UCMJ</b>	Uniform Code of Military Justice