



Commissioned Corps BULLETIN

U.S. Department of Health and Human Services

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Surgeon General's Column

Last month RADM Beato and I issued the following new mission statement for the Commissioned Corps of the U.S. Public Health Service: "Protecting, promoting, and advancing the health and safety of the Nation." This broad mission is achieved through three overarching activities: rapid and effective response to public health needs; leadership and excellence in public health practices; and the advancement of public health science.

Our Corps has for many years carried out responsibilities in support of this mission. I want to thank our fellow offi-

cers who participated in the development of this mission statement, and who put into words the values we live by each day. I urge you to continue to bring public health support to our fellow citizens, refugees who come to our Nation's shores and other points of entry, and to people in nations around the world whom we assist in times of public health emergencies.

I particularly want to thank all our fellow officers who are helping the people of Indonesia to recover and rebuild from the devastating tsunami that hit parts of Asia and East Africa in December. I

am truly proud of these officers. When any of our men and women in uniform show their dedication and compassion to our neighbors throughout the world, they become the embodiment of the best of the American spirit.

The Public Health Service (PHS) officers deployed to Indonesia have a wide variety of expertise and responsibilities. They are providing health and medical services that include vaccinating children and adults against contagious diseases, providing primary care services (such as diagnosing and treating
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REMINDER!

The Commissioned Corps Bulletin is Moving to a Fully Electronic Format!

This issue of the *Commissioned Corps Bulletin* is one of the last to be published in its present format. As announced in the December 2004 issue, the *Commissioned Corps Bulletin* will become fully electronic, and it is anticipated that the first 'E-Bulletin' will be available by mid-May.

A number of suggestions on how the electronic *Bulletin* should be formatted, etc., have been received, and all of the suggestions have been considered. The electronic system will contain an e-mail notification method indicating when each new version is released. Items of high importance will result in an interim e-mail message being sent to subscribers. Topics for each article will contain a brief summary with a link to the full article.

Eventually, other features, such as archiving articles, search capabilities, and links to other areas of the Web site will be available.

A new mail list will be created for the *E-Bulletin*. Initially, our present personnel database of active-duty officers' e-mail addresses will be used. A sign-up page will allow all interested persons to subscribe. All active-duty officers are required to update their e-mail address information whenever it changes since all active-duty officers are required to access the *E-Bulletin*.

We are looking forward with great excitement to the *Commissioned Corps Bulletin's* new look which will be both a cost effective and timely method for communicating policy, operations, and sup-

port services of the Commissioned Corps of the U.S. Public Health Service.

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Surgeon General's Column

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illnesses and injuries), environmental services (such as making water suitable for drinking), and assisting with mental health care.

One of the officers deployed to assist in the tsunami relief and recovery effort is sharing his experiences serving the people of Indonesia in a journal available online at the Office of the Surgeon General Web site: www.surgeongeneral.gov. LCDR Thomas Pryor, an intensive care unit nurse with the Indian Health Service in Phoenix, Arizona, has opened his journal to share his thoughts and efforts as he helps the people of Indonesia. I encourage you to review LCDR Pryor's journal. He and about two-dozen other officers are currently serving on the USNS *Mercy*, providing help to the people of Indonesia. Other PHS officers are providing help to people in tsunami-ravaged areas in Thailand, Indonesia, and Sri Lanka.

To date, LCDR Pryor has shared a dozen journal entries and photos, all of which serve to give the general public and our fellow officers in the other uniformed services insight into what we as PHS officers are doing to support the continued recovery from this tremendous natural disaster, and avoid any additional spread of infectious disease.

As you know, in this new era of modern travel, it doesn't take long for a local disease or infection to spread to neighboring communities and nations, so it's critical that public health be practiced around the globe. We can most effectively defend our Nation's borders against emerging diseases by treating them on the front lines, wherever they may be. And in doing so, we can save and improve the lives of people not just at home, but also abroad.

It should be completely clear to every American who has worn the PHS uniform that your efforts made the Nation and the world a healthier place. That is a great legacy for today's officer, and one that our new mission statement and our continuing service across the United States and around the world will bear out for generations to come.

VADM Richard H. Carmona
Surgeon General

Promotion Precept in Development

Since Secretary Thompson announced the transformation of the United States Public Health Service Commissioned Corps on 3 July 2003, there has been a continuing commitment to improve the readiness of the Corps to respond to urgent and emergency public health needs. In fact, the Corps' new mission statement, recently published, reflects this renewed emphasis very succinctly. There have been many recent examples of Corps officers having been mobilized and deployed to address extraordinary challenges, such as during the Florida hurricanes and the recent South Asia tsunami crisis. While responses to emergent needs have always been an implicit part of service as a Corps officer, readiness and response have become explicit central elements in service in the Corps for which all officers are expected to qualify and be ready to participate.

Transformation has also emphasized increasing the Corps' commitment and capacity to serving some of our most disadvantaged populations that continue to have difficulty accessing care. New approaches are being sought to help increase the likelihood that Corps officers will volunteer for clinical billets that are located in isolated / hardship locations or will seek and accept assignments that have been traditionally difficult to fill.

There are many ways in which Corps officers can be provided incentives for responding to these new directions for the Corps. Financial inducements, career development enhancements, and professional satisfaction are only some the future avenues that are possibilities. Officers who perform well, who increase their personal and professional value to the Corps, and who respond positively to the newly articulated missions of the Corps can also be recognized and rewarded through existing systems, such as the promotion process.

In fact, new permanent and temporary promotion instructions were approved on 18 December 2003, for use in recommending promotions during Promotion Year 2004 (PY'04). At that time, response readiness was added as a precept and an absolute condition for promotion beginning this year. A commitment was also made that beginning in PY'05, additional precept consideration would be given for isolated / hardship assignments, among other things. For various reasons, implementing this assignment precept was not feasible for PY'05, but will be for PY'06.

A task group, managed by the Office of Commissioned Corps Force Management, has been formed to analyze the best way to proceed with a clearly visible, easily understood, and efficiently administered precept that will recognize and reward service in isolated / hardship and similar positions. The options that this task group develops will be presented to, and reviewed by, the Surgeon General and finally sent to the Acting Assistant Secretary for Health for a decision after the options have been vetted through such Corps' leadership groups as the Surgeon General's Policy Advisory Council Representatives and the Chief Professional Officers.

This new precept consideration is intended to underscore the value to the Department and the Corps of officers who are willing to serve in potentially less desirable jobs. The precept is consistent with the best traditions of the Corps and newly articulated mission statement. It is important to note that recognition in this precept, in the same manner as readiness had, has always been a consideration taken into account by promotion boards. As with the readiness precept, the changing nature of the Corps and its expectations, necessitates a more formal process of recognition and reward.

It is possible, as the transformed Corps develops and implements new force management and career development systems, that this precept will be adjusted. Until these other systems are in place and functioning effectively, the promotion system must be used in part to underscore not only the importance of serving existing agency missions, but also the strengthened commitment to be ready to meet new, urgent and emergency public health challenges as well as continually difficult-to-address service requirements.

OCCFM's Phone Number Has Changed to 240-453-6161

Please note: Effective immediately, the main office phone number for the Office of Commissioned Corps Force Management (OCCFM) has changed from 240-453-6074 to our new number—240-453-6161. Please make a note of our new number. Additional OCCFM information is available at <http://dcp.psc.gov/OCCFM.asp>.

Flag Grade Billets Review and Promotions

A revised policy instruction governing the selection and assignment of flag grade officers has been approved by the Acting Assistant Secretary for Health (ASH). With the issuance of this new instruction, a request has been made to the Heads of the Department's Operating and Staff Divisions (OPDIVs/STAFFDIVs), Coast Guard, Federal Bureau of Prisons, and Department of Defense (DoD) for submission of all current and proposed flag billets, along with their billet descriptions. The routine tri-annual assessment of all flag billets will be simultaneously conducted using the information provided.

With the issuance of this revised instruction, criteria that will be used to assess flag grade billets encumbered by, or proposed to be encumbered by, Public Health Service (PHS) Commissioned Corps officers is now similar to that used by the Department of Defense (DoD) to evaluate and rank order flag grade billets. The specific criteria and elements

are set forth in Subchapter CC23.4, INSTRUCTION 7, "Flag Grade Officer Selection and Assignment," of the Commissioned Corps Personnel Manual (<http://dcp.psc.gov/navigati.asp>). The Navy has successfully used parallel and similar criteria for evaluating and designating their flag grade billets since 1998. A total of sixteen factors, grouped into four evaluative criteria, will be used in the assessment of the PHS billets. They include:

- I. Nature of Billet
- II. Magnitude of Responsibilities
- III. Significance of Actions and Decisions
- IV. Recommendations of the OPDIVs and STAFFDIVs

Although the basic criteria are derived from the DoD model, the application and interpretation of them will be specific to the nature of flag officer assignments,

responsibilities, and duties within the Corps. Immediately after the completion of the process to assess proposed and encumbered flag officer billets, the Office of the Surgeon General will convene a flag officer promotion board that will make recommendations to the ASH.

The final step in the selection and promotion process for flag grade officers commences when the ASH, in consultation with the Surgeon General, establishes the final rank ordering of flag officers and billets and determines the number of vacancies available for promotion. Based on these numbers, the ASH forwards recommendations for promotion to the Secretary of the Department of Health and Human Services. The Secretary is the approving authority for all flag grade promotions and reassignments. It is anticipated that the entire process for Promotion Year 2005 will be completed by early this summer. □

Office of Force Readiness and Deployment

Deployment on USNS Mercy

Fifteen Public Health Service (PHS) Commissioned Corps officers have deployed on the ship, USNS *Mercy*, in support of a mission to aid those affected by the 26 December 2004 tsunami in Asia. The team consists of one biomedical engineer, two nurses, two physicians, eight mental health providers, and two environmental health officers. The team is participating in an on board medical mission as well as outreach missions in Aceh. When traveling to Aceh, they are transported via helicopter while continuing to bunk on board the USNS *Mercy*. The PHS team has assigned roles and tasks and is working alongside their counterparts in the U.S. Navy and Project Hope.

The officers who deployed through the Office of Force Readiness and Deployment (OFRD) are from Operating Divisions, Staff Divisions, and non-Department of Health and Human Services (HHS) organizations such as the Indian Health Service, U.S. Coast Guard, Food

and Drug Administration, Health Resources and Services Administration, U.S. Department of Agriculture, and Department of Homeland Security (Immigration).

For more information regarding the USNS *Mercy* see <http://www.msc.navy.mil/mediacenter/default.asp?page=mercy>

Top Officials (TOPOFF) Exercise

OFRD is working with our partners as we plan for TOPOFF 3. At this time, HHS staff and OFRD are meeting to make the TOPOFF 3 participants aware of the principal events of TOPOFF 2; to share the global and HHS-specific objectives during our participation in the upcoming TOPOFF 3; to share the essential information required for preplanning and deployment of HHS assets to the field; and to discuss the current policy and procedures for the agents most probable to be encountered during the exercise. OFRD will be putting out a call if

we have a request for officers to be on call or to deploy for this event.

Training

OFRD will send two officers to participate in the March 2005 Medical Management for Chemical and Biological Casualties course (MMCBC). MMCBC will teach the threat and treatment of chemical and biological agents as well as the field management of casualties. Two officers will be attending the Joint Operations Medical Managers Course (JOMMC). JOMMC will help our officers function in management and leadership roles in an operational environment. Both courses will allow PHS officers to train with their Department of Defense counterparts.

Please check the OFRD Training Web page for an upcoming MMCBC course listing and other courses offered (<http://ccrf.hhs.gov/ccrf/FY%202005%20Training%20Page.htm>). □

PHS Pilot Dental Program

The President's Management Agenda requires all Federal agencies to examine opportunities for outsourcing functions that the private sector can perform more cost-effectively. An examination (A-76 Competitive Outsourcing Study and Performance Decision) of the Beneficiary Medical Program's dental claims processing function found that the private sector could process dental claims with a cost savings to the Federal Government. The Public Health Service (PHS) Commissioned Corps has awarded a contract to United Concordia Companies, Inc. (UCCI) of Harrisburg, PA, for the purpose of administering the PHS Commissioned Corps active-duty dental program. The

contract was effective 18 January 2005, which was the beginning of a 90-day transition period scheduled to end on 1 May 2005.

UCCI currently administers the TRICARE Dental Program (TDP) for the Department of Defense, providing dental coverage for Reserve Component members and their families, and family members of active-duty Uniformed Services personnel.

PHS officers and current dental providers will experience minimal changes with the new program, and officers may remain with their current dental providers. The new program offers several ex-

citing benefit enhancements which include the payment for services mailed along with a Dental Explanation of Benefits to the provider, and Web site (www.ucci.com) access for claims status determination.

A formal announcement from the Acting Assistant Secretary for Health is available on the Commissioned Corps Management Information System Web site (<http://dcp.psc.gov/>). The announcement contains more details of the transition to the new dental program. Also, UCCI will mail a welcome package to you in the near future with additional information.

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New USPHS Commissioned Corps Mission Statement

The Acting Assistant Secretary for Health and the Surgeon General are pleased to announce the 15 February 2005 implementation of a new Mission Statement, and jointly state: "While we have all been carrying out our responsibilities in support of this mission, we expect everyone to embrace this new statement, to act accordingly, and to articulate and promote this new language whenever possible and appropriate."

**THE MISSION OF THE
COMMISSIONED CORPS OF THE
U.S. PUBLIC HEALTH SERVICE**
*"Protecting, promoting, and
advancing the health and safety
of the Nation"*

As America's Uniformed Service of public health professionals, the Commissioned Corps achieves 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.

Please note: The entire announcement is available on the 'Welcome' page of Commissioned Corps Management Information System Web site at <http://dcp.psc.gov>.

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Update: Commissioned Officers' Effectiveness Reports

Department-wide Objectives

In keeping with the 'One HHS' initiative, the Department and PHS Commissioned Corps leadership are considering integrating Department-wide measurable 'management' objectives and 'program' objectives into the commissioned corps' Commissioned Officers' Effectiveness Reports (COERs).

These objectives each consist of 10 components. The purpose of the '10 Department-wide Management Objectives' is to better integrate Department of Health and Human Services management functions to ensure coordinated, seamless, and results-oriented management across all Operating and Staff Divisions of the Department.

The mission of the '10 Department-wide Program Objectives' is to enhance the health and well-being of Americans by providing for effective health and human services and by fostering strong, sustained advances in the sciences underlying medicine, public health, and social services.

COERs on Fiscal Year Cycle

It is anticipated that future COERs will be based on a fiscal year cycle, running from October 1 through September 30 each year, rather than on the current cycle of June 1 through May 31. In order to accomplish this, the 2005 COERs will expand to include a 15-month cycle—June 1, 2004 through September 30, 2005. The new *E-Bulletin* will keep you informed of this important change.

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Recent Deaths

Note: To report the death of a retired officer or an annuitant to the Office of Commissioned Corps Support Services (OCCSS), please phone 1-800-638-8744.

The deaths of the following active-duty and retired officers were recently reported to OCCSS:

<i>Category / Rank / Name</i>	<i>Date</i>
MEDICAL	
CAPTAIN	
Dominick J. Lacovara	01/16/05
Patricia A. Webb	01/24/05

COMMANDER	
Lisa S. Rosenblum	01/15/05
NURSE	
CAPTAIN	
M. Lois Power	02/07/05
ENGINEER	
CAPTAIN	
Aleck Alexander	01/22/05
Archie B. Freeman	01/17/05
SCIENTIST	
CAPTAIN	
Charles S. Richards	02/02/05

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Retirements – February

Category/Rank/Name OPDIV/STAFFDIV/Program

MEDICAL

CAPTAIN

Onelia Crespo-Cruz	HRSA
Albert J. Fornace, Jr.	NIH
William F. McDonnell III	EPA
Allan S. Noonan	CDC
Guillermo R. Otero-Herrmann	HRSA
Richard W. Steketee	CDC

COMMANDER

William P. Durant	IHS
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NURSE

CAPTAIN

Erica M. Avery	IHS
David A. Forsythe	IHS
Barbara L. Hsu-Trawinski	IHS
Harold W. Pitt	IHS
James T. Stackhouse	IHS
Melinda Weissner-Lee	IHS
Jaloo I. Zelonis	IHS

COMMANDER

Candice S. Skinner	BOP
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ENGINEER

CAPTAIN

Kerry M. Gragg	IHS
Richard R. Truitt	IHS

LIEUTENANT COMMANDER

Michael A. Friedman	NIH	<input type="checkbox"/>
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Category/Rank/Name OPDIV/STAFFDIV/Program

SCIENTIST

CAPTAIN

Thomas B. Shope, Jr.	FDA
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ENVIRONMENTAL HEALTH

CAPTAIN

Jane B. McCammon	CDC
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COMMANDER

David H. Shishido	PSC
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PHARMACY

CAPTAIN

Russell E. Alger	IHS
Grady H. James, Jr.	BOP
Donald C. Peters	IHS
William B. Sisco	IHS

COMMANDER

Cheryl L. Aune	IHS
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LIEUTENANT COMMANDER

Malena A. Jones	IHS
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DIETETICS

CAPTAIN

Mercedes B. Mota	FDA
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HEALTH SERVICES

CAPTAIN

Franklin D. Crooks	HRSA	<input type="checkbox"/>
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Call for Nominations—Health Services PAC

The Health Services Professional Advisory Committee (HS-PAC), which provides advice to the Surgeon General and the Health Services Chief Professional Officer on professional and personnel issues related to the Health Services category, is seeking nominations for membership.

Selections, which are based on the nominee's commitment to public health activities and specified criteria in the HS-PAC Charter (e.g., organizational, discipline, gender, minority representation), are made by the HS-PAC and approved by the Surgeon General. Appointment will be made for 3-year terms beginning **1 January 2006**. HS-PAC members are expected to obtain the necessary support of the Department's Operating Divisions/Staff Divisions, as well as non-Department Programs that employ Corps officers, to attend six scheduled meeting per year in Rockville, MD. With permission of the HS-PAC Chair, members stationed outside the Washington, DC area may

participate in up to five of these meetings via teleconference.

A self-nomination form (which includes a space for supervisory approval) can be found on the HS-PAC Web page at <http://www.usphs-hso.org>. Please complete the self-nomination form and send it along with a current curriculum vitae (including a summary sheet) and cover letter describing how your specific experience and expertise will benefit the HS-PAC. The completed package must be submitted from **9 April through 15 June 2005**, via e-mail or mail (e-mail is preferred; submit a scanned file of the signature page), to:

CDR John J Cardarelli II
 Chair, Membership Subcommittee,
 HS-PAC
 26 W. Martin Luther King Dr. (MS 271)
 Cincinnati, OH 45268
 Phone: 513-487-2422
 E-Mail: Cardarelli.john@epa.gov

Call for Nominations— JOAG's Annual Awards

The Junior Officer Advisory Group (JOAG) is requesting nominations for the "Junior Officer of the Year Award" and the "JOAG Excellence Award" to be presented on Thursday, June 9, 2005, at the annual Commissioned Officers Association-sponsored conference to be held in Philadelphia, PA.

The "Junior Officer of the Year Award" recognizes a junior officer at the temporary grade of O-1 through O-4 in the Public Health Service (PHS) Commissioned Corps that has made a significant contribution to the overall mission of the PHS. The "JOAG Excellence Award" recognizes a non-voting, active member of the JOAG for demonstrating outstanding, dedicated effort, and commitment to JOAG through active committee participation.

If you know outstanding junior officers deserving of these awards, please review the criteria available on the JOAG Web site (www.joag.org) and turn in your nomination(s) no later than **30 March 2005**. All nominations will be considered.

Submit *all* nominations to:

LCDR Brenda M. Ross
 PSC/Federal Occupational Health
 1301 Young Street Suite 772
 Dallas, TX 75202
 Phone: 214-767-3062
 Fax: 214-767-0002

Reminder

Call for Nominations— Health Services PAC's 2005 Kissel and Garcia Awards

The Health Services Professional Advisory Committee (HS-PAC) is inviting nominations for two major 2005 awards: *Stanley J. Kissel Award for Outstanding Health Services Professional of the Year* and *Joseph Garcia Jr. Award for Outstanding Junior Health Services Professional of the Year*. Nominations must be received by **15 April 2005**.

Please see page 7 of the January 2005 issue of the *Commissioned Corps Bulletin* for complete information (http://dcp.psc.gov/PDF_docs/Jan05ccb.pdf).

Call for Nominations for the Physicians Professional Advisory Committee 2005 Awards

The Physicians Professional Advisory Committee (PPAC) to the Surgeon General of the U.S. Public Health Service (PHS) is seeking nominations for three physician awards. These awards will be presented at the upcoming Commissioned Officers Association's Professional Conference to be held in Philadelphia, PA, in June 2005. The awards will honor either civil service or PHS commissioned officer physicians. Listed below are descriptions and evaluation criteria for each of the awards.

CLINICAL PHYSICIAN OF THE YEAR:

This award will recognize a clinical physician who consistently achieves high standards in the practice of medicine. He/she is able to find innovative ways of delivering quality medical care despite the constraints of budget and personnel. This individual is consistently looked upon as a role model by his/her peers and is a valuable resource person due to the extended length of his/her service. There are four evaluation criteria for this award:

- Clinical skills (examples: board certification; CMS activity; additional relevant clinical training/skills; etc.)

- Innovative contributions to delivering patient care (examples: developed new ways to educate patients; used home visits to improve access and quality of care; etc.)
- Contributions to the field of clinical medicine (examples: teaching medical students/residents; patient education; membership in medical societies; publications; etc.)
- Leadership (examples: supervise staff/team; Department Chair/Head; Clinic Director; etc.)

PHYSICIAN RESEARCHER OF THE YEAR:

Recognizes individual initiative, accomplishment, and accountability for actions that increase the overall effectiveness of the PHS through research. This individual has established research programs or approaches that enhance healthcare delivery or has improved existing research programs. In addition, he/she has developed and implemented research programs that have raised the health and safety consciousness of the public or resulted in significant cost savings or cost avoidance. The following elements are the evaluation criteria for this award:

- Research publications in peer-reviewed journals
- Research publications in popular and lay print
- Scientific lectures and presentations
- Contributions to the future development of the field (examples: teaching students/residents; mentoring; membership in professional societies; etc.)
- Leadership (examples: supervise staff/team; Department Chair/Head; Director of a research laboratory or program; etc.)

PHYSICIAN EXECUTIVE OF THE YEAR:

This award will recognize a physician executive who plays a key role in the successful administration or management of an office or program activity in the PHS. This individual makes exceptional contributions to the accomplishments, goals, and objectives of the PHS while serving as a manager, administrator, or supervisor. He/she exercises exceptional judgment in making managerial decisions and developing innovations that provide increased effectiveness in the management of programs. He/she makes choices

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Global Health Summit Agenda Announced

The Public Health Service Commissioned Officers Foundation (COF) has announced the agenda for the 2005 **Global Health Summit**, which will be held June 5 at the Wyndham in Philadelphia, PA, immediately preceding the annual Public Health Professional Conference.

The Summit will feature the unveiling of Surgeon General Richard H. Carmona's *Call to Action on Global Health*, a precursor to his planned *Report on Global Health*. The goal of the Summit is to seek input from national and international stakeholder groups on the *Call to Action*. The Summit will feature a panel discussion with representatives of key stakeholder groups in global health responding to the *Call to Action*. Discussion groups will follow focusing on four of the major areas of concern addressed in the *Call to Action*—Disease, Environmental Health, Displaced Persons, and Global Health Security and

Infrastructure. Within these broad groupings input is being sought on a variety of issues including maternal and child health, chronic disease, health literacy, oral health, mental health and individual behavior, infectious disease, indigenous and multicultural populations, self-help programs, social equity, the economic impact of global health, and more.

The President of the Summit is Dr. Joxel García, Deputy Director of the Pan American Health Organization. Other key presenters include: Dr. Allen Jones, Secretary General of the World Federation of Public Health Associations; Dr. Andrew Sorensen, President of the University of South Carolina; Dr. David Brandling-Bennett, Senior Program Officer of the Bill and Melinda Gates Foundation; Dr. Stephen Blount, Director of the Office of Global Health at the Centers for Disease Control and Prevention; Dr. Rabia Mathai, Global Director of Pro-

grams for the Catholic Medical Mission Board; and Dr. John Williams, Vice President for Health Affairs at George Washington University.

For additional information or to register visit www.globalhealthsummit.org.

Conference Update

Dr. Antonia Novello is the sixth former Surgeon General to accept an invitation to participate in a panel discussion on the opening day of the 2005 Public Health Professional Conference. The discussion will be moderated by Surgeon General Richard H. Carmona.

Additional details about the conference agenda, including information on new post-conference mental health sessions, are available at www.coausphs.conference.org. The early bird registration deadline for the conference is **5 April 2005**. □

Call for Nominations for the Physicians Professional Advisory Committee 2005 Awards

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that maximize the use of available resources and enhances the goodwill between the U.S. Government and the public. The evaluation criteria for this award are as follows:

- Leading Change (examples: developed/implemented an organizational vision; strategic planning; etc.)
- Leading People (examples: ability to design strategies to foster teamwork; maximize employees' potential; etc.)
- Business Acumen (examples: ability to acquire financial and human resources; identifies cost effective approaches to meet goals; etc.)
- Builds Coalitions/Enhances Communication (examples: developed part-

nerships; participated in professional societies; published; etc.)

The awards committee will consider all nominations that are received by **25 March 2005**. Submissions sent by facsimile machine or e-mail will not be accepted. Each nomination package should include a brief narrative (1-2 pages) explaining how the physician meets the award criteria, the nominee's title, supervisor's name and phone number, Operating Division/Staff Division/Program, address, fax, and telephone numbers. The nominee's current curriculum vitae should also be included. A brief, one sentence statement as to the reason this nominee deserves this award should be included in the nomination package. Nomination packages should include the

name and phone number of the person submitting the nomination. *Please note that nomination packages from previous years will not be considered.* Only nomination packages from this 2005 cycle will be eligible for consideration. Also, please note that former PPAC members are not eligible for consideration for these awards until at least 1 year has passed since completing their tour of duty as a PPAC member. All nominations should be addressed to:

CDR Barbara A Stinson
FDA/CDER, Medical Imaging
5600 Fishers Lane, Room 18B-45
Rockville, MD 20857-0001
E-mail: stinsonb@cdcr.fda.gov

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Call for Nominations—Pharmacist PAC Membership

The Pharmacist Professional Advisory Committee (PharmPac) is an advisory group composed of pharmacists representing Department of Health and Human Services (HHS) Operating Divisions (OPDIVs) and Staff Divisions (STAFFDIVs) as well as non-HHS Programs that employ Public Health Service (PHS) Commissioned Corps pharmacists.

The PharmPAC provides advice and consultation to the Surgeon General and to the Pharmacist Chief Professional Officer on issues related to both the professional practice of pharmacy and the personnel activities of commissioned corps and civil service pharmacists. The PharmPAC meets at least monthly in the Rockville, MD, area. However, teleconferencing is available.

Nominations are being solicited from pharmacists who are interested in serving on the PharmPAC. Anticipated openings for the 2005-2008 term are listed below, but all nominations will be kept on file for future consideration.

Openings for 3-year terms beginning **1 November 2005** for pharmacists serving in the following organizations include:

- BUREAU OF PRISONS – 1 opening;
- HEALTH RESOURCES AND SERVICES ADMINISTRATION – 1 opening;

- INDIAN HEALTH SERVICE – 3 openings;
- OFFICE OF THE SECRETARY – 1 opening; and
- EX-MINIMUS* – 1 opening.

*An ex-minimus member is defined as a pharmacist who represents an OPDIV/STAFFDIV/Program routinely staffed by less than 10 PHS pharmacists. This currently includes the following: Agency for Healthcare Research and Quality; Agency for Toxic Substances and Disease Registry; Centers for Disease Control and Prevention; Centers for Medicare and Medicaid Services; Environmental Protection Agency; Program Support Center; and Substance Abuse and Mental Health Services Administration.

If you are a pharmacist, either commissioned corps or civil service, and are interested in representing your OPDIV/STAFFDIV/Program on the PharmPAC, please submit your curriculum vitae with a cover letter describing your interest and include the date of your first licensure as a registered pharmacist. Also, please provide a memorandum or letter of endorsement from your immediate supervisor. Please note that the PharmPAC is strongly considering membership requirements to include meeting basic readiness standards.

All materials must be submitted by **30 May 2005**, to:

CDR Patricia N. Garvey
Food and Drug Administration
Center for Drug Evaluation and Research
Division of Oncology Drug Products,
HFD-150
1451 Rockville Pike
Rockville, MD 20852
Phone: 301-594-5766
Fax: 301-594-0498
E-mail: garvey@cdcr.fda.gov

Please note: If you would like to participate in PharmPAC activities as a non-member, please volunteer to serve on one of the following sections and activities: Administration (Awards, Membership, Charter, Data Analysis, History, Legislation, and External Pharmacy Affairs); Career Development (Emergency Response, Professional Guidance and Retention, and Public Health Issues); Communications (Web site, Listservs, Events/Meetings, PLANT, and Community Interaction); and Recruitment (Associate Recruiter Program, Student Programs, Point of Contact Initiative, and Placement). Working with a section or activity is a great way to contribute while learning about the PharmPAC and its activities.

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Call for Nominations—JOAG Voting Membership

The Junior Officer Advisory Group (JOAG) is seeking motivated, hard-working junior officers to fill positions vacated due to the expiration of term of voting members. JOAG is composed of Public Health Service (PHS) Commissioned Corps officers at the temporary grade of O-4 and below. The mission of JOAG is to provide advice and consultation to the Surgeon General, Chief Professional Officers (CPOs), Professional Advisory Committees, and other PHS Commissioned Corps groups on issues of professional practice and personnel activities affecting junior officers in the Corps.

JOAG meets monthly via teleconference; travel is not mandatory for membership. Officers must be willing to actively participate on the various committees, and regular attendance at meetings is required throughout the term of membership.

All new appointments will be made for a 2-year term, and self-nominations

are encouraged. Because monthly meetings occur during normal duty hours and a commitment of time is required, officers must have supervisor approval to apply. Following CPO endorsement of the selected nominees, JOAG will recommend successful candidates to the Surgeon General for appointment.

Any current JOAG voting member whose term expires in 2005 must re-submit all application materials in order to be considered for a second term.

Interested individuals may find all relevant nomination materials, as well as additional information, at the JOAG Web site: www.joag.org. Applicants should send to the JOAG Membership Chair the following documents:

- membership profile form
- supervisor approval form
- current curriculum vitae
- cover letter stating interest in serving on JOAG

All nominations must be submitted by **22 April 2005**, to the address listed below. Officers are strongly encouraged to submit their applications via e-mail.

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 Chair, JOAG Membership Committee
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