SUBJECT: Deployment of Public Health Service Officers

1. PURPOSE: This Instruction establishes policy, assigns responsibilities and requirements to which officers in the U.S. Public Health Service (USPHS) Commissioned Corps must adhere while on active duty, and prescribes procedures to ensure efficient deployment of the USPHS Commissioned Corps for response activities.

2. APPLICABILITY: This Instruction applies to all members of the Regular Corps and the Ready Reserve Corps except for:

   2-1. Officers who are detailed to a branch of the Armed Forces (42 U.S.C. § 215(a)) and other non-Health and Human Services (HHS) organizations. The USPHS Commissioned Corps deploys these officers in accordance with the respective Memorandum of Agreement/Understanding (MOA/MOU). The Armed Forces include the U.S. Army, U.S. Navy, U.S. Air Force, U.S. Marine Corps, U.S. Space Force, and U.S. Coast Guard;

   2-2. Time periods when the President, by Executive order, has declared the USPHS Commissioned Corps to be a military service (42 U.S.C. § 217);

   2-3. Officers in the Junior or Senior Commissioned Officer Student Training and Extern Programs (COSTEP) (see Commissioned Corps Instruction (CCI) 371.02, “Junior COSTEP,” and CCI 371.03, “Senior COSTEP”); and

   2-4. Officers assigned to the Uniformed Services University of the Health Sciences (USUHS) who are attending USUHS in order to obtain their qualifying medical degree (see Commissioned Corps Directive (CCD) 125.03, “Uniformed Services University of the Health Sciences”) and officers who are in a long-term training assignment (see CCI 325.01, “Extramural and Intramural Training and Obligation”).

3. AUTHORITY:

   3-1. 42 U.S.C. § 202, “Administration and supervision of Service”

   3-2. 42 U.S.C. § 204, “Commissioned Corps and Ready Reserve Corps”

   3-3. 42 U.S.C. § 204a, “Deployment readiness”
3-4.  42 U.S.C. § 215(e), “Commissioned Corps officers; urgent or emergency public health care needs”

3-5.  42 U.S.C. § 216, “Regulations”

3-6.  CCD 111.03, “Conditions of Service”

3-7.  CCD 121.02, “Commissioned Corps Deployments”


3-10.  Executive Order 11140, “Delegating certain functions of the President relating to the Public Health Service,” dated 30 January 1964

4.  PROPONENT: The proponent of this Instruction is the Assistant Secretary for Health (ASH). The Surgeon General (SG) is responsible for providing supervision of activities relating to the day-to-day operations of the USPHS Commissioned Corps. The Director, Commissioned Corps Headquarters (CCHQ), provides overall management of USPHS Commissioned Corps personnel operations and processes.

5.  SUMMARY OF REVISIONS AND UPDATES: This is the fourth issuance of this Instruction in the electronic Commissioned Corps Issuance System (eCCIS). It replaces CCI 241.02, “Deployment of Corps Officers,” dated 28 December 2021. This version:

5-1.  Changes “Intra-Agency Response” to “intra-agency activity” throughout the policy.

5-2.  In Section 6-2.c., changes language to allow a designee, in addition to the SG, to authorize activities count as deployments for deployment credit and service awards. Removes reference to the Field Medical Readiness Badge.

5-3.  Adds new Section 7-2.c. that establishes a Commissioned Corps Deployment Evaluation Council (CCDEC).
6. POLICY:

6-1. Deployments. Emergency Responses. The Secretary has authorized the ASH (in CCD 121.02, “Commissioned Corps Deployments”) to release Public Health Service (PHS) officers for deployment in the circumstances outlined in this Section without further action required by the Secretary. For officers assigned to an HHS Operating/Staff Division (OPDIV/STAFFDIV) such deployments may be involuntary. For officers assigned to non-HHS organizations such deployments must be in accordance with the respective MOA/MOU.

a. These circumstances include:

(1) A national emergency declared by the President under the National Emergencies Act (50 U.S.C. § 1621 et seq.);

(2) An emergency or major disaster declared by the President under the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. § 5121 et seq.); or

(3) A public health emergency declared by the Secretary under 42 U.S.C. § 247d.

b. Officers can request a time-limited exemption from deployments for periods during which the officer is experiencing a significant hardship (e.g., life-threatening illness or death of an immediate family member). The officer must submit the request to the Corps Care Program (phscorpscare@hhs.gov or 240-276-9616) and, after reviewing the request, the Director, CCHQ, may disapprove the request or approve an exemption from deployment of no more than six months. If a hardship still exists at the end of an approved exemption, the officer can request that the Director, CCHQ, approve an extension of an approved exemption. Except in unusual circumstances, exemptions will not exceed one year.

6-2. Deployments Related to Non-Emergency Responses.

a. Training Responses. The SG may authorize the use of PHS officers for responses that provide public health services to underserved and vulnerable populations as part of maintaining officers’ preparedness to respond to an urgent or emergency public health care need that is declared by the President or HHS Secretary. An example of such a response is the USPHS Commissioned Corps’ participation in a Remote Area Medical (RAM) mission. These responses for PHS officers will be led and coordinated by CCHQ.

b. Intra-Agency Activity.

(1) An intra-agency activity is an activity that is within the boundaries of the mission of, and managed directly by, an HHS OPDIV/STAFFDIV/non-HHS organization.

(2) The USPHS Commissioned Corps will consider PHS officers assigned to an OPDIV/STAFFDIV/non-HHS organization who are temporarily reassigned within the same OPDIV/STAFFDIV/non-HHS organization to support the activity as having participated in an intra-agency activity.

(3) Although such activities are not managed or coordinated by CCHQ, an officer’s participation in an intra-agency activity may be included in his/her personnel record. The USPHS Commissioned Corps liaison for the
relevant OPDIV/STAFFDIV/non-HHS organization will track the activity. The Director, CCHQ, or designee, will establish the requirements and process for liaisons to submit this information to CCHQ.

(4) Intra-agency activities do not require orders or coordination by CCHQ.

(5) The ASH authorizes the SG to pull officers from intra-agency deployments if the mission dictates, when the ASH has approved the release of officers under the circumstances outlined in Section 6-1.

c. The SG, or designee, can authorize activities under this Section to be deemed as qualified deployments for the purposes of deployment credit and the service awards (see CCI 511.01, "Awards Program").

6-3. Dwell Time. The SG may authorize dwell time between deployments. Dwell time is the period immediately following a deployment’s end, during which the USPHS Commissioned Corps will not deploy an officer to a future deployment without the officer’s consent (see Personnel Operations Memorandum (POM) 821.76, “Deployment Procedures”).

6-4. Deployment Coordination (Emergency Responses).

a. The SG, or designee, will assign each officer to either a rapid deployment unit or an augmentation group. The rapid deployment units and augmentation groups will be available for deployment on an established “on call” schedule.

b. The SG, or designee, will issue orders for officers deployed by CCHQ.

c. Prior to the officers' on-call period, CCHQ will coordinate with USPHS Commissioned Corps liaisons to ensure the availability of officers assigned to OPDIVs/STAFFDIVs and non-HHS organizations. CCHQ will adjust the officer's expected availability as necessary. However, in the circumstances outlined in Section 6-1, the SG, or designee, may involuntarily deploy an officer without supervisory or OPDIV/STAFFDIV approval and without coordinating with the liaison prior to the officer’s deployment.

d. In coordination with relevant non-HHS organizations, CCHQ will only deploy officers assigned to non-HHS organizations in accordance with the MOA/MOU between the USPHS Commissioned Corps and the non-HHS organization.

6-5. General Orders. The USPHS Commissioned Corps requires all officers participating in any deployment or response operations to observe and promptly obey the lawful orders of all official superiors in the deployment’s chain of command. Furthermore, it requires all officers to conduct themselves in a competent and professional manner at all times when deployed away from their assigned duty station.

a. A deployment general order constitutes the period of time of the deployment. The period is determined by the mission. The SG, or designee, will determine if the period can be extended.

b. The SG, or designee, will determine official superiors during a deployment.

c. The USPHS Commissioned Corps does not require officers to report to their home duty station leadership while on deployment orders and does not permit them to be in any leave status while deployed. However, if an officer becomes incapacitated during a deployment due to an injury or illness, the commander of the deployed unit, in conjunction with the CCHQ (Medical Affairs Branch).
Deployment Chief Medical Officer (CMO), will make a determination regarding whether to relieve the officer of their deployment duties temporarily or demobilized for further care, thus ending the officers deployment.

d. The SG, or designee, will establish General Orders and conduct requirements for deployment and response operations.

e. Travel orders, when required, will be issued in accordance with the Joint Travel Regulations (JTR).

6-6. Failure to Comply with Orders.

a. Officers who fail to comply with any General Order issued by the SG, or designee, to respond to an urgent or emergency public health care needs may be subject to disciplinary action, including separation from active duty or termination of the officer's commission, in accordance with CCD 111.02, “Disciplinary Action,” CCD 123.01, “Involuntary Separation,” CCD 124.01, “Retirement,” CCI 382.03, “Involuntary Termination of Commission,” and CCI 385.01, “Involuntary Retirement (20 Years)."

b. An officer who fails to meet or maintain the basic level of force readiness requirements is non-deployable (as detailed in CCI 241.01, “Readiness and Duty Requirements”), and the USPHS Commissioned Corps may refer that officer's records for disciplinary action, which could include involuntary separation or involuntary retirement in accordance with CCD 111.02, CCD 123.01, CCD 382.03, and CCI 385.01.

6-7. Alert Status Expectations.

a. Public Health and Emergency Response Strike Team (PHERST). PHS officers who are members of PHERST are in an alert status throughout the year and must be prepared to deploy within 8 hours of notification.

b. On-Call Periods. During officers' regularly scheduled on-call period (see Section 6-4.), officers are in an alert status and must be prepared to deploy within 12 hours of notification.

c. Emergency, Disaster, and Public Health Emergency (PHE). During a declared emergency, disaster, or PHE (as outlined in Section 6-1.a.) that is not within officers' regularly scheduled on-call period, CCHQ will notify officers at least 24 hours before CCHQ puts the officer on alert status after which they are on alert status and must be prepared to deploy within 12 hours’ notification. This alert status period will last until the officer goes on deployment or CCHQ notifies them that the alert period is over. This alert status can last no more than 30 days unless extended by the Director, CCHQ. Once an alert status ends, CCHQ will not put the officer on alert status again for another 30 days unless the Director, CCHQ, declares an emergency need for that officer (e.g., the officer has specific skill or training that is unique to the deployment needs).

d. While on alert status, the officer must remain in locations that permits them to travel to the officer’s home airport within four hours or 250 miles (e.g., if the officer goes
on leave, the officer cannot travel further than four hours or 250 miles from the airport. An officer’s home airport is determined by the officer’s duty station).

(1) The SG will determine whether leave will be withheld while officers are on alert status.

(2) If the SG withholds leave for officers in alert status, CCHQ will return unused scheduled leave time to the officer’s account.

e. While on alert status, the officer must pack a bag with the necessities for a deployment of 30 days. The official notification of deployment will provide more specific information about duration and location as available.

7. RESPONSIBILITIES:

7-1. The ASH is responsible for establishing policies related to deployment to ensure the efficient and effective deployment of PHS officers to respond to urgent or emergency public health care needs.

7-2. The SG is responsible for providing supervision of activities relating to the day-to-day operations of the USPHS Commissioned Corps and may issue POMs to implement this Instruction. The SG (or his/her designee) also will:

a. Establish deployment training that is specific to rapid deployment units or augmentation groups, as well as deployment roles for each officer.

b. Monitor and manage the deployment procedures outlined in this Instruction.

c. Establish a Commissioned Corps Deployment Evaluation Council (CCDEC) to evaluate and render a decision on CCHQ deployment response eligibility for service credit (i.e., Commissioned Corps deployment credit and awards).

7-3. CCHQ is responsible for coordinating officer deployment training, mobilization, demobilization, and post-deployment officer follow up. The Director, CCHQ, or designee, will:

a. Coordinate with HHS OPDIVs/STAFFDIVs to ensure the efficient and effective deployment of officers to minimize the impact to HHS OPDIVs/STAFFDIVs as much as possible.

b. Only deploy officers assigned to non-HHS organizations in accordance with the MOA/MOU between the USPHS Commissioned Corps and the non-HHS organization.

c. Create and send official orders for deployment to officers identified to deploy and ensure communication regarding such orders with USPHS Commissioned Corps liaisons.

d. Coordinate and document after action reviews for USPHS Commissioned Corps leadership.

e. Coordinate and support individual officer post-deployment follow up and resource notification through the Corps Care program (CCI 311.05, “Corps Care Program”).

7-4. USPHS Commissioned Corps liaisons are responsible for:
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a. Ensuring that their OPDIV/STAFFDIV/non-HHS organization documents supervisory approval and OPDIV/STAFFDIV/non-HHS organization concurrence or non-concurrence and communicates this to CCHQ for all officers who are assigned to their respective OPDIV/STAFFDIV/non-HHS organization one month prior to officers’ on-call periods;

b. Reporting reasons for non-concurrence and/or lack of an officer’s availability to the Director, CCHQ, or designee;

c. Notifying an officer’s supervisor that the officer is being deployed, as well as notifying other officials in the officer’s OPDIV/STAFFDIV/non-HHS organization as appropriate; and

d. Tracking, monitoring, and submitting deployment/response information in accordance with requirements established by the Director, CCHQ, on officers engaged in intra-agency activities.

7-5. All officers are responsible for adhering to the requirements established in this Instruction. Each officer must also:

a. Maintain current and updated contact information (e.g., e-mail, phone, address) in CCHQ (in accordance with guidance by the Director, CCHQ, or designee) in order to facilitate the USPHS Commissioned Corps’ communication of information to the officer;

b. Maintain supervisors’ current and updated contact information in CCHQ;

c. Ensure that all supervisors are aware of the officer’s receipt of official orders to deploy in response to an urgent or emergency public health care need and provide them with necessary information, as authorized, regarding the deployment;

d. Document availability or non-availability prior to all on-call periods;

e. Be prepared to deploy within the timeframes established pursuant to Section 6-7. upon receipt of official orders to deploy in response to an urgent or emergency public health care need;

f. Complete annual Operational Security (OPSEC) training and adhere to the planning, preparation, execution and post-execution activities of OPSEC during all phases of deployment operations, to include, but not limited to, the signing of a non-disclosure agreement when requested;

g. Remain familiar with and complete any training required by CCHQ related to:

(1) USPHS Commissioned Corps critical information or Controlled Unclassified Information (CUI) (e.g., pre-decisional information and meeting minutes; investigation documents; inspection reports; personally identifiable information (PII); information protected under Privacy Act of 1974; deployment dates and locations; mission operations; equipment acquisition information, Agency Program of Instructions (POI); position, mission capabilities and limitations; training operations and mission statements of work; schedules and travel itineraries of incoming and outgoing officers; and information technology information (e.g., usernames, passwords, network details)); and
(2) OPSEC indicators (i.e., those friendly actions and open sources of information that adversary intelligence systems can potentially detect or obtain and then interpret to derive friendly critical information).

h. Officers are prohibited from:

(1) Sharing deployment information and documents that include:

(a) Discussing classified information, deployment related scope of work-related information, or operational information with anyone who does not have the appropriate clearance and the need to know such information. Officers are also prohibited from discussing such information in the presence of anyone that does not have the appropriate clearance and need to know;

(b) Communicating, discussing, or disseminating classified information, or any other information relating to deployment operations including information considered Critical Information (see Section 7-5.g.), without proper authorization;

(2) Distributing any visual information and/or deployment presentation documentation without first submitting to the CCHQ Public Information Officer (PIO) Staff for review and authorization;

(3) Taking photographs or video recordings of personnel movements or operations while deployed and transmitting or displaying any information relating to USPHS/HHS Operations on any website or other shared medium without the proper written authorization; and

(4) Withholding from the chain of command and failing to immediately disclose: any information concerning sabotage, terrorist activity, or subversive activities that may pose a direct threat to USPHS personnel, other individuals, or to a deployment’s mission; requests by anyone for illegal or unauthorized access to classified or sensitive information; or contact with an individual who an officer has reason to believe is targeting the officer or any other personnel for exploitation.

8. HISTORICAL NOTES: This is the fourth issuance of this Instruction in the electronic Commissioned Corps Issuance System (eCCIS).

8-1. CCI 241.02, “Deployment of PHS Officers,” dated 28 December 2021
