

## 2025 PROMOTION BENCHMARKS

### Promotion Year (PY) 2025 Guidance Regarding Promotion Precepts and Benchmarks for USPHS Commissioned Corps Officers

The benchmarks for Precepts 1 - 4 are standards of excellence that describe the “best-qualified” officer. Officers are not expected to meet all benchmarks; many promoted officers will have achievements that exceed the factors for one or two precepts but may not meet all the factors for others. Therefore, the benchmarks should not be considered a checklist of activities that must be completed to be promoted. The promotion board assesses the quality and impact of an officer’s service and potential at a higher level than the quantity of activities in which an officer participates.

The purpose of this guidance is to inform officers and promotion boards of the levels of achievement that describe the “best qualified” officer for a specific grade. This document can also benefit the officer in developing short- and long-term goals for career advancement.

The promotion board assesses the capabilities, performance, and potential of officers eligible for promotion to the next higher grade. This assessment of qualifications is based on the four promotion precepts described in the electronic Commissioned Corps Issuance System (eCCIS) Instructions 331.01 “Permanent Grade Promotions,” and noted below. The four promotion precepts are described in terms of factors; and each factor has benchmarks that identify the level of achievement for the officer at each grade.

The Assistant Surgeon Generals and Chief Professional Officers (CPO), in consultation with their respective category members, revise the benchmarks annually to reflect the mission and professional standards of the U.S. Public Health Service. Benchmarks are effective on October 1 of the year of publication to coincide with the rating period. Promotion boards will use the Benchmarks from the previous year to maintain consistency with the last annual rating period evaluated.

The factors for each precept are not listed in order of priority. The members of the promotion boards use their professional judgment in the review of the service records of each officer under consideration for promotion and individually assign a score for each promotion precept. While the officer’s activities and accomplishments over the course of the career are considered, the activities and accomplishments since the officer’s last promotion receive priority consideration. When available officers should also provide evidence of their support of priority initiatives as set forth from the Assistant Secretary of Health (ASH) and/or the Office of the Surgeon General (OSG).

The Promotion Precepts are weighted as follows:

- |   |     |
|---|-----|
| 1. Performance Rating and Reviewing Official’s Statement (ROS)<br>(Performance)   | 40% |
| 2. Education, training, and professional development  | 20% |
| 3. Career progression and potential   | 25% |
| 4. Professional contributions, basic level of force readiness history,<br>and service to the USPHS Commissioned Corps (Officership) | 15% |

Promotion Board members examine many documents in the officer's Officer Promotion Package Verification System (OPPVS) during the promotion review. Examples of these documents include, but are not limited to, Commissioned Officers' Effectiveness Report (COER), Promotion Information Report (PIR), curriculum vitae (CV), the Officer's Statement, ROS, award narratives, and letters of appreciation. The most recent COERs, within the past 3 years, are given the most consideration by Promotion Board members, although earlier COERs may also be reviewed.

**REMINDER:** The benchmarks for Precepts 1 - 4 are standards of excellence that describe the "best-qualified" officer. Officers are not expected to meet all benchmarks; many promoted officers will have achievements that exceed the factors for one or two precepts but may not meet all the factors for others.

Therefore, the benchmarks should not be considered a checklist of activities that must be completed to be promoted. The promotion board measures the quality and impact of an officer's service and assesses value at a higher level than the quantity of activities in which an officer participates.

**\*\*\*IMPORTANT NOTE\*\*\*:**

*Basic readiness is one of the several administrative checks for promotion. Please see Personnel Operations Memorandum 821.87 "Promotion Precepts and Eligibility Criteria" for specific information on administrative checks. Officers are advised to maintain basic readiness at all times.*

*The promotion boards will review the readiness history for the previous 5 years. The boards will use officers' readiness history as a factor in the score for promotion precept 4 (professional contributions, basic level of force readiness history, and service to the USPHS Commissioned Corps), as well as, the overall recommendation for promotion.*

## 1. Performance Rating and Reviewing Official's Statement (Performance)

Factor	O-2/O-3	O-4	O-5	O-6
<b>Commissioned Officers' Effectiveness Reports (COERs)</b>	The primary focus in reviewing the COER is on the accompanying narrative rather than on the score. Secondary assessment includes a review of the COER score, in the context of the officer's performance trends. The annual COERs should highlight progression of responsibility, impact, and potential.			
	Guidance provided as needed/requested to complete assignments of moderate complexity and impact. Skill development reflects potential for leadership and willingness/ability to assume increasing levels of responsibility.		Evidence of independent performance of complex tasks requiring developed proficiency and higher responsibility with positive impact on the program. Demonstrated leadership of program teams or projects.	Independent initiative, evidenced by development, oversight, coordination and/or leadership of projects with an expected level of expertise.
	Completes assigned, duty-related, mandatory training and elective training that complements mandatory training. Documented professional development and contributions to the agency mission. Demonstrates efficiently and effectively working at a level equal to or higher than their current grade.			
<b>Reviewing Official's Statement (ROS)</b>	<p><b>Exhibits Leadership Qualities.</b> Recognizes officers with potential and inspiration to influence.</p> <p>For example: As assessed in ROS, candidate:</p> <ul style="list-style-type: none"> <li>a) Demonstrates leadership attributes at the group, team, committee, or branch level and displays potential for increased future leadership or management roles, and/or</li> <li>b) Is a member of an agency task force, workgroup, advisory group, or similar group at, or above, the local or regional branch or division level.</li> </ul>		<p><b>Demonstrates Leadership Skills.</b> Recognizes officers with exceptional leadership skills and potential to serve in supervisory roles.</p>	<p><b>Accomplished Leadership Role.</b> Recognizes leaders in key roles who have a proven record of influence and achievement and potential to serve in management or executive roles.</p>

			<p>For example: As assessed in ROS, candidate:</p> <p>a) Provides contributions or support for management, supervisors, or technical/ clinical program leaders, and/or</p> <p>b) Is a member or leader of an agency task force, workgroup, advisory group, or similar group at, or above, the local or regional level.</p>	<p>For example: As assessed in ROS, candidate:</p> <p>a) Demonstrates leadership attributes of an executive, senior manager, expert, and/or special advisor or consultant, and/or</p> <p>b) Is a leader of an agency task force, workgroup, advisory group, or a similar group at the regional, national, or international level.</p>
	<p>Reviewing Official's Statement should focus on the officer's preparation for promotion to the next rank and the officer's potential to succeed/excel with the elevated responsibilities and challenges. Examples of leadership and technical contributions and impact should be used to validate the RO's comments. The RO may also highlight specific leadership potential, including scientific, and mission contribution factors in the agency and PHS that strive for increasing impact (e.g., at either the local, regional Branch or Division level, or national or international Agency level). Additionally, evidence that career duties and collateral activities contribute to visibility and impact of the Agency/USPHS Commissioned Corps mission should be included. The RO may also highlight information on the entirety of an officer's career.</p>			
<b>Award History</b>	Record reflects increasing levels of achievement including team or unit participation (e.g., PHS Citation Medal or Unit Commendation).	Record reflects superior efforts, including team or unit participation, and should result in individual or unit awards (e.g., Achievement Medal and Unit Commendation).	Record reflects distinctly greater achievement than expected and should result in progressively higher individual and unit recognition (e.g., Commendation Medal and Unit Commendation).	Record reflects exceptional leadership which should result in progressively higher individual awards and unit recognition (e.g., Outstanding Service Medal and Outstanding Unit Citation).
	<p>Awards from agency (including non-DHHS agencies) and professional organization awards and recognition such as letters of acknowledgement or appreciation should state the impact(s) of the officer's contributions.</p>			
<p>Please refer to CCI 511.01 "Awards Program" for a description of the Honor and Service Awards. Promotion boards utilize the CV to evaluate these factors.</p>				

## 2. Education, Training & Professional Development

Factor	O-2/O-3	O-4	O-5	O-6
<p><b>Credentials</b> Identify officer's knowledge, expertise, practice, and value to the USPHS Commissioned Corps.</p>	Qualifying degree, licensure, registration, and/or certification, as defined in category appointment standards.	Preparing for an advanced certification, licensure, or a degree program beyond the required, qualifying credentials.	Completion of advanced certification or licensure beyond the required, qualifying credential; or enrollment and progression in a degree program beyond the required, qualifying credentials.	Completion and integration/application of the advanced knowledge and skills that were achieved beyond the required, qualifying credentials.
<p><b>Continuing Education</b></p>	Officer participates and actively engages in continuing education activities.		Officer helps in planning of continuing education activities.	Officer plans, develops, or independently leads continuing education activities
	Maintains continuing education at a level necessary to maintain licensure or competency in your professional field. Learning activities must display a diversity of topics that enhances the value of the officer to the USPHS Commissioned Corps and is documented in CV or in electronic Official Personnel Folder (eOPF).			
<p><b>Public Health Training &amp; Experience</b></p>	Evidence of participation in leadership or public health training that enhances value of officer to the agency OR substantive participation in a community-based public health initiative or program (e.g., PACE)		Evidence of participation in leadership and/or public health training that enhances value of officer to the USPHS Commissioned Corps and agency; substantive leadership in a community-based public health initiative or program (e.g., PACE); OR demonstrated public health experience of service on a local, regional, or national activity or initiative	Evidence of participation in executive leadership and/or public health training that enhances value of officer to the USPHS Commissioned Corps; substantive leadership, supervision, and mentorship to others in a community-based public health initiative or program (e.g., PACE); OR demonstrated public health experience of service on a local, regional, national, or international public health activity or initiative

### 3. Career Progression & Potential

Factor	O-2/O-3	O-4	O-5	O-6
<b>Mission Priority</b>	<u>Meets 1 or more of these priorities:</u> <ul style="list-style-type: none"> <li>• ≤ 1 permanent duty assignment in organizations that primarily serve underserved and vulnerable populations (IHS, BOP, DHS-IHSC) [MP Bucket 1]</li> </ul>	<u>Meets 1 or more of these priorities:</u> ≥ 1 permanent duty assignment in organizations that primarily serve underserved and vulnerable populations (IHS, BOP, DHS-IHSC) [MP Bucket 1]		
	<ul style="list-style-type: none"> <li>• ≥ 1 permanent duty assignment in organization that provides direct clinical care (IHS, BOP, IHSC, NIH Clinical Center, DoD, USCG) [MP Bucket 2]</li> <li>• ≥ 1 in a difficult to retain discipline (physician, veterinarian, nurse practitioner, dentist, physician assistant) [MP Bucket 3]</li> <li>• ≥ 1 permanent duty assignment in a hazardous duty or isolated hardship location, or in national health security [MP Bucket 4]</li> </ul>			
<b>Billet Level</b>	Occupy billet ≥O-3	Occupy billet ≥O-4	Occupy billet ≥O-5	Occupy billet ≥O-6
	PIR should demonstrate progressively higher billets throughout the officer's career. Officer should document level of work performed, including supervisory duties, in OS, ROS, COER, CV, etc.			
<b>Assignments</b>	1 assignment that demonstrates responsibility, ability, and independence	≥ 1 assignment that demonstrates progressively more responsibility, ability, and independence; independently conducts projects with limited guidance	≥ 2 assignments that demonstrates progressively more responsibility, ability, and independence; independently leads projects and/or teams [MP Bucket 5]	≥ 3 assignments that demonstrates progressively more responsibility, ability, and independence; considered a subject matter expert; independently leads projects and teams [MP Bucket 5]
	Officer should document any detailed assignments ≥90 days in eOPF and CV, including TDY assignments. CV should document progressively increased complexity of assignments or leadership throughout the officer's career.			
<b>Mobility</b>	≤ 1 geographic or programmatic move excluding initial call to duty		≥ 2 geographic or programmatic moves excluding initial call to duty	≥ 3 geographic or programmatic moves excluding initial call to duty

<b>Collateral Duties</b>	At least 1 collateral duty in support of the program (local/institutional)	≥ 1 collateral duties in support of the local program or agency	≥ 2 collateral duties in support of program, agency, or PHS initiatives or priorities, including at least one collateral duty at the senior/national level	≥ 3 collateral duties in support of program, agency, or PHS initiatives or priorities, including at least one collateral duty at the senior/national level with a leadership role
	Officer should document all collateral duties in the CV, OS, ROS, COER, and through supporting documents in the eOPF. Geographic or programmatic moves must be documented via personnel orders and the PIR.			

#### 4. Professional Contributions & Service to the USPHS Commissioned Corps (Officership)

Factor	O-2/O-3	O-4	O-5	O-6
<b>Honor/ Integrity/Duty</b>	<p>Displays honor and integrity as an officer.            Completes mandatory PHS training.            Meets professional obligations.            Maintains good standing without disciplinary or adverse actions.            CCHQ managed deployments (not interagency deployments).</p>			
<b>Other USPHS Commissioned Corps and Professional Contributions</b>	<p>Verified impact:</p> <ul style="list-style-type: none"> <li>• As a member or volunteer within a PHS group or professional organization.</li> <li>• Through local PHS or collateral activities. Contributes to the PHS mission at the local level.</li> </ul>	<p>Verified impact:</p> <ul style="list-style-type: none"> <li>• As a subcommittee member or lead within a PHS group or professional organization.</li> <li>• Through regional PHS activities.</li> </ul> <p>Contributes to the PHS mission at the regional level</p>	<p>Verified impact:</p> <ul style="list-style-type: none"> <li>• As a Chair, Vice-Chair, or subcommittee lead within a PHS group or professional organization.</li> <li>• Through regional, national, or international PHS activities.</li> </ul> <p>Contributes to the PHS mission at the national or international level</p>	
	<p>Participates in one-on-one or group mentoring activities.</p>	<p>Participates as a mentor in one-on-one or group mentoring activities. Seeks mentors within peers or officers at higher grades.</p> <p>Recruitment of other mentors to support professional development of peers.</p>	<p>Participates as a mentor or coordinator in one-on-one or group mentoring activities. Seeks mentors within peers or officers at higher grades.</p> <p>Recruitment, training, support, and management of other mentors for the professional development of officers.</p>	



	Active membership in professional, uniformed service, or specialty organizations at the local level.	Active membership in professional, uniformed service, or specialty organizations at the local or regional level.	Active membership in professional, uniformed service, or specialty organizations at the regional or national level, with contribution as a committee or subcommittee member.	Active membership in professional, uniformed service, or specialty organizations at the national or international level, with contribution in a leadership role (e.g., Chair, Subcommittee Chair).
	Achievements and contributions should be documented in the COER, OS, CV, awards, and in letters of appreciation.			
<b>Presentations and Outreach</b>	Documented participation at local and regional meetings or activities of professional organizations in support of PHS/non-Agency missions and public health initiatives.	Documented presentations and/or outreach at local and regional meetings or activities of professional organizations in support of PHS/non-Agency missions and public health initiatives.	Documented presentations and/or outreach at regional meetings or activities of professional organizations in support of PHS/non-Agency missions and public health initiatives	Documented presentations and/or outreach at regional, national, or international meetings or activities of professional organizations in support of PHS/non-Agency missions and public health initiatives.
	Achievements and contributions should be documented in the COER, OS, CV, awards, and in letters of appreciation.			