



2012  
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TO: U.S. Surgeon General  
FROM: The Asian Pacific American Officers Committee (APAOC) Chair  
SUBJECT: Revision of the Asian Pacific American Officers Committee (APAOC) Charter

### ISSUE

Proposed revision of the APAOC Charter.

### DISCUSSION

The APAOC provides advice and consultation to the Office of the Surgeon General (OSG) and the Minority Officers Liaison (MOLC) on issues relating to the professional practice and the personnel activities of civil service and commissioned corps personnel. APAOC provides similar advisory assistance, upon request, to Agency and/or Program Heads of the Public Health Service (PHS) and to non-PHS programs that routinely use PHS personnel.

The APAOC Charter has been revised and is consistent with the Model Charter issued by the Office of the Surgeon General. The revision includes:

- (1) APAOC Charter: Section V: Membership, Item 3. Size: Increase all APAOC voting members from 20 to up to 30.

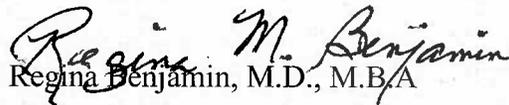
### RECOMMENDATION

It is recommended that you approve the APAOC Charter as revised.

LT QuynhNhu Nguyen  
2012 APAOC Chair

### DECISION

Approved  Disapproved  Date JUN 21 2013

  
Regina Benjamin, M.D., M.B.A.

### Attachments:

- A- Revised APAOC charter, dated September, 2012
- B- Last approved APAOC charter, dated November, 2010

September 28, 2012

FINAL

28 SEPTEMBER 2012

**THE ASIAN PACIFIC AMERICAN OFFICERS COMMITTEE (APAOC) CHARTER**

<u>Section</u>	<u>Title</u>
I	MISSION
II	RELATIONSHIP OF THE APAOC TO THE U. S. PUBLIC HEALTH SERVICE
III	OBJECTIVES
IV	FUNCTIONS
V	MEMBERSHIP
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VII	TERM OF APPOINTMENT
VIII	CHAIRPERSON
IX	MINORITY LIAISON OFFICERS COUNCIL
X	OPERATIONS AND PROCEDURES

**The Asian Pacific American Officers Committee (APAOC) Charter**

**(I) MISSION**

The mission of the Asian Pacific American Officers Committee of the U.S. Public Health Service (USPHS) is to improve and protect the public health of the United States by serving and advising the Surgeon General on Asian Pacific American (APA) issues through the Minority Officers Liaison Council (MOLC). This will be achieved through developing leadership, supporting career advancement, and enhancing the visibility of the USPHS.

**(II) RELATIONSHIP OF THE APAOC TO THE UNITED STATES PUBLIC HEALTH SERVICE (USPHS)**

In carrying out its responsibilities, the APAOC operates in a staff capacity. It does not substitute for line management or in any way exercise the prerogatives of the respective operating programs. Thus, the APAOC advises the MOLC chair, who in turn advises the Surgeon General. While APAOC members are chosen from the respective PHS Operating Divisions (OPDIVs), they neither represent OPDIV management nor speak for the OPDIV. They are knowledgeable professionals who represent a cross section of the interests, concerns, and responsibilities of the professionals in OPDIVs and organizations staffed by PHS personnel.

**(III) OBJECTIVES**

The APAOC serves in a resource and advisory capacity through the MOLC to assist in the development, coordination, and evaluation of activities related to APAs in the PHS with the specific objectives of:

1. Identifying and facilitating resolution of issues of concern as they relate to the Commissioned Corps (CC) officers and Civil Service (CS) personnel of APA background.
2. Assessing PHS personnel needs and assisting in meeting these needs through recruitment, training, utilization, and recognition of CC officers and CS personnel of APA background.
3. Developing position papers, statistical reports, and/or guidelines where appropriate, in order to advise and comment on matters relating to the personnel issues and professional practice of CC officers and CS personnel of APA background.
4. Promoting the development and utilization of APA professionals by the PHS and other Government programs.
5. Promoting cooperation and communication among APAs and other minorities in the PHS.

6. Promoting all aspects of CC officers and CS personnel of APA background throughout the OPDIVs of the PHS.
7. Providing liaison among minorities within and among PHS components, and providing advice and consultation to the OPDIV Heads and operating programs upon request.
8. Advocating for best practices within the profession by CC officers and CS personnel of APA background.
9. Facilitating relationships with professional organizations and academia to promote the linkage between public health and the minority groups of the USPHS.

#### **(IV) FUNCTIONS**

In carrying out its broad mission and objectives, the functions of the APAOC shall include, but are not limited to, the following:

1. Provide general professional advice and recommendations:
  - a. Review and comment on issues referred to APAs through the MOLC by the Surgeon General, OPDIV Heads, and/or Staffing Division (STAFFDIV) Heads.
  - b. Deliberate issues, develop findings, and present recommendations through the MOLC to the Surgeon General.
  - c. Provide advice on the professional aspects of the APA groups, i.e., new technologies, regulations, curricula, roles, etc.
  - d. Provide advice on ethical and professional standards.
  - e. Review and provide recommendations concerning proposed or needed changes to appointment standards and professional requirements, e.g., licensure required to maintain high quality staff.
2. Act as primary resource for career development:
  - a. Advise on CC and CS practices concerning career development.
  - b. Advise on operating practices concerning the appropriate/optimum use of personnel designed to best meet PHS needs and the needs of the individual.
  - c. Advise on issues related to PHS promotion practices and, for commissioned officers, assimilation into the Regular Corps for officers of APA background.

- d. Formulate criteria for the selection of candidates for training and/or other career development options.
  - e. Identify both continuing and long-term intramural/extramural education needs of CC officers and CS personnel of APA background, and identify and recommend training and/or experience opportunities designed to meet these needs.
3. Provide advice and assistance on staffing issues:
- a. Assess and project need for the APA staffing levels, both CC and CS, throughout the PHS.
  - b. Provide advice on the goals, objectives, and procedures designed to meet the PHS staffing needs and assist in retention initiatives for CC officers and CS personnel of APA background.
  - c. Provide guidance for recruitment to the short-term student affiliation programs (COSTEP, summer students, etc.).
  - d. Develop, and/or review and critique, APA-specific PHS recruitment materials, procedures and programs.
  - e. Help establish networks of current, as well as former, PHS professionals, who can assist and facilitate recruitment activities.
  - f. Provide guidance to approved PHS "Associate Recruiters" and other recruiters concerning the recruitment of qualified candidates of APA background.
  - g. Assist in the development of orientation materials for newly-hired APA professionals and provide advice/recommendations concerning orientation programs.
4. Communicate and encourage appropriate use of awards/recognition systems:
- a. Identify, establish, and help administer special professional, APA specific awards.
  - b. Maintain cognizance of the existing CS and CC award programs and opportunities and encourage the nomination of qualified individuals for such awards.
5. Serve as a communication link and information resource for APA:
- a. Communicate to the CC/CS APA staff important information concerning professional, ethical, and technical issues.

- b. Encourage individual membership in, and involvement with professional organizations and societies in order to promote open communication with non-federal colleagues.
- c. Ensure the distribution of minutes and/or other APAOC-developed materials to the extent possible and appropriate to CC and CS staff. Ensure the availability of APAOC minutes to other PACs and the Office of the Surgeon General through the APAOC website.

**(V) MEMBERSHIP**

1. **Basic Eligibility Requirements:** Members must be full-time CC or CS personnel, at the time they are nominated and appointed to the APAOC, and meet the eligibility requirements for initial appointment to the APAOC and personnel systems. In addition, all CC personnel must meet the Office of Force Readiness and Deployment (OFRD) basic readiness standards at the time they are nominated and appointed to the APAOC and throughout their term of service on the APAOC.
2. Staff from the Office of the Secretary (OS) and the Office of Public Health and Science (OPHS) may serve in APAOC providing that they recuse themselves from voting on issues and decisions that may have the appearance of a conflict of interest with respect to their duty assignments.
3. **Size of the Committee:** The APAOC shall have no fewer than seven and no more than thirty voting members.
4. **Organizational Representation:** In order to provide the range of experiences and perspectives necessary for addressing issues before the APAOC, every effort must be made to have the broadest representation possible among all agencies that are routinely staffed by CC officers and CS personnel of APA background.
5. **Geographic Considerations:** The APAOC will have, as voting members, at least two individuals whose regular duty station is geographically removed by a distance of 75 or more miles from the Washington Metropolitan Area.
6. **Gender and Minority Representation:** The APAOC will make a concerted effort to include both men and women and all APA ethnicities in the composition of its membership.
7. **Personnel System:** The APAOC will make a concerted effort to include civil service personnel in the composition of its membership.

8. Professional Seniority: The APAOC will have as a voting member a minimum of one individual who at the time of appointment to the APAOC has less than 5 years of professional experience.
9. Professional Discipline Composition: Cognizant of the fact that the APAOC is structured around the PHS Commissioned Corps defined professional categories which encompass more than one major professional discipline, to the extent possible the APAOC should attempt to be as inclusive as practical in selecting members who possesses the requisite credentials for each of the respective disciplines that make up the APAOC.
10. Ex-Officio Members (non-voting): The Black, Hispanic and American Indians/Alaskan Native members of the MOLC are ex-officio members of the APAOC [see IX (1)]. The former chair may serve 1 additional year as an ex-officio member of the APAOC [see VIII (3)]. The APAOC may identify other individuals and request that they serve as ex-officio members.
11. Liaison Members (non-voting): The APAOC may identify individuals to serve in a liaison capacity to provide information or assist with activities, e.g., staff from the Office of the Secretary (OS) or the Office of Public Health and Science (OPHS).

#### **(VI) NOMINATION PROCESS**

1. Annually, the APAOC will solicit, through newsletters and other appropriate means, nominations for vacancies on the APAOC from all individuals interested in issues related to APA and represented civil service professional disciplines. Self-nominations will be solicited. The names will be transmitted by the APAOC to the nominee's respective OPDIV Head who may endorse the nominee(s) or provide alternate or additional nominations meeting the general representation requirements demonstrated by the original nominees. The OPDIV Head's response will be reviewed by the APAOC voting members who will identify, by name, those highly qualified to fill anticipated vacancies. A final list of nominees will be sent by the APAOC to the Surgeon General for selection and approval.
2. This nomination process shall be conducted so that the final nomination package is available for the Surgeon General's consideration no less than 60 calendar days prior to the expiration of the regular term of the member.
3. Should the need arise to fill an unexpired term of a voting member, the vacancy shall be filled through the annual nomination process.

**(VII) TERM OF APPOINTMENT**

1. APAOC Members will be selected to serve 3 year terms. Terms will be staggered to ensure rotational balance.
2. Once a member has accumulated a lifetime total of 6 years of service on the APAOC, they are not eligible for reappointment. Terms of office may be served consecutively at the discretion of the APAOC.
3. Alternates: Cognizant of the demands of the members' primary work responsibilities and the APAOC's need to conduct business, the APAOC has the option of establishing procedures to allow each voting member to appoint, and inform the Chairperson of, a single individual from the same OPDIV or professional discipline who can serve as his/her alternate. Such alternates shall have voting privileges when serving in the place of the primary member. It is the responsibility of the primary APAOC member to keep the alternate fully informed and knowledgeable of the APAOC's activities. Any OPDIV clearance or approval requirements for travel/per diem will have to be handled within the OPDIV by the primary APAOC member. All alternates must meet OFRD basic readiness standards.
4. Attendance: Any member of the APAOC who frequently misses meetings without just cause can, at the discretion of the APAOC Chair in consultation with the APAOC voting members, be asked to voluntarily resign from the APAOC, or the APAOC Chair in consultation with the APAOC voting members can initiate a request to the Surgeon General to terminate said membership and so inform the OPDIV Head.

**(VIII) CHAIRPERSON**

1. The chairperson will be elected by the voting membership of the APAOC.
2. Term of the Chairperson: The chairperson will serve a one-year term and may be re-elected for one additional year. The APAOC may choose to elect the Chairperson for one two-year term with no opportunity for re-election to that post. Additionally, the APAOC may elect to have a Chair-Elect post so that after one year in this capacity the Chair-Elect automatically becomes the Chair for a year.
3. At the expiration of the Chair's membership term, the Chair may serve an additional year as an ex-officio member, provided that the OPDIV Head is informed and concurs with the extension. The election of the Vice Chair/Chair-Elect and Executive Secretary can be found in the APAOC Bylaws.

**(IX) MINORITY OFFICERS LIAISON COUNCIL (MOLC)**

1. **APAOC Membership:** The Black, Hispanic and American Indians/Alaskan Native members of the MOLC shall be non-voting, ex-officio members of the APAOC.
2. **Relationship with the APAOC:** APAOC communications, be it correspondence, reports, minutes of its proceedings, or other, may be transmitted through the MOLC chair who, as may be deemed appropriate, may provide concurring or non-concurring comments but may not stop or unduly delay such transmittals.

**(X) OPERATIONS AND PROCEDURES**

1. The APAOC shall develop its own internal operations and procedures (e.g., bylaws). These shall include, at the minimum provisions covering the following:
  - a. **Operational Year:** The operational year of the APAOC for term of appointment, elected office and MOLC representation is the calendar year, beginning January 1 of a calendar year and ending December 31 of the same year.
  - b. **Frequency of Meetings:** Meetings will be held at least once per quarter. The Chair has the rights to request additional meetings as needed.
  - c. **Agenda:** A meeting agenda and appropriate background material is to be made available to the members prior to the meeting.
2. **Records and Reporting:**
  - a. Minutes of each APAOC meetings will be developed and approved by the APAOC voting members.
  - b. Minutes and reports of the APAOC will be distributed in accord with Item IV (5) (C) FUNCTIONS.
  - c. The APAOC must establish a system to maintain a permanent file of the official minutes and reports of the APAOC.
3. **Executive Secretary:** The Executive Secretary must be a voting APAOC member.
4. **Quorum:** A quorum consists of at least 50 percent of the APAOC voting membership. An alternate attending in lieu of the member shall be counted in determining the quorum requirement.
5. **Voting:** Where voting is required or appropriate, i.e., election of the Chairperson, action will be determined by the simple majority of those voting members present.

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6. Subcommittees: Where the APAOC elects to establish standing or ad hoc subcommittees, said membership may include non-APAOC voting members provided that the chairperson of the subcommittee is a voting member of the APAOC.

[Revision, September 2012]

DECISION

Approved  Disapproved  Date JUN 21 2013

*Regina M. Benjamin*  
Regina Benjamin, M.D., M.B.A.