

# Preparing for Promotion *Success*



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# Objectives

- Describe key factors in the promotion process
- Describe common “promotion pitfalls”
- Define the elements of well-crafted documents





# Administrative Requirements

Regardless of score, these must be met in order to be promoted

## Temporary Grade

- Required Annual COERs on file (last 5 years)
- A current satisfactory COER, if required
- A current valid license, if required
- No current or pending adverse actions
- Meet & maintain basic level of readiness





# Administrative Requirements

Regardless of score, these must be met in order to be promoted

## Permanent Grade

- A current satisfactory COER, if required
- Valid license, if required
- No current or pending adverse actions
- Meet & maintain basic level of readiness
- Current 5 year Physical Exam on file w/MAB
- Report of Medical History (DD2807-1) &
- “Disclosure Statement” within 1 year of April 30, PY





# Document Submission

- Submit documents to the correct line
  - eOPF: 301-480-1407 or 301-480-1436
  - Licensure/certification: 240-453-6142
- Identify yourself with name and PHS #
- Know the process for each section of the eOPF
  - CV
  - PHS Support Activities
  - Continuing Education
- Always verify the document in the eOPF!





# Promotion Pitfalls

## Common but Costly Mistakes

- Errors – eOPF and PIR
- Too much detail
- Acronyms
- Making Assumptions
- Lack of ownership





# Promotion Pitfalls

## Promotion Information Report

### General Information

Original Entry on Duty:	18 Jul 2004
Latest Entry on Duty:	18 Jul 2004
Seniority Credit Date:	18 Jul 2004
Retirement Credit Date:	18 Jul 2004
Training and Experience Date:	01 Jul 1991
Promotion Credit Date (Regular Corps Only):	
Application for Assimilation Date:	15 Feb 2007
Assimilation Date:	
Current Licensure Status:	Compliant
Current License Expiration Date on record:	01/31/2013

### Current Assignment

SENIOR STAFF NURSE  
Career Track is Clinical Practice And Consultation  
CIVIL SERVICE SERIES 0610: NURSE  
Billet Equivalent Grade: 4





### **Uniformed Service Decorations and Awards**

13 May 2010

Unit Commendation (PHS) issued by: PHS

13 Feb 2007

Commissioned Corps Training Ribbon issued by: PHS

18 Feb 2006

Hazardous Duty Award (PHS) issued by: PHS

### **Assignment History**

TRANSFER on 03 Feb 2011 at Grade 4

SENIOR STAFF NURSE

DETAILED TO DHS, IAIP, OFFICE FOR INFRASTRUCTURE PROTECTION  
LOS ANGELES, CA

TRANSFER on 01 Oct 2007 at Grade 4

SENIOR STAFF NURSE

DETAILED TO DHS, IAIP, OFFICE FOR INFRASTRUCTURE PROTECTION  
LOS ANGELES, CA

CHANGE OF BILLET on 01 Feb 2006 at Grade 3

SENIOR STAFF NURSE

HRSA, ASSOC ADMINISTRATOR, BUREAU OF PRIMARY HLTH CARE,  
DIVISION OF IMMIGRATION HEALTH SERVICES  
LOS ANGELES, CA

CALL TO DUTY on 18 Jul 2004 at Grade 3

STAFF NURSE

HRSA, ASSOC ADMINISTRATOR, BUREAU OF PRIMARY HLTH CARE,  
DIVISION OF IMMIGRATION HEALTH SERVICES  
LOS ANGELES, CA





# Promotion Pitfalls

## Too Much Detail

I have devoted a large part of my career to the completely unique IHS Injury Prevention Program; there is no other agency worldwide addressing injury using the methods employed by this very successful program. I serve as one of 12 Area Specialists throughout the United States. There is very little movement among the Specialists as some are Civil Servants and others are tribal and all know that building a comprehensive injury prevention program is a long term commitment. **Not only have tribal leaders expressed a desire for continuity but successful injury prevention programs rely upon three key concepts: enforcement, modifying the environment through engineering thereby reducing the role of human behavior, and finally education as the third of the Three Es. Gaining the trust and attention of tribal councils to strengthen passenger restraint and impaired driving laws, developing coalitions to illustrate benefits and convince populations along with development of crash and severe injury databases to illustrate the causes and types of injuries that are killing and maiming people all take time and commitment to achieve.** I have successfully done all of these things by working with other agencies such as the CDC to obtain funding to employ evidence based strategies and as a result have seen dramatic gains in restraint use and decreased injuries as a result...





# Promotion Pitfalls

## Too Much Detail

### A better rewrite

- ~~Devoted a large part of my career to the completely unique IHS Injury Prevention Program, which addresses injury using methods not employed by any other agency in the world; there is no other agency worldwide addressing injury using the methods employed by this very successful program.~~
- **Recognized expert** as one of only 12 Area Specialists ~~throughout~~ in the ~~United States~~ U.S.; **as a result there is a dearth of available positions as a PHS officer. Because building a successful injury prevention program is a long-term commitment and continuity is vital, transferring to another position or area is unlikely and also could be disruptive to the \_\_\_\_\_ Area program to the detriment of tribal relationships and the people being served.**





# Promotion Pitfalls

## Acronyms

- At FDA, conducted lab research on CV and ortho medical device materials including PS, PE (incl. HDPE), Ti, PTFE, and PTCA catheters.
- At BOP, worked at CO/HSD in the S & R section. Completed a TDY with the MXRO and recruited for various instit. including MRCs BUH, LEX, DEV, CRW, and SPG.





# Promotion Pitfalls

## Lack of Ownership

- Take responsibility for what you can control
  - Quality of documents
    - Before and after entry into the eOPF
  - Timely submission
  - Identification of issues in the eOPF/PIR
  - Ensuring all documents are in the eOPF correctly

The outcome is then out of your hands.





# Well-Crafted Documents

## Curriculum Vitae (CV)

- Category format
- Highlight important, impactful information
- Reduce the fluff... please!
- Consider the audience, especially for HSOs!
  - Diversity of fields/expertise
  - Time constraints
- Address job/career-related weaknesses
- Back up statements with documentation





# Well-Crafted Documents

## Officer Statement (OS)

- Avoid paragraphs unless value is added
- Highlight most impactful accomplishments
- Specify *contribution*, not just membership
- Focus on Corps/community/officership
- Address Corps-related under-developed areas
- Back up statements with documentation





# Well-Crafted Documents

## Reviewing Official's Statement (ROS)

- Inform supervisor and RO well in advance
- Provide link to the ROS section of the Promotion Information Page (not the ROS form)
- Draft supporting document
- Focus is on agency/command contribution
- Paragraphs *may* be more valuable than bullets
- Use to confirm statements in other documents and/or address perceived weaknesses.

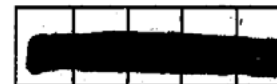






# Example of an ROS

## REVIEWING OFFICIAL'S STATEMENT for 2012 Promotion Board Review



PHS SERIAL NUMBER

**SECTION I -- Officer Information:** enter officer's PHS serial number in boxes in upper right corner and enter officer's name and category below.

Officer's Name

Professional Category (e.g., Medical, Nurse, Health Services, Pharmacy, etc.)

Nurse

**SECTION II -- Reviewing Official's Assessment:** must address the following three points in space provided (*any additional sheets will be discarded*).

1. **PROMOTION READINESS:** Is the officer ready for promotion and to serve at the next higher rank? Mark yes or no and explain.
2. **LEADERSHIP:** How does the officer take on a leadership role in the Command/Agency?
3. **MISSION:** How does the officer contribute to the mission of the Command/Agency?

1. **PROMOTION READINESS:** Is the officer ready for promotion and to serve at the next higher rank? ☒ Yes ☐ No

2. **LEADERSHIP:** How does the officer take on a leadership role in the Command/Agency?

- Officer serves as charge nurse when assigned.
- Actively seeks out roles requiring more responsibility.
- Readily gives valuable input related to molding facility policy and direction.

3. **MISSION:** How does the officer contribute to the mission of the Command/Agency?

- Officer provides compassionate, focused and individualized clinical nurse care to rural, under-served Native American populations.







# Another ROS Example

## 3. MISSION: How does the officer contribute to the mission of the Command/Agency?

1. PROMOTION READINESS: Is the officer ready for promotion and to serve at the next higher rank? ☒ Yes ☐ No

### Promotion Readiness:

It is with great pleasure that I recommend [REDACTED] for promotion to temporary grade Lieutenant Commander. [REDACTED] is an exemplary and decorated pharmacy officer that continually demonstrates her dedication to the mission of the Commissioned Corps and the Indian Health Service. During her tenure she has continued to exceed expectations placed upon an officer of her current grade by not only effectively serving as a clinical pharmacist at the Lawton Indian Hospital but also accepting collateral duties that have shown a regional impact on the care provided.

### Leadership:

[REDACTED] is demonstrating a leadership capacity beyond her current rank. She routinely demonstrates a level of professionalism and integrity beyond the average officer and duly noted by her supervisor and the teams/committees in which she either leads or participates. This is exemplified by her prominent role as the Chairperson of the Lawton Service Unit Pharmacy and Therapeutics Committee and Clinical Coordinator of the pharmacy-based Anticoagulation and Tobacco Cessation Clinic. During her tenure the pharmacy-based Anticoagulation Clinic has shown significant improvement by reducing warfarin related hospitalizations to the current level of zero. Under her leadership The Pharmacy has implemented cost-effective mechanisms to expand the Lawton Service Unit formulary and fulfill the requests of the Medical Staff. She further demonstrates a high level of leadership by serving as a preceptor to pharmacy student interns. She is often called upon to serve as the acting Chief Pharmacist of a large hospital-based pharmacy and ensures the smooth and efficient operations of the pharmacy. Further, she leads by example and often works weekend, evening shifts and taking call for the needs of our inpatients.

### Mission:

[REDACTED] distinguishes herself as a commissioned officer by his superior level of commitment to the IHS mission by a high level of devotion to her patients and the Lawton community. [REDACTED] particularly exceeds in promoting the health of her patients by utilizing her unique abilities with in pharmacological patient management to effectively manage the Anticoagulation and Tobacco Cessation Clinic. She applies best practices and benchmarking the clinics results while maintaining patient focused approach to patient care. Her implementation of these systems has allowed her to be recognized by receiving National Clinical Pharmacy Specialist Certification in Anticoagulation. Therefore, I would strongly recommend [REDACTED] for promotion to temporary Lieutenant Commander based upon her high level of training, exceptional growth in leadership, certification and her 11+ years of professional experience combined to produce a set of unique qualifications and skills in protecting, promoting and advancing the health of the





# Summary

- Educate yourself
- Be proactive
- Understand the audience
- Draft well-crafted documents
- Submit supporting documentation
- Utilize available resources
- Follow up, Follow up, Follow up!



# Questions?

