Obama Nominates Dr. Regina Benjamin as Surgeon General

On the morning of July 13, 2009, President Barack Obama announced the nomination of Dr. Regina Benjamin to be the 18th Surgeon General of the United States. In 1990 Dr. Benjamin founded the Bayou La Batre Rural Health Clinic to serve the Gulf Coast fishing community of Bayou La Batre, Alabama, a village of approximately 2,500 residents devastated twice in the past decade by Hurricanes Georges, in 1998, and Katrina, in 2005. She has served in leadership positions in such health-related organizations as the American Academy of Family Physicians. Regina Benjamin received a B.S. (1979) from Xavier University of Louisiana, attended Morehouse School of Medicine from 1980 to 1982, and received an M.D. (1984) from the University of Alabama at Birmingham; she also holds an M.B.A. (1991) from Tulane University. She completed her residency in family practice at the Medical Center of Central Georgia (1987). The CEO of the Bayou La Batre Rural Health Clinic since its founding in 1990, Benjamin has also served as the associate dean for rural health at the University of South Alabama’s College of Medicine and as president of the State of Alabama Medical Association (2002-2003). Dr. Benjamin is a 1998 Mandela Award Winner, a former Kellogg National Fellow, has been featured as ABC Television’s Person of the Week, and in 1996 was chosen by CBS This Morning as Woman of the Year. She is a 2008 MacArthur Fellow. Dr. Benjamin’s nomination must be confirmed by the Senate.
LCDR Jenny Nussbaum received the 2009 Social Worker of the Year Award for her leadership skills and abilities as a social worker. Her capacity to lead and innovate has been proven and tested during the past year in being appointed acting Hospital Service Administrator for the Division of Immigration Health Service during a period of increased public scrutiny and national press, surprise inspections, mass evacuations, emergency responses to natural disasters, critical shortages in staffing, and turnover of leadership positions.

LCDR Nussbaum has been the stabilizing force of her team, providing guidance and support, maintaining mission focus and ensuring high standards of care for an underserved population group. In doing so she strongly encouraged her fellow officers by word and actions to lead and represent Public Health Service (PHS), their professional group and OPDIV with pride and distinction. Her performance in this position was widely recognized as extraordinary. As a Jr. Social Work Officer LCDR Nussbaum has made a significant contribution to further and support the mission and core values of the PHS Commissioned Corps.

Looking for help with your career as a Social Worker and Commissioned Corps Officer?

The Social Work Professional Advisory Group (SWPAG) suggests you find a mentor. A successful mentoring relationship is designed to foster the professional development of the social work officer through the counsel and guidance of the experienced mentor. It provides positive outcomes for both the mentee and mentor through the expansion of knowledge, skill, energy and creativity. The mentor provides career advancement advice to guide the mentee officer in positioning and presenting himself in a manner which results in professional and career development.

Developing competent and capable officers is essential to the U.S. Public Health Service. To this end the Health Services Officer Professional Advisory Group (HSO PAG) has created a formal HSO mentoring program. The program is open to all qualified Commissioned Corps Officers appointed into the HSO Category. We know that investing time in the personal and professional development of a mentee officer will enhance the overall effectiveness of the HSO category, the SW PAG, and create stronger leaders for the future.

What can you expect in a mentor? Generally, a mentor will have at least 5-10 more years of experience in his/her social work and Corps career than the mentee. A mentor makes herself or himself accessible and willing to invest time in their mentee. A mentor likes to share experiences, practices, tolerance, listens and does not preach or lecture. The mentor identifies with his mentee’s feelings and validates them. He or she helps the mentee feel more closely identified with the Corps, the HSO category, the SW PAG, and their agency. The mentor can help the mentee through many difficult situations, be a source of information and encouragement, provide career guidance, and help develop creative and independent thinking.

Find more information about mentoring at:

If a new and/or junior officer would like to be matched with a mentor, please complete the mentee nomination form and send it to CAPT Laura E. Aponte Laura.Aponte@hhs.gov, Chair of the HSO Mentoring Subcommittee.
CHAIR

CDR Jay Seligman

Commander Jay Seligman is the Current SWPAG Chair and was born in Brooklyn and was raised in Fort Lauderdale. He attended Florida State University and received his Bachelors in Psychology and Masters in Social Work in 1993. He conferred with the Doctor of Health Science in 2006 from Nova Southeastern University.

CDR Seligman has been in the Uniformed Services for over 15 years. He was commissioned as a social worker in the United States Air Force and served for four years. While in the USAF, he had three permanent change of stations and deployment to Prince Sultan Air Force Base located in Saudi Arabia as the Chief of Mental Health. He was inter-service transfer to the Commissioned Corps and has been detailed to Bureau of Prisons, Division of Immigration Health Services (DIHS), Health Resource Services Administration, and currently assigned to Office of Commissioned Corps Force Management (OCCFM) as the Senior Policy Analyst in the Program Evaluation and Oversight Division.

He is known for being a trailblazer and was the first social worker hired in DIHS and advocated for billets for social workers at all detention facilities. Due to his motivation and educating senior staff concerning social work skills and capabilities, DIHS went from one social worker to 20 social workers. He is also was the first social worker in OCCFM and now there are total of three social work officers.

He is one of the most decorated officers in the Corps and has 22 medals and ribbons and including The Outstanding Service Medal, Commendation Medal, and Achievement Medal to name a few. CDR Seligman volunteered and was recognized for his contributions to his deployment aboard USNS Mercy, Pacific Partnership in 2008.

During his spare time you can catch CDR Seligman at Borders or playing with his labradoodle. His brother is also a social worker, LCDR Jamie Seligman. Without a doubt, social work runs through the CDRs veins.

Secretary

LCDR Scott Conner

LCDR Scott Conner, a licensed clinical social worker at USMCFP Springfield, Missouri, joined the Bureau of Prisons in 2003 as a mental health social worker.

After serving four years in mental health, LCDR Conner transferred to medical/surgical where he currently serves as the Palliative Care coordinator, an Equal Employment Opportunity counselor, an Ethics Committee member, and has served as the Ozark Branch COA president for the past three years.

Last year LCDR Conner participated in the 2008 Pacific Partnership Humanitarian Mission with the US Navy as a social worker, travelling to Papua New Guinea, Guam, and Micronesia aboard the USNS Mercy.

LCDR Conner was recently selected as a member of a tier two mental health team and is looking forward to the trainings and experiences it will offer.

He enjoys watching/playing basketball and barbecuing family-style ribs with friends and family. LCDR Conner and his wife, Rachel, are expecting their third child in December.

Leadership continued on next page...
Career Development: LCDR Jerry Mahlau-Heinert is currently working with the Division of Immigration Health Services in their San Diego detention facility. He is assigned as a Clinical Social Worker and is acting Assistant Health Services Administrator since December 2008. This is Jerry’s first USPHS tour since he joined the ranks in July 2008. LCDR Mahlau-Heinert spent the past 7 years as an active duty US Naval Officer working from Japan to Italy and finally at National Naval Medical Center in Bethesda, MD. Jerry is excited by the diverse opportunities offered in the Public Health Service. He looks forward to many deployment experiences in his years as a USPHS Officer. LCDR Mahlau-Heinert’s family have enjoyed traveling the world with him. His wife, Tricia, has been educating their 4 beautiful children at home. Their children, Saejin, Jasper, Rachael and Dakota range from 12 to 2 years old and definitely keep Jerry busy most days, and nights. Jerry is proud to be a part of the USPHS team.

Communications: CDR Douglas Mowell, is the Assistant National Drug Abuse Programs Coordinator for the Federal Bureau of Prisons. For fiscal year 2010, Doug will direct the migration and implementation of the Bureau’s 75 Residential Drug Abuse Programs to a Modified Therapeutic Community modality, create an online learning program for Psychology Treatment Programs staff, and design a therapeutic communities experiential training series for Bureau Psychologists. Doug wishes to expand the role of clinical social workers in the Bureau and to increase the opportunities for PHS social work officers to serve in mental health clinical and administrative positions in the agency. Doug and his wife Donna have just completed building a house in Virginia. He is looking forward to many DIY projects, plans to use his time on the commuter train this year to learn Spanish, and looks to repeat in 2009 as his fantasy football league champion.

Mentoring: LCDR Todd Lennon is a senior program analyst/team lead in the Office for At-Risk Individuals, Behavioral Health, and Human Services Coordination, Office of the Assistant Secretary for Preparedness and Response. LCDR Lennon is committed to sharing knowledge and mentoring as a professional responsibility. He currently serves as a field instructor for the University of Maryland School of Social Work and as a JOAG COSTEP Connection mentor. Prior to joining ASPR he served 18 years with the Council on Social Work Education. He lives in Rockville, MD, with his wife of 18 years and their two daughters.

Readiness: LCDR John Maynard is assigned to the CDC's National Center for Public Health Informatics', Division of Informatics Outreach and Education. His primary duty there is with the Division’s Communities of Practice - a novel and innovative model that brings together voluntary subject matter experts to work on complex issues affecting public health. He is a native of Kentucky and has served in both the US Army and Air Force before transferring into the USPHS. As chair of the social work readiness committee, he wishes to see 100% of social workers reach basic ready status for 2009 and serve as conduit of deployment readiness related information and training availability to USPHS social workers.

Policy: CDR Banks-Shields currently works within the Health Resources and Services Administration in the HIV/AIDS Bureau as a Senior Public Health Analyst. CDR Banks-Shields enjoys spending time with her family and participating in community events. She likes to maintain her clinical skills and currently provides services in a community based agency serving children and families, she also serves on the Board of Directors of Thrive DC, (formerly The Dinner Program for Homeless Women). CDR Banks-Shields has extensive work with policy and has a passion for ensuring that social workers have opportunities to serve in various agencies utilizing the diverse social work skill set.

It is the nature of social work to be challenged, given the profession’s mandate to serve the disadvantaged. It is how social workers deal with the opportunities that these challenges present that will determine the future and scope of the profession. Social workers in the Commissioned Corps have chosen to fill essential public health leadership and service roles within the Nation’s Federal Government agencies and programs. With passion, hope, and creativity we treat patients in underserved and disadvantaged areas, respond to public health emergencies and natural disasters, educate communities about mental health, work in science or health administration, or concentrate in essential clinical specialty areas. We are uniquely positioned in our profession and as Corps Officers to be the leaders the public deserves. But contrary to popular opinion, leadership is not something you are born with, it is learned. We are all capable of exhibiting leadership qualities and every social worker in the Corps does have the capacity to lead in some way - but action is required! The following article suggests sound strategies to begin developing your leadership potential. Article Continued on page 5
-continued “Taking the Lead”

By Howard T. Prince II
Director, Center for Ethical Leadership
Clinical Professor, Loyd Hackler Chair in Ethical Leadership
Lyndon B. Johnson School of Public Affairs
The University of Texas at Austin

Many people think leaders are born, not made. They automatically associate leadership with heroic figures like presidents, four-star generals or great humanitarians— but the reality is that virtually every single person has the potential to be a leader. Leadership is simply a learned set of behaviors, and the ability to lead is a skill that almost anyone can develop. People perform leadership actions every day at home, in the community and at work without even recognizing it.

Of course, the trick is to realize your leadership potential and start nurturing your talents. The bottom line is that leadership skills make you more employable and more promotable. More importantly, they equip you to work better and at increasingly higher levels. To tap into your potential and become a stronger leader in the workplace, start by following these keys to leadership development:

Increase your knowledge of leadership
The first step to becoming a leader is to truly understand what makes a good leader. You need to learn about leadership to help offset some of the common myths in society and to help develop your own skills. Start by reading a good book on the subject (On Leadership by John Gardner is a particularly nice place to start). Then begin paying close attention to other people who are formally called leaders. We learn powerful lessons from both good and bad leaders. When you discover people who have the power to make you want to follow them anywhere, ask yourself what they do to cause that. Once you figure it out, you can try the same approach.

Seek out opportunities to lead
A key factor in becoming a strong leader is gaining experience. Leadership is both a learned skill and a performing art. You’ll discover your abilities and improve them through practice. So be proactive-volunteer, ask to be allowed to lead a team, seek a promotion. If a formal leader is absent from the workplace, seize that opportunity to step up and lead. When your skills are relevant to a situation, step forward and offer your influence. A book won’t make anyone a leader on its own, so it’s crucial to get out there and put what you’ve been reading about and observing to use.

Get comfortable with public speaking
One of the most critical leadership skills is knowing how to speak effectively both formally and informally. Leaders need to be able to get their visions and goals across to people, and words are just words if they’re not effectively communicated. First-line supervisors need to be really good at face-to-face, interpersonal contact, and higher-level leaders need to excel at addressing larger groups through formal communication. If public speaking terrifies you, do more of it—the best way to confront a fear is to just do it (over and over). Join a toastmasters’ club or take a basic public-speaking course. Look for every opportunity to make a presentation at work. Just practice, get feedback and then do it again.

Learn to delegate
A big part of being a successful leader is learning to trust people. Being willing to delegate is crucial—you need to be comfortable with giving away part of your responsibility to someone else. Delegating can be scary at first, but ultimately, it’s the only way to get everything done. Once you do start trusting your followers, you’ll be amazed at how much they’ll grow and work effectively with you. (Empowering other people by delegating is also the absolute best way to help develop future leaders.)

Work on your motivational skills
A strong leader should always begin with a realistic set of goals, and then use them as a motivational technique. When you set your goals in consultation with your followers and make a commitment to those goals as a team, they’ll knock down doors to make it happen. The key is to set goals that are achievable, measurable and that everybody on the team buys into. Another technique to use intrinsic motivation with your followers—in other words, create activities that are interesting and challenging enough that you don’t need to provide any rewards. Or allow people to choose what they want to work on from a variety of options. By getting everyone more invested and enthusiastic in the work they’re doing, the motivation level will go up.

Ask for feedback
To be a good leader, you have to know yourself, and you have to constantly be looking out for what your impact is going to be. You may think you’re doing a great job, while no one else would agree. That’s something you only find out by actively seeking feedback from others. Ask supervisors, mentors, peers, people you trust—then put all their evaluations together to markedly increase your chances of becoming more effective as a leader. You should also never hesitate to ask your followers for their feedback (after all, the only way to know if someone is truly your follower is to ask them). Make it anonymous, and then they’ll feel safe about being honest.

Answer the big questions
Last, but certainly not least, is the issue of figuring out what kind of leader you’re going to be. Do you have a sense of what you think is right—as well as the courage to share that with others? Are you just going to use people to make money, or will you truly value their opinions? Do you have the humility to be open to help from others? Are you sensitive to how you’re going to interact with your followers? Is it up to the leader to establish these values and set the tone for the team. To use ethical means to lead, it’s important that you’re armed with your own set of answers to these questions before tackling any leadership task.

Put simply, leadership is about developing the skills, values, attitudes and beliefs that help you do a better job of helping others accomplish shared goals. There’s no denying the fact that being a leader is hard work, and it requires a lot of emotional and physical stamina. But without seeking leadership opportunities, we fall far short of unleashing the enormous human potential in all of us. So go out there and advance both your career and your life by becoming a stronger leader.
Promotion Brings Dual-Hatted Assignment
CAPT Gail Hamilton

Gail (Davis) Hamilton was promoted to the rank of CAPT on 1 July.

She is currently detailed, as part of the DoD/PHS MOA to the Defense Center of Excellence for Psychological Health and Traumatic Brain Injury, that same day she assumed the role of Deputy Director and Interim Director of the Training and Education Directorate. Prior to this, she served as the Acting Deputy Director of the Strategies, Plans and Programs (SPP) Directorate. With the sudden deployment of the SPP Director to Afghanistan, CAPT Hamilton has been asked to assume the role on Interim Director of SPP.

This is only the second time that this has happened at DCoE and it speaks to the confidence of DCoE leadership in the capabilities, experience, and strength of PHS officers.

WHY SHOULD I RECRUIT IN THE UNITED STATES PUBLIC HEALTH SERVICE?

LCDR Christopher Cline

Recruiting for the USPHS is an important part of showing how an officer is fulfilling the requirement of completing one of the promotion precepts from their respective category benchmarks. Professional contributions and services to the PHS Commissioned Corps (Officership) is the fourth precept of the Category Benchmarks. Recruitment activities are expected to be done as part of one’s effort in demonstrating Officership.

The Associate Recruiter Program (ARP) is in the process of being reengineered. The planned implementation date will be delayed to sometime this Fall 2009 while the ARP Policy is being updated and signed by the Assistant Secretary of Health (ASH) through OCCFM and a Personnel Operations Memorandum (POM) is created in OCCO.

It is important to continue in the effort of recruitment as there is a great need for not only social workers, but most every other category. Active participation in recruitment activities can be done in spite of the current delay of the ARP. Last Spring a list of career fairs was sent out via e-mail from JOAG. The recruiting event I chose to participate in was at the University of Texas in Austin, which happened to be sponsored by the College of Social Work. I was able to get the necessary recruiting materials quite easily through LTJG Kevin Kunard, recruitment specialist. The current recruitment specialist is LT Felicia Watts, at Felicia.Watts@hhs.gov. I invited a nurse to join me in the effort. Surprisingly, there was quite a bit of interest and it was a lot of fun. I was able to take an administrative day to get out of the office and meet young up and coming social workers coming into the work field. I could talk about the value of working in the commission corps and experience something quite unique in the USPHS.

Once you have determined that you want to do this, contact LT Watts, and she can provide you with a recruiting supply request sheet, which you fill out and return to her. You can request the number of materials you expect to use; Category specific fact sheets, brochures (general information about the corps), and giveaway items (first aide kits, dental floss, and bandage dispensers.) There is a Pull-Up Display (6 ½ ft. x 2 ft) which is a stand-alone display designed for the floor. There is money available for reimbursement to cover registration costs, travel, etc, but you’ll need to plan ahead.

A good place to look for substantial information on the Recruitment Program is on the USPHS website (www.usphs.gov). Click on Active Duty PHS Officers, then, click on recruitment materials. There is a General Recruitment Power Point that can be used that is available there as well.

The JOAG Career Fair information workgroup includes LT Chris VanTwuyver at chris.vantwuyver@fda.hhs.gov (781) 596-7754 or LCDR Caroline Le at caroline.le@fda.hhs.gov (313) 393-8284. There is an excellent career fair resources document that guides you in detail what to do. You can obtain this through them as well. A good website for looking up information on career fairs is www.jobweb.com. I found that this is a valid site and can be very useful.

Good luck and happy recruiting!
Announcements

What: Presentation by LCDR Deanna Paul

Where: National Health and Domestic Violence Conference in New Orleans

When: October 2009.

Topic: Silhouettes of the SOUL: Shattering the Silence of Violence.

Description: An introduction to the Native American Silent Witnesses and presentation of the importance of their role in promoting Domestic Violence Awareness. LCDR Paul will discuss the use of Navajo Traditional attire and appearance as appropriate to cultural sensitivity and beliefs that often become barriers. These unique props displayed in both a clinical and outreach settings are powerful methods to generate questions and open dialogue in a safe environment.

To learn about a past presentation on mentoring Native American Adolescents provided by LCDR Paul see the May 2008 COA Frontline.

Top Reasons to be a Proud Social Worker

Data compiled by LCDR Glenn-Reller

US Public Service Commissioned Corps Health Social Workers are dedicated to their practice, their patients and the fidelity to their corps. Here are some additional reasons to promote the upstanding profession of social work

1. Social work is one of the fastest growing careers in the United States. Our profession is expected to increase by 30% by 2010. Currently, nearly 600,000 people hold social work degrees. - the U.S. Department of Labor’s Bureau of Labor Statistics

2. Professional social workers are the nation’s largest group of mental health services providers: There are more clinically trained social workers—over 190,000 in 1998—than psychiatrists, psychologists, and psychiatric nurses combined. Federal law and the National Institutes of Health recognize social work as one of five core mental health professions. - Substance Abuse and Mental Health Services Administration

3. Over 40% of all disaster mental health volunteers are professional social workers - American Red Cross


5. Social workers enjoy many professional specialties. Social workers’ most frequent specialty practice areas are mental health (37%), child welfare/family (13%), health (13%) and aging (9%). - NASW Center for Workforce Studies

Southwest Public Health Advocacy Group (SWPAG)

Announcements

We’re on the web http://usphs-hso.org/pags/swpag/swpag_main.shtml