



Commissioned Officers Association of the USPHS

2015 USPHS Scientific and Training Symposium
Location: Atlanta, GA
Pre-Conference Session
COA Local Branch Leadership Development Workshop

Workshop Minutes/Best Practices/Key Points for Follow-up and Communication Building

Session Description:

Orientation for COA Branch Leadership to learn about best practices for Branch operations with respect to educational programs, community service programs, mentoring programs, officer readiness programs and networking activities.

Objectives:

1. Awareness of Branch Operations
2. Awareness of National Committees
3. Awareness of Initiatives of COA Staff

Date: May 18, 2015, 0800-1300

Moderator – CDR Josef Rivero, Chair of Local Branch Committee

Workshop Call to Order/Housekeeping Items:

CAPT James Simpson:

Contact: james.simpson@fda.hhs.gov

Workshop Introduction/Welcome:

CDR Josef Rivero, **Chair of Local Branch Committee:**

Contact: rivero.josef@gmail.com

- 1) CDR Rivero highlighted the scope of the workshop and perspective of building membership and strengthening communication between the local branches and National COA

- 2) CDR Rivero acknowledged:

Onsite Local Branch Committee Representatives assisting with workshop setup and logistics:

CAPT James Simpson
CAPT Robert Lloyd
CAPT Sara Newman

CDR Josef Rivero
CDR Robert Windom

LCDR Anthony Johnson
LT Michael Muni
LTJG Michael Simpson

Workshop Official Recorder: LCDR Anthony Johnson

Attendees: 86

Consisting of Active Duty Officers/Retirees/Civilians

COA Branches Represented:

- 1) ATL COA
- 2) DC COA
- 3) North Carolina - Raleigh/Durham
- 4) New England
- 5) Heart of America- Kansas City
- 6) Fort Stewart Georgia
- 7) Western Phoenix
- 8) Seattle, WA- Evergreen
- 9) Tucson, AZ
- 10) South Florida
- 11) Chicago
- 12) Greater Los Angeles
- 13) North Central – Rochester, NY COA
- 14) Canyon de Chelly- Chinle, AZ
- 15) Bemidji, MN
- 16) Baltimore, MD
- 17) Ozarks – Springfield, MO
- 18) Ft. Defiance, AZ
- 19) Golden Gate- San Francisco
- 20) Tacoma, WA
- 21) Anchorage, Alaska
- 22) Southwest Oklahoma
- 23) Tidewater – Virginia Beach
- 24) Greater New York
- 25) Greater Texas – Dallas
- 26) Fort Worth, TX

- 27) Cincinnati, OH
- 28) South Texas – Los Fresnos
- 29) Athens, GA
- 30) Rainer
- 31) Sierra
- 32) Milan, MI
- 33) Aloha Branch

Presenter 1

COF/COA Updates:

Col (Ret) Jim Currie, PhD

Key Points:

- 1) Highlighted National COA focus on expanding COA outreach with exposure through the establishment of various media relationships at the local and national level;
- 2) Highlighted Frontline Publication and encouraged Local Branches to utilize the publication as an avenue to share the Commissioned Corps (CC) Story of both domestic and international operations;
- 3) Highlighted importance of detailing the Ebola Response and how it serves as an avenue to expand overall Disaster Response Legislative Advocacy efforts;
- 4) Noted his focus on building communication: Bringing National/DC to the Local Branch level
- 5) **Best Practice for Local Branches:**
 - a. Local Branches should serve as a resource to each other through communication and information sharing

Presenter 2

Legislative Agenda/Benefits:

**CAPT Nita Sood and call-in
by CAPT Michelle Colledge**

- 1) Highlighted the Legislative and Benefits Committee serves as the voice for Active Duty Officers and Retirees
- 2) Focus 1: To advocate on Capitol Hill – present specific issues through connections with CC PAC Liaisons
- 3) Focus 2: To conduct affairs in alignment with COA Strategic Plan Goal #3
- 4) Focus 3: To promote the COA Strategic Plan to ensure language in bills reference Uniformed Services vs. Armed/Military

- 5) Focus 4: To advance relationship between the Office of the Surgeon General (OSG) and Congress regarding Public Health issues
- 6) Focus 5: To advance relationship with Chief Professional Officers to obtain information for advocacy to ensure parity between USPHS and other uniformed services
- 7) Current Advocacy Efforts:
 - a. To expand OSG budget authority regarding emergency preparedness
 - b. To build coalitions with organizations which relate to Active Duty Officers and Retirees
 - c. Established a Congressional Public Health Leadership Award
 - d. Established 1st Congressional Public Health Caucus – April 9, 2015
- 8) Legislative Victories
 - a. 2015 Military Compensation and Retirement Modernization (MCRMC) ref reforms to Tricare included USPHS and NOAA
 - b. 2013-2014 Tricare Autism Pilot language modified to include USPHS
 - c. 2012 Whistleblower Protection extended to USPHS
 - d. 2011 Inclusion of USPHS in Post 9/11 Bill with Transferability option to spouse/children
- 9) **Best Practices/needs from Local Branch Leadership:**
 - a. Advance goals of the COA with reference to the Strategic Plan
 - b. Encourage local legislative representatives to join the new Congressional Public Health Caucus. <http://www.coausphs.org/advocacy/public-health-caucus/>
 - c. Encourage retirees to engage in COA activities and objectives to impact legislation
 - d. Communicate with COA Board Liaison to address and present issues which impact Active Duty Officers and Retirees
 - e. **Special Note:** Request California branches to contact Senator Boxer regarding the National Defense Authorization Act – New bill presented does not protect USPHS/NOAA as covered for Whistleblower protection

Presenter 3

Educational Programs/Mentoring: CAPT James Simpson /CDR Josef Rivero

- 1) Highlighted importance of Surgeon General's Initiative and how it aligns with the COA Strategic Plan;
- 2) Branch Reports: CAPT Simpson will establish a link for all local branches to be able to access the Branch Report Format and the designated submission dates;
- 3) Recognition Program – Current program recognizes Branch of the Year- Large Branch and Small Branch; Recognition/Award Program will change to align with COA Strategic Plan referencing 5 key criteria points for award consideration:
 - a. Education

- b. Community Outreach
 - c. Readiness
 - d. Mentoring
 - e. Networking/Membership: Calculating % of membership based on number of officers in the area/region; Assessing if a branch has a networking plan
- 4) Consideration: To upgrade membership database to have email distribution list so that a local branch can contact officers in their area/region to promote benefits of membership and ensure retention;
- 5) Best Practice for Local Branches:**
- a. Local Branch representatives should contact Agency HR Departments to obtain a list of CC Officers in their area and then contact the officers to advise officers of the benefits of COA membership
 - b. CDR Rivero will ensure Local Branch representatives receive an email of the Quarterly COA Conference Call so that all branches can remain up-to-date on COA initiatives

Presenter 4

Community Service Programs: LCDR Leo Angelo Gumapas/LT John Pesce

Program: Prevention through Active Community Engagement (PACE)

- 1) Focus on how to capture/operationalize community programs at the Branch Level
- 2) Challenges for USPHS which are addressed through the facilitation of community events:
 - a. Visibility
 - b. Ensuring common focus through branches
 - c. Communication
- 3) What is PACE?
 - a. PACE Program started in 2013
 - b. Represents Programs that highlight the National Prevention Strategy (NPS) to promote Unity of Purpose
 - c. Programs are at the Community level – Schools/Children/Families
 - d. Event examples include: career days, a school talk regarding obesity, a school talk regarding tobacco use, etc...
 - e. Impact since 2013
 - 1. Over 140 officers have participated in events
 - 2. More than 25 events have occurred
 - 3. Over 11K people have been impacted by the events relating to the NPS
 - f. Focus 1: To form community contacts through healthcare related events
 - g. Focus 2: To build leadership through the administration of healthcare related events

- h. Focus 3: To present reports to Surgeon General's Office referencing events and who/# of people impacted by the event from an NPS perspective
- i. Leadership Roles for an event: Event Coordinators; Lesson Plan Developers; Mentors
- j. Resources:
 - 1. PACE leaders have information on how to outline metrics regarding an event: ie. Who presented, time, demographics of the audience, topics which reference NPS, etc...
 - 2. LCDR Gumapas (**lgumapas@yahoo.com**) and LT Pesce (**john.pesce@nih.gov**) serve as Point of Contacts for PACE: They can connect branches to content needed for an event such as: Templates, topics, event outlines, PowerPoints, scripts for an event, lesson plans, information on materials needed, reporting forms, etc..

4) Best Practices for Local Branches:

- a. Local Branches should form committees to conduct an event in their area/region
- b. Local Branches which have conducted an event can mentor/educate other branches on how to initiate a community event – Share ideas on key points/ways to enhance event outcomes
- c. Utilize social media to publicize an event
- d. Review the ESF-8 model and its scope regarding public health and healthcare delivery for ideas on initiating community service activities
- e. Go through your agency Publication Information Officer/Department regarding sending out information on events to community newsletters to enhance attendance/# of people impacted
- f. After an event: Complete After Action Report which allows for Certificate of Recognitions to be generated for participating officers to include in their eOPF.
- g. See PACE Attachments.

Presenter 5

New PT Uniform:

LCDR Tracy Powell

- 1) Highlighted USPHS Uniform Communications have been updated regarding the Grooming and Uniform Standards;
- 2) Noted PT Uniform could not be established/acquired through Navy Nex and put in their stores because the upfront cost is \$50K.
- 3) The initiative with updating the PT uniform was established by Dr. Koh, previous Assistant Secretary for the U.S. Department of Health and Human Services to ensure the CC uniform is aligned with Navy uniform specs;
- 4) PT Uniform:
 - a. Objective is to roll out information regarding approved Vendor for acquiring the new PT Uniform January 2016 after review of Vendor Proposals

- b. Seek to have uniform available for Active Duty Officers and Retirees
- c. Can use for outside events but not to be worn as a work uniform
- d. Can use for personal training
- e. Can wear while participating in community events: ie. Run/walk events

5) Best Practices and Local Branch needs:

- a. Assist with identifying Vendors for producing the uniforms based on the approved standards for top and bottom/color/logo, etc...; Branches can come together and have one POC to contact identified vendors and seek to establish a contract
- b. Branches can determine if they desire to participate in acquiring the uniform
- c. Vendor Proposals are due by January 2016 regarding costs/return from each sale and tech specs for ordering such as a dropdown with branch designation so that proceeds can be received by the specific branch
- d. Ref Costs/Proceeds: Branches will receive proceeds from sale of the PT Uniforms from their area
- e. Branches will need to develop an Adhoc Committee/Chair – to facilitate the procurement once the vendor is selected

Presenter 6

Communication/Outreach:

**CDR Heather Bair-Brake/
Mr. John McElligott**

- 1) Highlighted the increased focus on Public Relations and branches advising their local media of projects being done which highlight the Commissioned Corps mission in reaching communities;

2) Best Practices for Local Branches:

- a. Seek guidance/approval regarding the media policy through respective Agency Headquarters; then local newspapers can correspond with local branches to publish information on Commissioned Corps activities;
- b. National COA will produce commercials for advertising for next COF Symposium 2016;
- c. National COA needs Photos and Videos from local branches for the website detailing: stories of branch events/features on officers – Send content to COA POC: Content is reviewed by John McElligott (**jmcelligott@coausphs.org**)
- d. Load COA website in your favorites list: coausphs.org; view FaceBook and Twitter
- e. Send any questions to COA through the Contact Us link on the website

Presenter 7

Readiness:

CAPT Dan Beck

- 1) Noted After July 1, 2015 the President's Challenge will Not be an option for meeting readiness;
- 2) Annual PT Test Changes: Will include Flexibility assessment and an aggregate scoring method
- 3) Official roll out for PT update is January 2016; Officers can utilize the current standard for meeting readiness requirement until the end of 2015; Any PT test completed is good for a 1 year period after completion date; Any PT test completed before the new roll out will be good for 1 year and the next PT test performed by an officer would have to be in accordance with the new PT standard;
- 4) Points to note for Officers:
 - a. Readiness is a condition for service- not being able to meet a certain part is no excuse; An officer can request a waiver for a specific part of the PT test if not able to complete due to a specific reason;
 - b. A formal standard of the new PT test requirements and effective date will be published and disseminated to all officers;
- 5) **Best Practices for Local Branches:**
 - a. Schedule an APFT Test once per month – it helps to build corps relationships between officers
 - b. Always reference the Surgeon General's Initiatives from a National level and focus on implementation at the local/community level
 - c. Promote the idea of building a great American Community
 1. Enhance Healthcare literacy
 2. Transition from a Treatment perspective to Prevention
 3. Work to change behaviors to promote better health
 4. Branches must work at community level to address health issues and build programs related to the National Prevention Strategy (NPS): ie. Support a Smoking Cessation Program

Presenter 8

Membership:

CDR Blakely Fitzpatrick

- 1) Membership is the # 1 Objective of the COA Strategic Plan;
- 2) Melissa Spalding was present and was noted as the primary contact for COA Membership Inquiries (**MSpalding@coausphs.org**);
- 3) Highlighted: Only 65% of Active Duty Officers are members of COA;

- 4) Highlighted: Only 30% of Senior Officers are members of COA;
- 5) **Best Practices for Local Branches regarding increasing membership:**
 - a. Establish a branch membership committee
 - b. Disseminate updates to officers regarding the COA lobbying efforts for Commissioned Corps
 - c. Update Membership Directory – the Branch President can submit the Branch Update Form and obtain access to the national database to load the names of active officers
 - d. Branches should review the COA online Branch Resource page: ref Dos and Don'ts
 - e. Print Branch Directory and use as a sign in for local branch meetings to determine which officers are active COA members
 - f. Contact JOAG to obtain a current new officer listing
 - g. Encourage officers to update their contact information and rank as the specific rank determines the amount of dues/revenues obtained for COA

Presenter 9

COA Strategic Plan:

CAPT Sara Newman

- 1) Highlighted key points of the Strategic Plan and motivated local branches to bring the strategic plan to life through their programs and through networking to increase membership;
- 2) Highlighted how increased membership expands advocacy efforts;
- 3) Encouraged local branches to write to their state representatives and congressional officials to obtain increased support for USPHS and its services
- 4) Facilitated Branch Recognition:
 - a. Large Branch of the Year – Atlanta COA
 - b. Small Branch of the Year – South FloridaDistinguished Branch Recognition- Acknowledgement of other branches for their great work
 - a) Greater New York
 - b) Oklahoma
 - c) Evergreen
 - d) New England
 - e) North Carolina
 - f) DC Metro
 - g) Cincinnati
 - h) Central Texas
 - i) Southwest Oklahoma
 - j) Aurora
 - k) Fort Defiance
 - l) South California

- m) Rocky Mountain
- n) Phoenix
- o) Catawba

5) Best Practices for Local Branches:

- a. Report activities to increase exposure of Commissioned Corps through COA
- b. Communicate and increase connectivity between branches through unity of purpose with regard to the COA Strategic Plan

Question Drop Box:

Additional questions for follow-up to attendees

- 1) Where on the COA website can we locate the Dos/Don'ts list that was discussed during the Legislative Agenda Talk? **CDR Bair-Brake/John McElligott**
- 2) Why is the COA responsible for making USPHS PT Uniform accessible? Aren't uniforms required by ALL PHS members regardless of COA Membership? **LCDR Powell.**
- 3) Is the PT Uniform required? What is the \$50K introductory cost for regarding the PT Uniform? **LCDR Powell.**
- 4) Can we purchase and give the PT Shirts out to family and friends to wear? **LCDR Powell.**
- 5) Point: Seek to raise \$50K by going to: gofundme.com ---- The amount is not hard to get....
- 6) Can APFT be used as part of the cardio clearance for the Officer 5 year physical? **CAPT Beck.**
- 7) About advocacy and COA at the Hill – How difficult is it to advocate for the USPHS when even the USCG was excluded from a bill or benefit? **CAPT Colledge**
- 8) With the PACE Program and CAPT Beck's focus on communities – I am wondering if there are examples of COA Branches partnering with State & Local Health Departments?; and also are there good examples of partnerships with other Federal Agencies regarding community outreach? **LCDR Gumapas and LT John Pesce.**

Action Items: Submit any additional questions to Captain James Simpson at James.Simpson@fda.hhs.gov . Copy to CDR Josef Rivero at rivero.josef@gmail.com and jrivero@bop.gov.

Note: Planning Efforts are being facilitated for the 2016 Symposium in Oklahoma City, Oklahoma

Minutes Reference:

LCDR Anthony Johnson
Administrative Officer