



**U.S. Public Health Service
Pharmacist Professional Advisory Committee**

Chief Professional Officer Pharmacy Update

August 2011

Commissioned Corps

- The **former Reserve Corps officers now deemed Regular Corps** by the ACA have not yet received their orders in their OPFs. Currently, we are awaiting these orders to be signed by Secretary Sebelius. However, this process does NOT affect the officer in any way regarding benefits, roles, etc. Those officers deemed Regular Corps officers ARE considered Regular Corps. You will receive a Regular Corps ribbon after the orders are processed. Please do not email Corps leadership requesting the Regular Corps ribbon. Thanks for your understanding.
- The furlough status discussed in the last Report is (and has been) continually ‘researched’ by many in the chain of leadership. Please keep in mind that the Commissioned Corps has actively sought out information and is still communicating back and forth with leadership above the Corps and regarding our status. Thus far, no new findings have been relayed back to us, but they are still working this issue.
- The new accountability structure of the Corps will be placed in the Federal Register in the coming days. This will immediately be put into place consolidating many Offices (OFRD, ORA, OCCO, OCCPM) into one large Division of Commissioned Corps Personnel and Readiness (CPR). Stay tuned for more information.
- Our PHS Commissioned Corps pharmacists will grow to nearly 1200 pharmacist officers once all have received calls-to-active duty. We have inspired the recruitment process and sold our career based on service and our values. If we continue “to build it, they will come “- for the right reasons. We are focusing our efforts and assisting our Department to fill the needs of our Agencies. This may result in targeted physician and dentist recruitment and/or focused efforts on high quality candidates. Our applicant pool has grown substantially as well.
- The most recent nominations for commission have been sent to the Secretary in June. The list contained 567 more candidates. No word yet on movement to the President for nomination.
- Senate Bill 679 passed the Senate and is now in the House. This Bill eliminates the need (after Presidential nomination) for a PHS Commissioned Officer to be confirmed by the Senate. Although initially it may seem like a positive step to streamlining the commissioning process, it is not consistent with DOD processes. This may cause us to lose parity with DOD and may negatively affect us in the future. That said, we are still exploring the potential impact. As of 8-3-2011, it has not yet even passed the House of Representatives.

Promotions

- A ‘new’ promotion directive released from Secretary Sebelius had caused some initial concern from many officers (<http://dcp.psc.gov/eccis/documents/CC122.01.pdf>). This directive, RE: POM CCI 122.01, details how the Affordable Care Act required adjustment of some of the language dealing with Temporary and P-grade promotions. However, the processes and requirements for promotion did not change in concept. The revisions deal more with nomenclature (i.e. eliminating references to Reserve Corps) than changes in qualifications, processes or standards.

Billets

- Billet reform continues in the pharmacy category. A more detailed update from CDR Mike Crockett is forthcoming. All pharmacists in pharmacy billets have completed steps 1 and 2. The first 'upload' of the billets into Direct Access will take place in September by CAPT Byron Bailey. CAPT Bailey will also be providing summary reviews of the billet selections to key agency and category stakeholders for review steps 3 and 4.
- Multidisciplinary billet release is set for mid-August. If you are in a multi-D billet, please be aware these billets will be released and you will be responsible for selecting a billet (step 1) and filling in a position description (step 2), just like the category specific billets as soon as possible.

Recruitment

- As you will notice in the coming months and beyond, there may be a shift in recruitment 'philosophy'. As uniformed officers, we have a responsibility to adapt and meet the Department and Agency needs. As the recruiting processes develop within the new Corps structure, please be aware of any potential changes. There will likely be thematic emphasis or more targeted recruitment on the following 5 'categories':
 - Vulnerable and medically underserved populations
 - Hard-to-fill positions
 - Our 24/7 response capacity and responsibility
 - Support to need identified by other uniformed services
 - Unmet public health need

As a bit of an editorial, each of these situations is an exciting and wonderful opportunity for our Corps and our category to demonstrate its value in times of need. This is another situation where our values and principles for service can come to the forefront. These are appropriate needs and are supported at the highest levels. If you have any questions, please ask our Recruitment Section leads and they may contact me for further information. We will be learning more about this process in the near future, so please stand-by and thanks (as always) for your volunteerism.

- The PharmPAC is working on a targeted recruitment project with the Physician PAC. If you are willing to assist, please stand by for a recruitment section update.

Readiness /OFRD

- Update from CDR Nate Yale from the PharmPAC Career Development Section. Please remember that **readiness is a year-round activity**, not just for promotion cycles or months.
- 2011 OFRD Field trainings have been successful thus far. Most recently, Operation Lone Star, to rural Rio Grande Valley in Texas was completed. Our officers were highlighted in an article and video. Congrats to all involved: <http://www.brownsvilleherald.com/news/star-129200-operation-lone.html>

OBC

- OBC Graduation schedule is on CCMIS: <http://dcp.psc.gov/COTA/OBCD.aspx>. Next OBC - August.
- I was asked to stand-in for OSG and make graduation remarks to the July OBC class. This was the First graduating class that went from Call-to-Active Duty straight to OBC before then went permanently to their assigned sites/agencies. This also helps to strengthen the value of the training as many of the administrative hurdles were completed with COTA staff and the officers and thus they are ready to work when they arrive on site.

COSTEP

- Everyone in the chain is aware of the need to bring **COSTEPs** on rapidly once the authorities have been approved to bring them into the Ready Reserves. Previously, the Department granted the ability to call COSTEPs into the Ready Reserve year by year. Now, there is no date on the policy,

thus every year, COSTEPs may enter the Ready Reserve as a Commissioned Officer for 6 months. That should put our next COSTEP class in 2012 in good shape for early selection and assignment.

COERs

- A minor edit to the COER process will be identified for the 2011 COER. In 2010 for the first time, the rating official had to send the COER to the Reviewing Official prior to the officer review. However, due to logistical challenges and delays, we will rescind to the original process and rating officials will NOT have to send their COER to reviewing official first.

Meetings

- COA/COF meeting in New Orleans was a success. Over 700 officers attended. The planning committee did an excellent job. Many thanks to CDR Tim Murray, CAPT Josephine Lyght, and LT Khang Ngo.

CPO Initiatives Update

- With the release of the Prevention Strategy by the Surgeon General, I charged the pharmacy category to develop a brief strategy to demonstrate how we apply the Prevention Strategy in our daily practice. RADM Lushniak then tasked every category in the PHS to do similarly. Pharmacy category will take the lead and develop a template. CDR Diak is leading up a small group to gather input on some of our prevention initiatives. If you have a specific prevention initiative you would like to share, please contact CDR Diak at FDA.
- I was honored was again to recently discuss the Pharmacy Report to the Surgeon General: Improving Patient and Health System Outcomes through Advanced Pharmacy Practice with VADM Benjamin. We will continue our dialogue on a follow-up meeting in the very near future – likely in August. All indications are we continue to move in the right direction.
- Please consider utilizing the PharmPAC leadership (CDR Mallette, CDR Diak) and LCDR Christopher M. Jones / LT Yiyong 'CoCo' Tsai for any business related issues:
([Christopher M. Jones@ondcp.eop.gov](mailto:Christopher.M.Jones@ondcp.eop.gov), Yiyong.Tsai@fda.hhs.gov)

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