

CAPT Tim Thomas Makes Strides to Improve Health in the Federal Bureau of Prisons



BOP Regional Medical Team responds after Hurricane Maria impacted a prison in Puerto Rico, September 2017. From left: CDR Regina Bradley, Dr. Angel Ortiz, Ms. Krista Stephens, CDR Tim Thomas, Dr. Hector Lopez, and CAPT Robin Hunter-Buskey

by CDR Wanda Wilson-Egbe, DVM, MPH, Dipl. ACVPM and CDR Katie Jacques, PT, DPT, OCS, CAHA

CAPT Tim Thomas, MSN, RN, CCHP, has proudly served the U.S. Public Health Service Commissioned Corps in the Nurse Category since 2004. Prior to joining the USPHS, he was an active duty enlisted service member in the U.S. Army and worked as an operating room scrub technician. While working as a scrub technician, he learned of an opportunity where the Army would send him back

to college to finish his BSN, called the AMEDD Enlisted Commissioning Program. He returned to the University of North Florida in Jacksonville, FL, where he completed his BSN in 2001. One day while in training at Walter Reed Army Medical Center, CAPT Thomas initiated a life-changing conversation with a nurse practitioner who wore a uniform that looked like the U.S. Navy. Through this encounter, he learned of the USPHS mission and service activities and imagined the powerful and far-reaching

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from the
Executive
Director



Jacqueline Rychnovsky, PhD, FAANP, CAE
Captain (ret.), Nurse Corps, US Navy

Welcome Ready Reservists!

By now, most of us are aware that legislation passed on March 27, 2020, created the Ready Reserve Corps of the U.S. Public Health Service. The bill, originally introduced by Senators Mike Rounds (R-SD) and Doug Jones (D-AL) (S. 2629), and Representatives Michael Burgess (R-TX-26) and Anna Eshoo (D-CA-18) (H.R. 4870), in October 2019, was written into the CARES Act (H.R. 748) and became law. This was seen as great news for the Corps. According to the Commissioned Corps Ready Reserve website, “the Ready Reserve Corps is a part of an elite group of Commissioned Corps’ America’s Health Responders who promote, protect and advance the health and safety of the Nation.” The application process for the Ready Reserve Corps opened in the fall of 2020 and the first officers were commissioned in the spring of 2021. I have had an opportunity to meet a few of these officers (virtually) during Officer Basic Course (OBC) Open House events

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COA Member Benefits

Capitol Hill Representation

Efforts on Capitol Hill continually support all Commissioned Corps officers – active, former, and retired

Local Representation

COA Local Branches provide venues for meeting fellow officers and a forum for the discussion of issues within the Commissioned Corps

Newsletter

Newsletter reports on monthly activities and items of interest about the Corps and COA

Ribbon

Authorized to be worn on the PHS uniform by members in good standing when attending COA functions

Insurance Programs

Low-cost insurance programs that may continue as long as your membership in COA remains current

USF Online Programs

Discounted degree and certificate programs like PhD, DrPH, MPH, MSPH, MHA

NYMC Online MPH

50 percent discount for the online MPH and certificate programs

Scholarship Program

College scholarships for children and spouses of COA members

The Ohio State University

In-state tuition for graduate nursing and certification programs



Legislative Update Reconciling a Complex Game

by Nate Bronstein MPA, MEd, MSSP;
and Mike Clark, MPA

"It is designed to make us think in millions, billions, to make us run out of numbers and collapse into infinity..."

-Billy Collins, Poet Laureate United States 2001-2003

The legislative process can be confusing, perplexing even. The procedures, language, and sheer volume of text confound those who have been working in public policy for decades, let alone the average passerby. From time to time, we will use this space to unpack the legislative process and distill it down to something digestible. In this edition, we focus on a topic that would otherwise function as a wonderful sleep aid: budget reconciliation. Yet, at the time of writing this article in mid-October 2021, it is a topic that could impact the public health landscape for the next decade.

As we write to you from the past, you may already have answers to much of the uncertainty surrounding two massively important bills: the bipartisan infrastructure bill and the Build Back Better Act. The bipartisan infrastructure bill, a massive document over 2,000 pages in length, relates largely to physical infrastructure projects including clean water and funding for building resilience against natural

disasters. The Build Back Better Act, an equally massive document, encapsulates President Joe Biden's societal and human services agenda. The public health section alone accounts for 60 pages of next-decade-long spending on projects related to modernizing America's public health infrastructure, pandemic preparedness, innovations for social determinants of health, and maternal health.

The bipartisan infrastructure bill passed the Senate on August 11, and now awaits a House vote. Because it is linked politically to the Build Back Better Act, its passage has been delayed. House Democrats have threatened to vote against the infrastructure bill unless an agreement and vote on the Build Back Better Act is reached. The Build Back Better Act also goes by another name, the Fiscal Year 2022 Budget Reconciliation Bill, or simply the reconciliation bill.

So, what exactly is budget reconciliation?

Think of the legislative process like it's your favorite board/card game, where the goal is to pass a bill into law. Think Monopoly, Chutes and Ladders, The Game of Life, or Settlers of Catan. Budget reconciliation would be an incredibly special card you were dealt at the beginning of the game that you could only

see **LEGISLATIVE** continued on page 16

COF Seed Grant Aims to Improve Child Mental Health



by Megan Skuster, Marketing and Events Coordinator, Boys & Girls Clubs of Greater Salt Lake

Mental health, particularly in youth, is a serious issue in Utah. We have the fifth-highest suicide rate in the U.S., and more than 1 in 5 high school students in Utah have seriously contemplated suicide. This is especially concerning as most of our youth are from low to moderate-income families. Youth from low-income families are 118% more likely to be uninsured and 42% more likely to lack a consistent source of healthcare than their more resourced peers. As a result, less than 15% of children experiencing poverty are receiving mental health services they need.

Mental health issues have only become worse in the wake of the COVID-19 pandemic. Our staff has reported many youth discussing feelings of loneliness, increased tensions at home, disengagement from school, and other issues. These emotional strains heavily impact youth; mental health-related ER visits increased by 31% for teens during the pandemic.

It has been a longstanding goal of our organization to provide the youth we serve with emotional and mental health support. We received funding from the COF Barclay-Giel Seed Grant in 2020. We have used the funds to partner with a wellness organization called WholeKids. Together, we provide behavioral wellness group lessons based on Cognitive Behavioral Therapy principles, Dialectical Behavioral Therapy, and mindfulness exercises to 82 youths. We also provide ongoing weekly counseling sessions to five youths.

These activities have reinforced suicide prevention, sexual assault prevention, character development, healthy relationships, and social-emotional growth. Group activities using Cognitive Behavioral Therapy have been found to decrease anxiety and improve global functioning significantly. Additionally, mindfulness curricula have been found to increase feelings of calmness, acceptance, emotional regulation, and a decrease in physical aches in its participants.

We are already hearing incredible feedback and outcomes from our Club staff. Some of the impacts include:

- One of our homeless youths is grateful to be working on his self-talk with a therapist. Without the program, he says his family would not have the opportunity to focus on mental health.
- Therapists working with one of our youths who is battling depression and anxiety and attempted to commit suicide. The therapists included her family to create an action plan to improve her mental health.
- At one Club, five parents reached out to the staff to discuss the behavioral improvements their kids have been demonstrating since beginning the Behavioral Health program.

“Our parents are telling us that their kids are behaving better... they’re coping with stressful situations in a better way,” said Amanda Ree Hughes, CEO of Boys & Girls Clubs of Greater Salt Lake. “They’ve learned these techniques through their therapy sessions here in our Boys & Girls Club.”



COF Launches New Website

by Rear Admiral Steve Solomon, MD, FACP, FIDSA, USPHS (ret.)

Last month, the Commissioned Officers Foundation (COF) launched a redesigned website at www.phscof.org. Our goals for this new website are to better communicate our objectives and to make our activities more visible and easily accessible.

Online, you will find information about the 55th Annual USPHS Scientific and Training Symposium to be held in Glendale, Arizona, just outside Phoenix, from May 23 to 27, 2022. This is the only conference dedicated to the Commissioned Corps and the U.S. Public Health Service and is a primary venue for sharing the latest information on the science and practice of public health. The meeting also serves to provide an opportunity for active-duty officers stationed across the U.S. and in other countries to reconnect, support each other, and share their common identity as the only uniformed service dedicated to public health in the world.

You'll also see information about our grants program—seed grants for community-based organizations that have had a significant impact in helping populations in need. The 62 grants COF

has awarded have supported groups addressing a wide range of public health issues, such as oral health, COVID-19 education, prenatal care, suicide prevention, substance abuse intervention, cancer prevention, and motor vehicle safety.

The new website will also serve as an opportunity for COF to carry out its role in education and advocacy for public health. COF is committed to a series of goals that are now, in the second year of the COVID pandemic, more important than ever. We advocate for:

- Increased funding for public health at all levels of government—federal, state, and local.
- Increased recognition of the vital role of public health professionals through greater support for training and education.

- Augmenting the capacity of the public health system to address critical problems through increased staffing, better equipment, and a national effort to prioritize health and safety of individuals and communities.
- Greater awareness of the history and accomplishments of the USPHS Commissioned Corps and its officers, as well as its potential to serve as the primary national locus for public health action in the United States.
- A national commitment to public health literacy and education in the United States to combat misinformation, disinformation and contagion of anti-science that has become one of the greatest threats to the health of our communities.
- A national commitment to training the next generation of public health leaders with an emphasis on increasing representation from underserved and underrepresented groups.

Our digital presence will continue to evolve. We want your feedback on how to better communicate and fulfill COF's mission. Please visit the site and provide us with suggestions and comments at www.phscof.org/contact-us. We look forward to hearing from you.



Heart of America COA Feeds the Hungry

by LT Krista Watson, PT, DPT; LCDR Julie Niewoehner, PharmD, MHA, BCPS, NCPS; and LCDR Brandy Rose, MSHI, RHIA

The Heart of America (HOA) Commissioned Officer Association hosted a volunteer event to provide home-cooked, nutritious meals for families, the homeless, hungry, lonely, physically or mentally disabled, and low income. A team effort of 16 volunteers raised \$350 to purchase supplies in order to prepare 100 meals for the Lawrence Interdenominational Nutrition Kitchen (LINK) in Lawrence, KS. This non-profit organization has provided free meals to anyone who is hungry since 1985. The combined efforts of 15 officers and 1 civilian included assembling a variety of meal options, followed by distributing the meals to the host location. This was a gratifying opportunity to come together as a COA branch to serve the community beyond our normal duties.



Members of the Heart of America branch of COA assemble meals at the Haskell Indian Health Center for the Lawrence Interdenominational Nutrition Kitchen.

Front row, from left: CDR Shannon Lowe, LCDR Julie Niewoehner, LT Krista Watson. Back row, from left: Dawn Ready, LCDR Joe Rorabaugh-Irwin, LCDR Michelle Barbosa, CDR Rebecca Geiger, LCDR Brandy Rose, and LT Marcia Sahmaunt.



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The Rabbit Effect

by RADM Brandon L. Taylor, PharmD,
BCPS

In the 1970s, researchers set up an experiment to examine the effects of diet on heart health. Over several months, they fed a control group of rabbits a high-fat diet and monitored their blood pressure, heart rate, and cholesterol.

As expected, many of the rabbits showed a buildup of fatty deposits on the inside of their arteries. However, researchers had discovered something perplexing. Although all of the rabbits had a buildup, one group surprisingly had as much as 60 percent less than the others. It appeared as though they were looking at two different groups of rabbits.

Could you imagine how you might be pulling your hair out if this was your study? How could this be? The rabbits were all the same breed from New Zealand, from a virtually identical gene pool. They each received equal amounts of the same food.

What could this mean? Did the results invalidate the study? Were there flaws in the experiment design? The investigators struggled to understand this unexpected outcome.

Eventually, they turned their attention to the research staff. Was it possible that researchers had done something to influence the results? As they pursued this, they discovered that every rabbit with fewer fatty deposits had been under the care of one researcher. She fed the rabbits the same food as everyone else. But, as one scientist reported, “she was

an unusually kind and caring individual.” When she fed the rabbits, “she talked to them, cuddled and petted them. ... ‘She couldn’t help it. It’s just how she was.’”

She did more than simply give the rabbits food. She gave them love!

At first glance, it seemed unlikely that this could be the reason for the dramatic difference, but the research team could see no other possibility.

So they repeated the experiment—this time tightly controlling for every other variable. When they analyzed the results, the same thing happened! The rabbits under the care of the loving researcher had significantly higher health outcomes.

The scientists published the results of this study in the prestigious journal *Science*.¹

Years later the findings of this experiment still seem influential in the medical community. In recent years, Dr. Kelli Harding published a book titled *The Rabbit Effect* that takes its name from the experiment. Her conclusion: “Take a rabbit with an unhealthy lifestyle. Talk to it. Hold it. Give it affection. ... The relationship made a difference. ... Ultimately,” she concludes, “what affects our health in the most meaningful ways has as much to do with how we treat one another, how we live, and how we think about what it means to be human.”²

The above account as recounted by Gary E. Stevenson rings true in my mind and heart. During this continuous time of uncertainty, the ongoing pandemic,

political turmoil, and social unrest, couldn’t we all learn from this experiment gone horribly right?! This serendipitous result is a reminder of what we already know: kindness, caring, compassion, a gentle hand, grace, benefit of doubt, and even love is needed evermore and has highly impactful effects on health. Even within our own ranks, we can show more kindness and care for one another. We do when we are deployed; we require a “battle buddy” to ensure safety and care; we unite as “one team, one mission.” But are we not “one team, one mission” as officers of the US Public Health Service Commissioned Corps, always? Shouldn’t we be looking out for one another, always? Even when we cannot agree on a particular matter, can we still be professional in our actions and behavior towards one another? Certainly, we should, and certainly we can.

I’ll conclude with a story found on social media, author unknown:

A man saw a snake being burned to death and decided to take it out of the fire. When he did, the snake bit him causing excruciating pain. The man dropped the snake, and the reptile fell right back into the fire.

The man looked around and found a metal pole and used it to take the snake out of the fire, saving its life.

Someone who was watching approached the man and said, “That snake bit you. Why are you still trying to save it?”

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Chattahoochee Valley Branch and Easterseals: Senior Life Savers

by LCDR Aaron McNeil, PA-C, MS, CCHP

Federal Bureau of Prisons, FPC Montgomery

Much like the Commissioned Corps of the U.S. Public Health Service, Easterseals is an organization that was formed because there was a need to provide care to an underserved population. Easterseals was birthed from The National Society of Crippled Children which was founded in 1919. It was initially founded to provide care for children with disabilities. As the organization grew, it expanded its services to the families of disabled children, veterans and military families, seniors and caregivers.² Its growth has blossomed into a network of 75 locations across the United States.

Montgomery, Alabama's Easterseals Central Alabama (ECA) branch was founded in 1953 and opened its doors to the public in 1961. Its purpose statement reads, "To change the way the world defines and views disability by making profound, positive differences in people's lives every day. Although ECA heavily focuses on children, it also has programs designed to assist adults. One such program is the Senior Community Service Employment Program (SCSEP) which is directed by Ms. Frankie Thomas. SCSEP provides job readiness skills and training for seniors who wish to reenter the workforce. It fosters individual economic independence by placing seniors into jobs that include assistant or support positions in healthcare facilities, childcare or teachers' assistants, data entry clerks, industrial assemblers, home health care assistants and many more.

On September 13, 2021, LCDR Aaron McNeil, Physician Assistant Certified and president of the Chattahoochee Valley Branch of the Commissioned Officers Association, Inc. (COA), conducted an in-person presentation for the Easterseals Central Alabama's SCSEP seniors and staff, while maintaining social distancing. It was identified that based on their senior status, the potential of having comorbidities, the chance of working in a COVID-19 high risk area and even fulfilling the role as a caretaker of a grandchild, these seniors needed a refresher on simple life-saving techniques to protect themselves and others.

As these seniors reenter into classrooms or industrial environments, they may be faced with accidents, or workplace and domestic violence and they may need to assist victims. Since the leading cause of death due to accidents or violence is exsanguination, this presentation introduced the seniors to tourniquets and how to properly apply them. "Chest Compression Only" CPR and how to apply and use an automated external defibrillator (AED) was also discussed because, as Care Givers and Sitters, these seniors may need to administer CPR on children or elderly patients.

As the presentation centered on life-saving steps that protects from blood borne pathogens and other transmittable diseases,



LCDR Aaron McNeil, president of the Chattahoochee Valley Branch of COA, educates seniors about handwashing.



LCDR Aaron McNeil and members of the Easterseals Central Alabama Senior Community Service Employment Program.

LCDR McNeil covered the importance of not only wearing gloves but how to properly remove and dispose of them. The need for and how to properly wear a mask was also discussed. At this stage, the Prevention through Active Community Engagement (PACE) handwashing presentation was viewed. Although these seniors may have taught their children how to properly wash their hands, they too needed reeducation on the proper handwashing techniques as they sang the alphabet song. The Senior Life Savers presentation concluded with a discussion about COVID-19. These seniors were tasked to save their lives and the lives of others by taking preventive measures to decrease the risk of contracting and spreading COVID-19. They were encouraged to wear and remove gloves properly, wear a face mask, wash their hands thoroughly, and take the COVID-19 vaccine.

1. Easterseals, n.d., accessed 7 October 2021. [Easterseals.com/who-we-are/history](https://www.easterseals.com/who-we-are/history)

2. Easterseals (U.S.) 2017, accessed 7 October 2021. [en.wikipedia.org/wiki/Easterseals_\(U.S.\)](https://en.wikipedia.org/wiki/Easterseals_(U.S.))

3. Easterseals Central Alabama, n.d., accessed 7 October 2021. <https://eastersealscentralalabama.org/programs/senior-employment-program>

COA GATHERING

Join us for December's event:

HOLDING ON TO AUTHENTIC OFFICERSHIP

WHO RADM Kis Robertson Hale, DVM, MPH, DACVPM,
Deputy Assistant Administrator, USDA Food Safety
and Inspection Services, Office of Public Health
Science, and Chief Public Health Veterinarian

DATE Tuesday, December 7th, 2021

TIME 7:00 PM ET

REGISTER

<https://tinyurl.com/dec21coagathering>



"I was promoted to O-6. Now what?"

by CDR Katie Jacques, PT, DPT, OCS, CAHA and CDR Wanda Wilson-Egbe, DVM, MPH, Dipl. ACVPM

On July 1, 2021, Josef Otto was promoted to the rank of CAPT as an Exceptional Promotion Program candidate. CAPT Otto earned his Bachelor of Occupational Therapy at Ohio State University. He completed his Doctor of Occupational Therapy degree from Creighton University and then earned a Master of Business Administration (MBA) in Healthcare Management at Fayetteville State University in North Carolina. CAPT Otto joined the United States Public Health Service (USPHS) Commissioned Corps in 2009 and has a total of nineteen years of service which includes prior service with the Army and the Air Force. CAPT Otto decided to become a USPHS officer because of its mission.

CAPT Otto's prior seven years of service helped create a framework for his transition to the Corps. His first duty station was at the Womack Army Medical Center at Fort Bragg, NC. CAPT Otto worked as an Occupational Therapist (OT) in the Traumatic Brain Injury center. His mentor CAPT Henry McMillan educated him about the USPHS, Junior Officer Advisory Group, and the Therapist Professional Advisory Committee.

At Joint Base Lewis McChord (JBLM) in Tacoma, WA, CAPT Otto was assigned as the Assistant Chief of Staff at the National Center for Telehealth and Technology. His duties included supporting the development of mobile health apps and websites to improve healthcare for all uniform services.

CAPT Otto later moved onto the Gallup Indian Medical Center, where he practiced as the sole OT providing hand therapy services. After six months, CAPT Otto was promoted to Acting Chief of Rehabilitation. To improve therapy care for patients, he convinced leadership to increase staffing by five Physical Therapists and one Speech Language Pathologist.

Currently, CAPT Otto serves at the Centers of Medicare & Medicaid Services working for the Medicare Shared Savings Program as the Acting Division Director for the Division of Accountable Care Organization Finance and Data Analytics.

Since being promoted to O-6, CAPT Otto wants to be a mentor for others. CAPT Henry McMillan and CAPT John Figarola have been his mentors since the beginning of his career. CAPT Otto



CAPT Josef Otto, OTD, MBA

wants to pass knowledge down to junior officers. He wants to advise deployment teams, update promotion precepts, and be an advocate for those they serve.

CAPT Otto shared how it is crucial you know who you are and what you are good at. He advises officers to find opportunities that match their skills. Have a passion, he recommends, and understand how fortunate we are to wear the uniform. It comes with a lot of responsibility. Part of that is supporting COA because people making decisions wouldn't realize how important we are without an organization like COA there to highlight what we offer and what we will be called to do in the future.



Tips from Promoted Officers – A Summary from APAOC and DC COA Panel Discussion

by CDR Bic Nguyen PharmD, MPH, BCPS; CDR Quynh-Van Tran, PharmD, BCPP, RAC; CDR Trang Tran, PharmD, MBA, BCPS; LCDR Sophia Park, PharmD, BCACP, RAC; and LT Xia Michelle Lin, PhD, MSPH

On September 29, 2021, the Asian Pacific American Officers Committee (APAOC) and the District of Columbia Commissioned Officers Association (DC COA) held a joint panel discussion with PHS officers promoted during the 2020 and 2021 promotion cycles. The panelists were:

- CAPT Simleen Kaur (Food and Drug Administration (FDA), HSO)
- CAPT Melissa Laufenberg (ICE Health Service Corps (IHSC), Nurse)
- CDR Jonathan Boress (Indian Health Service (IHS), Pharmacy)
- CDR Kristina Melia (IHSC, Pharmacy)
- LCDR William Chang (FDA, Engineer)
- LCDR Michelle Hughes (Centers for Disease Control and Prevention, Scientist)
- LCDR Tiffany Pham (Administration for Children and Families, HSO)

During the discussion, the panelists shared their experiences on topics such as career progression, mentoring, awards, and other relevant topics related to the promotion process. Here are highlights of what they believed to be keys to their success.

General Comments

- Build strong working relationships with your supervisors/raters, especially with civilian supervisors who may not understand the importance of scores in the Commissioned Officers' Effectiveness Report. Understand what accomplishments supervisors expect to obtain scores of 6 and 7 for each precept. Set clear expectations early and communicate regularly.
- Demonstrate career progression through programmatic and geographic moves, or increased billet and responsibilities. Plan your move at least two years before your promotion cycle to allow time to establish yourself in your job.
- Consider at least one move to an agency that works with underserved and vulnerable populations such as the IHS,

Federal Bureau of Prisons, or IHSC as they are mission priority sites to meet career progression benchmark for all ranks.

Leadership roles

- Obtain leadership roles in committees by volunteering for projects in professional advisory committees. Volunteering will help you establish rapport within the committees and thus help you in being considered for future leadership roles.
- Consider authoring articles for newsletters as not only a CV booster but as a good way to get your name known.
- Talk with your supervisor and seek opportunities to utilize your skillsets and lead working groups or other projects. Ensure you see through to project completion to demonstrate accountability and reliability.
- Voting membership can play a significant role because it means that you have been recognized by your fellow officers as a capable leader. Consider starting out as an alternate voting member.

Mentorship

- Consider having mentors throughout your entire career, not just during promotion cycles.
- Take advantage of category or agency mentoring programs. You can have multiple mentors – think agency, category, senior officer, and even officers of the same rank.
- For junior officers, try the JOAG Peer to Peer Mentoring Program.
- Set a time to go over your promotion materials with your mentor(s) in detail. This may be critical in helping you locate areas for improvement.

Promotion documents

- Prepare promotion documents early and seek feedback from various senior officers both inside and outside the agency.
- Keep a spreadsheet throughout the year to record your accomplishments.
- Highlight all the key benchmarks for your promoting rank and remember to look at your entire career rather than just recent accomplishments.

- METRICS! Quantify accomplishments as much as possible to show impact.
- Reviewing Official Statement may be the most important document in your promotion packet because it is coming from your senior official. Focus on your agency work and the impact of your work on the public health and agency.
- Ask for letters of appreciation for any acting roles if you have done a good job.
- Be sure to upload into eOPF all supporting documents for everything that is on your CV.

Awards

- Advocate for awards. Seek opportunities to write awards for any special assignments, collateral duties, or volunteer work.
- Refer to the benchmarks for appropriate award(s) that need to be obtained for a certain rank. Think national level impact, which may mean that you wait a little bit before you can put together a write-up to try for a higher-level award.
- Include metrics in the award write-up to show impact.
- Have colleagues look at your draft award write-up before submitting it for review and clearance.

Special thanks to all the panelists and the planning committee members from APAOC and DC COA for making this panel discussion a great success with 128 officers in attendance. The event was led by LCDR Yvon Yeo and other planning committee members include CDR Quynh-Van Tran, CDR Trang Tran, CDR Bic Nguyen, CDR Ruiqing Pamboukian, LCDR Doan Singh, and LT Xia Michelle Lin. We hope these tips help our fellow officers put the best foot forward when submitting their next promotion packets.

Mission Critical: Rear Admiral Estella Jones Tapped to Help Fight COVID-19

by Sandra Sarr, MFA, Communications Coordinator, LSU School of Veterinary Medicine

Story reprinted with permission of LSU.

Most people believe going to veterinary school leads to a career caring for animals. Estella Jones, DVM, (LSU 1989), thought so too. Then, she embarked on what some would consider an unexpected career after graduating from the LSU School of Veterinary Medicine.

On Feb. 1, 2020, Dr. Jones, deputy director of the Office of Counterterrorism and Emerging Threats, was promoted to rear admiral just in time to perform a key role in combating COVID-19.

The daughter of hard-working parents with no college education and seven children, Jones is the first black woman veterinarian in the U.S. Public Health Service to achieve this rank, which is equivalent to the rank of brigadier general in other uniformed services. Fewer than 1 percent of all officers ever achieve the rank.

"I'm still pinching myself. I'm humbled and honored," she said.

Shortly after her promotion, the pandemic hit the United States and the nation went on lock-down. Jones was tapped by top public health officials to join the COVID-19 response team and tasked with establishing testing sites nationwide and training the people who staffed them.

"Working in the LSU Veterinary Teaching Hospital helped prepare me for what I do now. You had to be prepared for anything coming into the hospital. You couldn't let it show if you were upset or scared," she said.

Of 6,000 public health officers in the U.S. Public Health Service Commissioned Corps, only 77 are veterinarians. Jones is glad to see that changing. "I wasn't aware public health service was an option until my third year in vet school," she said.

The LSU SVM now offers public health as one of six tracks for its third- and fourth-year students. Tracks determine which electives and hospital rotations students take during their last 15 months of training.

Jones' hardworking parents instilled their work ethic in their daughter. Her father was a general's aid and handyman and her mother scrubbed floors and took in ironing so she could provide piano lessons for Jones. Born in California and raised in Ohio, she was sent to an all-girls boarding school in Troy, N.Y.

"They told me, 'If this is what you want, go after it.' They taught me I could achieve anything by working hard," said Jones, who earned her B.S. in animal and poultry sciences from Tuskegee University in 1982.

She moved to Louisiana to get married and gave birth to a daughter. After her daughter was born she got a job at a slaughterhouse collecting the livers of deceased animals for a clinical trial being conducted by John B. Malone Jr., DVM,



RADM Estella Jones, DVM

Ph.D., then professor of veterinary parasitology in the LSU SVM Department of Pathobiological Sciences.

"It was never my intention to work at a slaughterhouse, but I needed a job. I scored high on the state test. They offered me the slaughterhouse job in Plaquemine thinking I'd turn it down. They wanted the job to go to a guy," Jones said.

As training, they sent her to the slaughterhouse at Louisiana State Penitentiary at Angola.

"They threw me into that environment for two weeks. I walked into that prison, and I did my job. I was surrounded by armed guards, all men, standing on a catwalk above the slaughterhouse. They didn't intimidate me into quitting," Jones said.

Dr. Malone encouraged Jones to apply to the LSU SVM, which she did when her baby was 14 months old.

"I needed to keep working while going to school. I worked for the LSU Police as security at the entrance of the vet school," she said.

She first donned a uniform in the Airforce ROTC program. While at the LSU SVM, she applied for the Commissioned Office Student Training and Externship Program and went to the National Institutes of Health to do a five-week stint.

"You enter the program as a lower-ranking officer, work for several weeks, and return to school," she said.

During her externship, she told RADM Robert Whitney, then Acting Surgeon General of the United States and one of the first veterinarians to fill that role, that she wanted to work for the NIH. When she heard, "It's competitive. They only have one job," she

see **JONES** continued on page 14

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impact that he could have as an USPHS nurse. He also saw an opportunity to have more control of his career while continuing to serve his country. After an inter-service transfer, he was detailed to the Federal Bureau of Prisons.

CAPT Thomas has had several interesting and impactful positions since his time at Walter Reed. Since 2012, CAPT Thomas has served as the Southeast Regional Nurse Consultant for the Bureau of Prisons (BOP). In this role, he travels to BOP institutions where he reviews records of facility processes and procedures to ensure that the healthcare standards of care and clinical practice guidelines are followed to ensure the best patient care in the BOP. During the review, if he or the team identifies areas for improvement, they work with institution leadership to help the facility improve its processes and implement best practices. This work is critical to ensuring that healthcare best practices are followed uniformly across the BOP. In a normal year, CAPT Thomas may be on the road the equivalent of six months, but he says that he finds the work rewarding.

Most recently, CAPT Thomas felt the drive to get more knowledge regarding the process for bringing nursing ideas to the forefront through product development, marketing, and innovation. To address his interest, he was accepted into the first Johnson and Johnson Nurse Innovation Fellowship Program. Opened to all nurses in the country, 12 nurses were selected for the inaugural cohort.

One project under this fellowship involved a program known as the NurseHack4Health: COVID-19 Virtual Hackathon. In 2020, Johnson & Johnson, the Society of Nurse Scientists, Innovators, Entrepreneurs, & Leaders (SONSIEL), Microsoft, and dev up brought together nurses and other frontline health workers with developers, engineers, and tech enthusiasts to help find solutions to some of the most pressing COVID-19 challenges. Participants generated ideas for five focus areas chosen for their prominence in the COVID-19 pandemic. Teams were charged with creating



CAPT Tim Thomas, second from left, and other attendees at the first NurseHack4Health hackathon held as part of the Johnson and Johnson Nurse Innovation Fellowship Program.

minimally viable products (MVPS) that could be fast-tracked to development and trial in a healthcare setting. The “hackers” divided into 32 teams and pitched ideas that addressed clinical challenges and had the potential to transform healthcare.

COA: What is the most rewarding part of your job as the Southeast Regional Nurse Consultant for BOP?

CAPT Thomas: What I find most rewarding is the impact that I have on patients. I am privileged to spend time with patients reviewing their care plan and teaching them how to use the healthcare system to get the best care. I encourage my patients to take health care information back to their community, families, and friends to help them better engage in healthy living and find resources.

COA: What challenge(s) do you find in the prison health system that may reduce patient care?

CAPT Thomas: Staffing challenges; COVID affected every community, and our nurses and healthcare providers live in those communities and were also affected. Part of the work I accomplished during COVID was to lead the Health Professions branch of our Incident Command Structure, where I identified staffing resources and helped TDY



Captain Tim Thomas, MSN, RN, CCHP

healthcare professionals of all disciplines to facilities with greater need. This helped ensure that we maintained continuity of operations and care for our patient population throughout the pandemic.

COA: What changes were instituted during COVID?

CAPT Thomas: We had some operational challenges during COVID-19. For example, our patients are in close quarters which can increase the likelihood of transmitting an infectious disease.

see **THOMAS** continued on page 16

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replied, "That's great because I only need one job." Dr. Whitney hired her into the Commissioned Corps.

Jones began work in the Commissioned Corps in the early '90s, and she continues to rise through the ranks. As a leader in the COVID-19 national response team, from February to April 2020 she ensured the safety of testers and orchestrated testing logistics, coordinating her efforts with White House, Federal Emergency Management Agency, and Food and Drug Administration staff.

"I went on a Saturday and they wanted our officers to be in the field by Wednesday. I called my best people to be on my team. Some of them are still deployed. We remain in a state of emergency," she said.

She was uniquely qualified for the role. As deputy director of the Office of Counterterrorism and Emerging Threats, Office of the Chief Scientist, Office of the Commissioner, with top secret clearance, Jones has provided strategic and executive direction on programs that continually combat global health threats. She has safeguarded the development and availability of critical medical countermeasures to mitigate and respond to public health emergencies involving chemical, biological, radiological, nuclear, and emerging infectious disease threats, such as Ebola, Zika, and now COVID-19 viruses. Jones' leadership includes training

students and stakeholders at the nation's largest constructed biocontainment unit.

Under Admiral Brett Giroir, then assistant secretary of health at the U.S. Department of Health and Human Services (HHS), she was responsible for mapping out and launching COVID-19 testing sites in major cities throughout the U.S. She also procured supplies and recruited and trained nurses in testing and personal protection equipment protocol.

She participated in planning meetings with former federal officials, including Vice President Mike Pence, U.S. Secretary of Health and Human Services Alex Azar, and Admiral Brett Giroir, among others in the COVID-19 Incident Management Group and Agency Executive Group assisting HHS personnel.

She is known for serving on the front lines of medical countermeasures involving chemical, biological, radiological, nuclear, and emerging infectious disease threats, such as COVID-19, Ebola, pandemic influenza, SARS1, and Zika.

In addition to recruiting and sending professionals into Ebola virus hot zones in Africa, she also filled key roles in national emergency responses concerning the 9/11 terrorist attack and Hurricane Katrina. In 2017, she was appointed to the new Tick-Borne Disease Working Group created by Congress to improve federal coordination of efforts related to tick-borne diseases.

see **JONES** continued on page 18



Shannon James, Esq

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ADDRESSING THE UNIQUE NEEDS OF COMMISSIONED CORPS OFFICERS

Spiritual Wellness

by LCDR Katrina Redman, MT, SPOC, MDiv, Chaplain(BGCT)

Community and Sharing

Since 2004, the Surgeon General of the United States has declared Thanksgiving Day as the National Family History Day. While families and loved ones gather together in community, they are encouraged to learn and document their family health histories. This is an important component of routine medical care, and it is critically important for ensuring a longer and healthier future together.

This activity perfectly represents the Thanksgiving season. Many of us come together on Thanksgiving Day to celebrate the blessings of the year by sharing with a meal and spending time with our families and our communities (and watching football!) Sharing our medical histories at least 3 generations back is what is recommended by the National Institute of Health. Conditions to note range from diabetes to cancer to glaucoma and heart disease.

One consideration that is often overlooked on Thanksgiving Day, however, is that all communities do not view this day as a celebration. Many Native Americans mark this day with great sadness and loss. The first Thanksgiving Day was held with the hope that a mutually beneficial alliance would be formed which would offer safety and provide resources for both communities. This hope faded as things changed over the years in a negative way for many Native American people. This hurt is still felt today, particularly on Thanksgiving Day.

Whether Thanksgiving Day is a day of celebration for you or a day of remembrance and loss, there is something valuable that can be gained on this day. Coming together as a family or a community to review our health history and write it down for future generations, is a way to ensure that the generations after ours are preserved. They are our legacy and the ones who carry us along with them in their very DNA.

May we all practice good health by remembering our families and communities past, present, and future.



Education: Wampanoag

Wampanoag means The People of the First Light. They taught the pilgrims how to cultivate the land, and about 90 Wampanoag native peoples celebrated the fall harvest of 1621 with the Pilgrims of Plymouth, Massachusetts. The celebration lasted 3 days.

Spiritual Exercises

1. Research the National Family History Day at <http://www.cdc.gov/Features/FamilyHealthHistory>
2. Learn more about the Wampanoag native peoples <https://www.britannica.com/topic/Wampanoag>
3. Seek to understand more about the spiritual value of being in community and sharing with others.
4. Meditate on the courage of our ancestors.

Questions or comments? Contact me at khredman@hotmail.com.

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Finding space to institute quarantine was sometime difficult. Also, because some of our patients were in quarantine or isolation they couldn't come to the clinic for services. We had to change our operational approach and bring the clinic to them on their housing units. The healthcare staff had to come up with innovative ideas to mitigate disease spread as well as continue to provide high-quality care to our patients. We developed a new process for tracking patients, instituted hand washing stations, increased patient access to soap, improved surface cleaning protocols (including door keys) and instituted regular checks for temperature. We worked extensively with the CDC to collaborate on standards for correctional environments and integrated the CDC guidance for correctional environments from the beginning of the pandemic. It worked well.

COA: Would you tell us how you got involved in NurseHack4Health?

CAPT Thomas: I got involved with NurseHack4Health through the J&J nurse innovation fellowship. Our group met in New Brunswick, NJ and participated in an intense weekend aimed to solve a problem in health care. During this meeting, we came up with many innovative solutions to help resolve everyday challenges.

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play once. The card would allow you to skip ahead to the end of the game and put you in a strong position to win. However, you could only use the card under certain conditions, and everyone on your team would have to agree when to use the card.

Budget reconciliation is that card. In the traditional game, once you move on to the Senate level, you need the support of at least 60 out of the 100 players (Senators) to pass your bill and win the game. However, playing the budget reconciliation card allows you to win the game by only getting 50 players on your side.

Initially, budget reconciliation was created to resolve stalemates in the passage of budget bills. Now, it's used to pass varying types of legislation. This can be applied so long as you justify your legislation as budget-related: items that change spending or revenue. What qualifies as budget-related or not is determined by the game's instruction manual, called the Byrd Rule. A person not participating in the game serves as a referee to determine what qualifies and what doesn't. This person is designated the Parliamentarian. If your team of 50 agrees on the bill, then you get to play a bonus round at the end called a Vote-A-Rama, where players add to the bill until everyone is too tired and needs to go to bed. The game is over and the bill is presumably passed into law.

For example, one of the most creative ideas was a wearable, illuminated night light that nurses could wear during their nightly rounds that would eliminate the need to turn on the overhead lights and awaken sleeping patients.

COA: What advice would you give other officers to support career development and advancement?

CAPT Thomas: Find a mentor that is willing, invested, and able to work with you to see you succeed. Someone who will advocate for you and help you develop. Rear Admiral Michelle E. Dunwoody, MS, APRN, BSN, WHNP-BC, Assistant Surgeon General, United States Public Health Service (Ret.) and Captain Maude Lyons (Ret.) MSN, RN-BC were that for me and they remain the best mentors that I ever had. I will always deeply appreciate their support.

COA: Are there any departing thoughts you would like to share with COA and its members?

CAPT Thomas: Thanks to COA for all things you do to support the USPHS CC officers. Most recently, thank you for your advocacy regarding the most recent implementation of form DD214, Report of Separation.

Opinions expressed in this article are those of the author and do not necessarily represent the opinions of the Federal Bureau of Prisons or the Department of Justice.

This process has been used to pass healthcare reforms in 2010, tax cuts in 2017, as well as an attempt to repeal the Affordable Care Act. Now, it is being used to enact President Biden's domestic policy agenda.

Because of the aforementioned political environment, the fates of the current \$3.5 trillion Build Back Better reconciliation bill and the \$1.2 trillion infrastructure remain linked. At the time of this writing, the players on the Democrat team still need to convince a few of their own to support the bill to get to that magic number of 50. In order to get there, proposed spending will likely be cut by trillions of dollars in order to appease the more moderate players.

Trillions of dollars and thousands of pages of legislation. The sheer volume associated with the legislative process can be intimidating for anyone looking to participate or even understand this complex game. In this space, we hope to continue to demystify some of the rules and demonstrate the impact on our nation's public health. We will revisit these massive bills when/if the dust settles to analyze the final contents for you.

This is a complex game, but we need more people like you to engage, participate, and play to win.



LT Melina Rodriguez Upton

Junior Officer Spotlight

LT Melina Rodriguez Upton, PT, DPT, OCS

Physical Therapist at the Phoenix Indian Medical Center

LT Melina Rodriguez Upton is the Acting Deputy Chief and clinical mentor for the Physical Therapy Department at the Phoenix Indian Medical Center (PIMC) in Arizona. She has held the position for the past three years. LT Rodriguez Upton is the clinical lead at PIMC for both pelvic health and dry needle therapy. She is the current Medical Staff President for over 200 healthcare providers at PIMC and has, for the past year and a half, been implementing and updating virtual platforms to assist colleagues with maintaining their continuing medical education during the COVID-19 pandemic. She achieved the APTA Board Certification of Orthopedic Clinical Specialist in July 2021. In September 2021, LT Rodriguez Upton was selected to become the new Clinical Director of Physical Therapy at the Salt River Clinic in Arizona.



The CFC is a great way for USPHS Commissioned Officers to support causes near and dear to our hearts. We can donate to the CFC, via the CFC Giving webpage, (<https://cfcgiving.opm.gov/welcome>) through January 15, 2022.

Using CFC code 42884, please pledge a donation to the PHS Commissioned Officers Foundation for the Advancement of Public Health.

Why? Because the PHS Commissioned Officers Foundation has stepped up our programs to “advance public health for a healthier nation.” Our PHS Commissioned Officers Foundation (COF) is committed to the advancement of public health & the development of public health Leaders. Our PHS COF supports:

- **BARCLAY-GIEL SEED GRANTS:** We provide over \$100,000 each year to fund public health grants in communities around the country.
- **USPHS SCIENTIFIC & TRAINING SYMPOSIUM:** The annual conference continues to offer free continuing education credits and many opportunities to network with fellow PHS officers while learning about advances in the field of public health.

- **JOAG/COF KOOP SPEAKER SERIES:** We work closely with JOAG officers to host a series of talks with researchers and community-based organizations regarding a range of public health topics.
- **RADM MISHOE ‘BELIEVE’ DIVERSITY SCHOLARSHIPS:** COF provides grants to high school seniors pursuing health sciences and public health collegiate studies.
- **FAMILY MEMBER SCHOLARSHIPS:** Scholarships for family members of COA members.
- **RADM MICHAEL FELLOWSHIP:** Scholarships for junior officers serving in the USPHS Commissioned Corps.
- **PHS & COA LOCAL BRANCH REQUESTS:** COF provides grants for a range of Local Branch programs like golf tournament or run/walk fundraisers to health education events.

Please remember CFC code 42884 on the CFC Webpage:

<https://cfcgiving.opm.gov/welcome>

Include 42884 in your pledges. Your generous donation will support COF to advance public health for a healthier nation.

EXECUTIVE DIRECTOR from page 1

and I am excited to let you know that several Ready Reserve officers have joined the COA family.

The purpose of the Ready Reserve Corps is to provide trained and ready personnel to fill critical public health needs by supporting capacity responding to regional, national, and global health emergencies and to improve access to health services; preserve care positions by maintaining a surge capacity of health professionals available for deployment without jeopardizing the service of clinicians in hard-to-fill roles; create an opportunity to serve for clinical and public health professionals who cannot commit to a full-time active duty position in the Corps; and enable access to highly specialized skill sets that would be impractical in full-time active duty positions.

The Ready Reserve officers who are now members of COA joined the only association who, since 1951, exists solely to protect the interests of the USPHS Commissioned Corps and its officers. We are happy to have them on board! For now, they can join COA in the “other category” for \$55/year (waived during the first year of commissioning). These new members are in good company, surrounded and welcomed by active duty, former, and retired Commissioned Corps officers who see the value, mutual respect, and complimentary relationship that reserve officers have in other branches of our uniformed services.

We want them to be more than just “members” though. Just like COA active duty and retired officers, they need a voice on our Board of Directors. But non-profit associations are governed by bylaws, a set of rules established by our membership to regulate itself, so that decision will be up to our members. COA’s bylaws require a two-thirds majority of those voting to agree to bylaws changes proposed by your elected leaders, the Board of Directors. The vote to modify COA’s bylaws, open through February 15, 2022, we ask you to vote yea or nay for the addition of a Ready Reserve officer on the Board of Directors.

Other bylaws changes include:

- A revised statement of non-discrimination to include disability (from handicap), ethnicity, religion, or belief (from creed), orientation, and gender identity.
- Updated language to include the Ready Reserve vs. Inactive Reserve.

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Reflecting on her current role, she said, “The COVID-19 pandemic was totally preventable. Our job as public health veterinarians is to stop disease at the epidemic stage. We know that 70 percent of infectious disease is zoonotic, passed from animals to humans. Our goal is to be able to stop an epidemic from becoming a pandemic.”

Jones also practices veterinary medicine at Blue Ridge Veterinary Associates in Virginia.

- Further clarification of no further national dues assessment for Life Members (Local Branch dues still apply).
- Revised Honorary Membership to include current and former Assistant Secretaries of Health.
- Revised expulsion language, to include no eligibility for a dues refund.
- Clarified language that Local Branches may allow a representative from a branch to attend a meeting of the Board of Directors of the Association only with prior notice.
- Revised Field Representative language to define geographic areas of exclusion.
- Added two representatives for the Ready Reserve on the Board of Directors should the Ready Reserve Corps grow to over 2,500 members. The members must be elected on alternate years and be from different categories.
- Added methods for replacing a member of the Board of Directors should a director be unable to fulfill their elected term.
- Added new section for change in constituency of a board member.
- Revised Executive Committee officer language, limiting Chair and Chair-Elect to only active duty and retired officers.
- Revised the duties of the Board of Directors to provide oversight (from direct control) of the business management and strategic vision of the Association (removed employees which are managed by the Executive Director).
- Revised language regarding the policy of resignation from a position on the Board of Directors.

I ask that you visit www.surveymonkey.com/r/KH3XZHN by February 15, 2022, to cast your vote. Another option is scanning the QR code below. Otherwise, you can cast your vote by mail by sending a letter to COA, P.O. Box 189, Cheltenham, MD 20623. Make sure to include your full name, mailing address, member number, and yea or nay vote.

Until next time!

Jacque



“It reminds me of why I became a veterinarian,” said Jones, who chairs the Animal Care and Use Committee out of the U.S. Army Medical Research Institute of Infectious Diseases Biosafe Level 4 Facility headed by Anthony Fauci, director of the National Institute of Allergy and Infectious Diseases and a retired rear admiral, and she is also co-chair of the Food and Drug Administration’s Animal Welfare Council.

“We know there’s always going to be a new emergent disease. It’s not if but when. There is a place for veterinarians in saving the lives of humans and animals,” she said.

PHS Commissioned Officers Foundation

Donations Received, October 1, 2021 to October 31, 2021

President's Society (\$5,000)

CAPT Susanne Caviness * (in memory of husband Edward Lee Bruns)

Gold (\$500)

Mr. John DiMaggio
RADM Kenneth Moritsugu
LCDR Robert Schafermeyer

Silver (\$250)

CAPT Tommy Mosely (in memory of RADM John Villforth)
RADM Dawn Wyllie

Bronze (\$100)

CAPT Robert Taylor *

Friends (Under \$100)

CAPT Mark Anderson
Dr. Maria Benke ^
Mrs. Carol Dellapenna
Mr. Stephen Deming
CAPT Peter Putnam

^ C. Everett Koop Living Legacy
* Mishoe Believe Scholarship
All other donations were made to the COF General Fund

We Welcome New Members of COA, October 1- 31, 2021

LT Pamela Agaba
Dr. Stanley B. Burns
Ms. Carol Clahane
LT Peter DeJonge
LT Chiazor Eziakor
CAPT Aaron Fleischauer
LT Byron Garrety
LTJG Adam Gilbertson

CAPT Renmeet (Rimmy) Grewal
LT Carmen Hernandez Ware
LTJG Melissa Jeannot
LCDR Margaret Kemp
LT James Marsh
CDR Javier Muniz
LCDR Craig Noteboom
LT Johnny Nwankwo

Mrs. Esohe Osaghae
LCDR Daniel Plaisted
Ms. Alicia Reitz
LCDR Darin Smith
LCDR Rhondie Tait
LCDR Mary Vance
LT Marlise Williams
LT Nash Witten

COA Donations

Commissioned Officers Association of the USPHS Donations Received, October 1-31, 2021

CAPT Gordon Aird

CAPT Lawrence Fox
RADM Walter Orenstein

CAPT James Reagan

BOARD from page 6

The man replied, "The nature of the snake is to bite, but that's not going to change my nature, which is to help."

There will likely be a constant barrage of incidents, accidents, and life happenings that will seek to change our nature; some intentional and some not. Don't let them. Constantly seek to fight against it; surround yourself with whatever you need to maintain your good-natured self, e.g., your spouse, significant other, family, friends, nature, worship, time away, respectable literature, or a vacation. Maintain those relationships that will keep you healthy.

It's my hope that we as commissioned officers are constantly striving to be our best selves, intentionally improving ourselves for the betterment of our lives, family, community, Corps, and country.

"The relationship made the difference." Be the positive difference in the relationship. Cause the rabbit effect.

In Officio Salutis. Fair winds.

1. Robert M Nerem, Murina J Levesque, and J Frederick Cornhill, "Social Environment as a Factor in Diet-Induce Atherosclerosis," Science, vol. 208, no. 4451 (June 27, 1980), 1475-76.

2. Kelli Harding, The Rabbit Effect (2019), xxiii-xxiv.

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