

Romano Receives Lifetime Achievement Award



RDML Carol Romano receives the AMSUS Lifetime Achievement Award. Pictured L to R: Lt Gen Robert Miller, Air Force and Space Force Surgeon General; Dr. Jonathan Woodson, President, Uniformed Services University School of Medicine; RDML Carol Romano; Hon. Shereef Elnahal, Under Secretary of Health, Dept. of Veterans Affairs; BG John Cho, AMSUS Executive Director.

Five members of the Commissioned Officers Association of the USPHS (COA) were honored by AMSUS, the Society of Federal Health Professionals, at their annual meeting in National Harbor, Maryland in February. These awards recognize stellar achievements in a range of topics including leadership, training and education, and clinical excellence.

Lifetime Achievement Award

COA Life Member RDML Carol Romano, Dean and Professor at the Daniel K. Inouye Graduate School of Nursing at the Uniformed Services University (USU), received the Lifetime Achievement Award.

The Lifetime Achievement Award marks a distinguished career of consistent excellence and is given to honor an individual who has made significant fundamental contributions to federal health care, either through a single transcendent act or a body of work. Romano developed the first graduate program in Nursing Informatics at the University of Maryland and served as the chief nurse officer for the U.S. Public Health Service Commissioned Corps. During her 40-year career as a health care leader, Romano created models for development and translation of data to

see **AWARDS** continued on page 10

from the
Executive
Director



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

COA and the Defense Health Agency

It's been a busy few months for COA in terms of our engagement with TRICARE and the Defense Health Agency (DHA). Last November, I met with DHA's Director, Lieutenant General Ronald Place and Deputy Director, Dr. Michael Malanoski to discuss the independent pharmacy discontinuation issue as well as mental health care access challenges and the dental plan conversion. In December, COA's Deputy Director and I met with a large TRICARE team, including Chief Executive, TRICARE Health Plan, Dr. Ken Yale and Deputy Assistant Secretary for Healthcare Operations, Ms. Regina Julian, to further discuss the mental health access challenges. Their team wrote an article for our January/February Frontline (page 26) on options for accessing mental health care remotely, which we hope you found helpful.

In February, I read concerns on social media that USPHS Commissioned Corps officers were not given the same consideration of vision correction surgery at military treatment facilities (MTFs) that are afforded to members of the Department of Defense. I immediately made an inquiry to

see **EXECUTIVE DIRECTOR** on page 22

COA Member Benefits

Capitol Hill Representation

Efforts on Capitol Hill continually support all Commissioned Corps officers – active, former, reserve, 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 of COA and the USPHS Commissioned Corps

Ribbon

Authorized to be worn on the USPHS 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, and MHA

NYMC Online MPH

50 percent discount for the online MPH and certificate programs

Scholarship Programs

College scholarships for children, grandchildren, and spouses of COA members and high school seniors

The Ohio State University

In-state tuition for graduate nursing and certification programs

CPH Exam Discount

Deep member discount and free study guide for Certified in Public Health (CPH) Exam



Legislative Update Understanding The Politics

by LCDR Christopher Mendoza-Truong,
Pharm.D., USPHS

Chair, Legislative Affairs Committee

Power, when used in terms of legislative affairs, is the power to persuade. Therefore, we can then say that power and persuasion are synonymous. The ability to persuade, to convince other political actors that certain interests are their own, defines political power and is the key to achieve advocacy goals. Power is about bargaining and negotiating; about brokering deals and trading promises.

Now that COA's 2023 Advocacy Goals have been approved (January/February Frontline), page 2, it is important to understand the political layout of the 118th Session of the United States Congress to comprehend the challenges we face toward our fight for parity. Currently, we are in the 118th Session of the United States Congress, composed of the United States Senate and United States House of Representatives. Convened on January 3rd, 2023, it will continue until January 3rd, 2025. In the 2022 midterm elections, the Republicans won control of the House for the first time since the 115th Congress. This marks the first split in congress since the 116th Congress, and the first Republican House-Democratic Senate split since the 113th Congress.

I give this overview because due to this split, advocating for legislative changes becomes more difficult; however, it will not deter us from advancing COA's mission. Much of our advocacy is with the United States Senate Committee on Health,

Education, Labor, and Pensions (HELP). It was chaired during the last congressional session by Senator Patty Murray (D-WA) and Ranking Member Senator Richard Burr (R-NC), and is now chaired by Senator Bernie Sanders (I-VT) and Ranking Member Senator Bill Cassidy (R-LA).

Additionally, COA's advocacy efforts are not entirely legislative. As a member of The Military Coalition (TMC), COA works alongside the TMC to further our mutual goals. COA also sits on most committees within the TMC (Personnel, Healthcare, Guard & Reserve, Retired, Survivors, and Veterans) and COA has a great working relationship with committee members and leaders. Lastly, the goals that were voted on were, by no means, a comprehensive list of COA's advocacy efforts. We are still fighting for things such as baggage fees, taxes, and state veteran status.

We must be cognizant of the fact that not all our goals will be achieved. COA, despite the challenges and obstacles that may arise, and our allies remain committed to the fight for parity, using our skills, expertise, and resources to make a real difference in the legislative process. By staying engaged, informed, and motivated, we can continue to work towards a brighter future for all officers of the USPHS, one where our shared values and aspirations are reflected in the laws and policies that govern our daily lives. So let us stay committed and energized in our efforts, knowing that, together, we can make a meaningful impact on the issues that matter most to us.



COA Elects New Directors

The Commissioned Officers Association (COA) is pleased to announce the newly elected members of COA's Board of Directors. All directors will serve a three-year term beginning July 1, 2023. The Retired Officer representative, CAPT Terry Hoffeld, will also serve a three-year term on the PHS Commissioned Officers Foundation for the Advancement of Public Health.



DIETITIAN REPRESENTATIVE

LCDR Jenna Cope is a Senior Public Health Analyst in the Office for the Advancement of Telehealth at Health Resources and Services Administration (HRSA) at the U.S. Department of Health and Human Services. At HRSA, she is a Program Coordinator for the Telehealth Broadband Pilot Program and a

Project Officer with the Evidence-Based Telehealth Network Program. She joined HRSA in September 2020 after spending over three years as a Public Health Nutritionist and Registered Dietitian with Indian Health Service at Northern Navajo Medical Center in Shiprock, New Mexico. She also was detailed for over six months to Navajo Nation as a Public Information Officer on the Shiprock Service Unit COVID-19 Incident Command Team and deployed three times in 2021 to support the COVID-19 and unaccompanied children responses.



FIELD REPRESENTATIVE

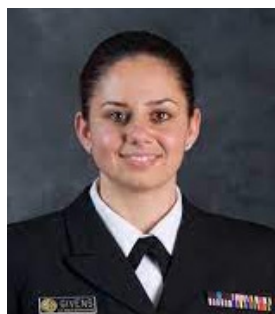
LCDR Forche began her career with the USPHS at the U.S. Food & Drug Administration (FDA) in Silver Spring, Maryland, where she worked on longitudinal tobacco research and contributed to regulatory science in the Center for Tobacco Products. In 2019, LCDR Forche PCS'd to Dallas, Texas, where she currently serves at

Federal Occupational Health (FOH), conducting and overseeing environmental, occupational health, and safety assessments and trainings for more than 20 federal agencies nationwide. As an Environmental Health Officer, LCDR Forche has deployed in response to Hurricanes Harvey, Florence, and Fiona; the United Nations General Assembly; COVID-19; and Remote Area Medical missions. LCDR Forche enjoys being active with her local COA Branch. She served as the Greater Texas COA's President from 2021-2022 and as Secretary from 2019-2021, and she currently serves as both the Immediate Past President and Chair of the Newsletter Committee for the 2022-2023 Operational Year.

NURSE REPRESENTATIVE

CDR Alyssa Givens has served as a track team lead and track presentation mediator for the COA Abstract Committee and

was selected to assist on USPHS Symposium Nurse Category Day Planning Committee. She recently became a general



member of the Communications and Public Relations Committee. Prior to serving on the National COA Committees, CDR Givens held several positions including secretary, education committee member, promotion ceremony honor guard and lead of the Officer Development Workgroup across 3 local COA branches (Fort Worth, Aurora Borealis and Heart of America).

During CDR Givens' USPHS career, she has held five positions and served within three agencies, spanning five geographic moves. Currently assigned to the U.S. Marshals Service, she has held the position of Aeromedical Branch Chief providing medical oversight of prisoner transportation and Utilization Review Coordinator responsible for care management of prisoners within USMS custody.



RETIRED OFFICER REPRESENTATIVE

CAPT Terry Hoffeld was commissioned as a USPHS Dental Officer (Scientist) at the National Institute of Dental Research, NIH. He earned his D.D.S. degree at the Ohio State University and his Ph.D. (Microbiology/Immunology) at the University of Rochester.

He conducted laboratory and clinical studies of reactive oxygen species (ROS) in controlling immune responses. He co-founded and chaired an NIH-wide monthly ROS forum and coordinated the research component of a new Oral Medicine Fellowship Program. He volunteered for an emergency detail to the NIH Division of Research Grants (DRG; now Center for Scientific Review, CSR). He found the process of selecting the members and overseeing the conduct of those federal advisory committees academically stimulating and stayed at DRG and was selected as a LEGIS Fellow, serving a half-year as a legislative assistant in a U.S. Senate Office. Following a brief return to NIH, he was appointed as Director of the Office of Scientific Review at the new Agency for Healthcare Policy and Research (now AHRQ). After five years at AHCPH, he missed the stimulation of the many scientific disciplines at NIH, so when he was invited to return to CSR, he did so. While on active duty for thirty years, he served on a series of local COA committees culminating in two consecutive terms as President of the DC Area COA Branch Board of Directors.

We also congratulate re-elected members for the HSO, Physician, and Therapist categories, CDR Neelam Ghiya, LCDR Melissa Reyes, and CDR Katie Jacques.

CALL FOR APPLICATIONS

2023 FAMILY MEMBER SCHOLARSHIPS

HISTORY

The PHS Commissioned Officers Foundation for the Advancement of Public Health (COF) offers a scholarship program available to high school, undergraduate, and graduate students sponsored by a current Commissioned Officers Association (COA) member. The scholarships are funded by active duty and retired U.S. Public Health Service members, Local Branches of the COA and others.

ELIGIBILITY

- Biological, step, adopted children/grandchildren and spouses of current COA members
- High school senior, undergraduate, or graduate student with applicable school transcripts
- Personal statement describing academic/career goals related to public health
- Extracurricular involvement and community service
- Two letters of recommendation

DEADLINE

The application period will be **March 13, 2023 - May 5, 2023**.
The recipients of the scholarship will be announced in June 2023.

APPLY

Find more information at:

<https://www.phscof.org/scholarships/family-member-scholarships/>



DC COA is Running for the Health of It

by LT Jazmin Reed, PhD, MPH

Regular physical activity, such as running, can help to reduce your risk of disease. As a result, several DC. COA members across six agencies led 14 Public Health Service Athletics events this past year, two of which were in-person. Officers brought awareness to the following 10 health issues, disparities, or initiatives:

- Seasonal Affective Disorder/Winter Blues (LDCR Santhana Webb, LTs Tessa Fletcher and Nikia Jones-Shaw);
- American Heart Month (LT Samora Casimir);
- National Organ Donor Day (LCDR Shercoda Smaw);
- National Nutrition Month (LCDR Tara Lemons);
- Diabetes Alert Day (LTs Ying Lin and Johanna Paillet-Growl);
- Environmental Health (LCDR Santhana Webb);
- Mental Health and Wellness (LCDR Shercoda Smaw);
- Skin Cancer & Melanoma Awareness Month (LT Edward Taylor);
- Breast Cancer Awareness Month (LCDR Angelina Williams and LT Samora Casimir) and;
- Transthyretin Amyloid Cardiomyopathy awareness (CAPT Latonia Ford and LCDR Yvette Macklin).

Local officers' decisions to lead and participate in the runs (in the DC-metro area or virtually) were for one of several reasons - they had a personal connection with the cause, to highlight a health disparity, to build community with fellow officers, to help minimize stress from home and work, or to stay fit and healthy. And, then there are others who actually think running is fun!

LTs Tessa Fletcher and Nikia Jones-Shaw co-led a virtual 5K run/10K walk event in November to bring awareness to Seasonal Affective Disorder (SAD).



(Left to right) CAPT Latonia Ford, CAPT Kimberly Rains, LCDR Yvette Macklin, and LCDR Alesha Harris.

"Winter can be a lonely time of year due to the long, dark days that it brings. The good news is that treatment is available. By bringing this to the attention of those affected and their families, more awareness and support can be offered to them. We had participants from 12 different locations and encouraged everyone to recognize a treatment option of light therapy (phototherapy) to improve symptoms," said LT Fletcher.

CAPT Latonia Ford and LCDR Yvette Macklin co-led both an in-person and a virtual event that brought awareness to a relatively unknown disease - Transthyretin Amyloid Cardiomyopathy (ATTR-CM) and its associated health disparities. The in-person event included health information booths, a warm-up, sharing of personal stories, a 15-minute informational session, and a run.

"ATTR-CM is an underdiagnosed and misdiagnosed, potentially fatal cardiovascular disease, especially affecting African American Communities. We wanted to bring awareness about this disease in hope to save and/or expand the quality of life for all people," said CAPT Ford.

LCDR Angelina Williams and LT Samora Casimir co-led the virtual Breast Cancer Awareness 5K in October. The prevalence of breast cancer is something many are aware of and may even know someone impacted by the disease. However, raising awareness of the existing health disparity was personally motivating for these officers.

LT Casimir said, "Black women are still 40% more likely to die from breast cancer than white women across the U.S., even though black women have a lower breast cancer incidence rate."

"I was motivated to lead this event because I have two family members that were diagnosed with this disease. Also, as a veterinarian, I have been involved in animal research studies aimed at finding cures for breast cancer. Lastly, this disease disproportionately affects African American women and I wanted to run for them in solidarity," said LCDR Williams.

Local officers continue to raise awareness of health issues and their disparities while promoting healthy living through exercise. Join us as we run for the health of it in 2023 and beyond!



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CAPT Robert Windom (Left) aboard the USNS Comfort (T-AH-20) with partner military representatives from Canada, Dominican Republic, Honduras, Brazil, and Ecuador.

by CAPT Robert A. Windom

In the hours following the September 11th attacks, there were calls for military volunteers to roster for the USNS Comfort (T-AH-20). The initial request was for 800+ sailors to staff the hospital ship bound for New York harbor. I was a relatively young Navy Lieutenant stationed at Naval Submarine Base, Groton, CT. I immediately volunteered and was “ready to roll” along with a large contingent of Hospital Corpsmen. Additional guidance clarified the ship would be used to provide meals and lodging for first responders at ground zero, and full medical staffing was not needed, reducing the staffing number and leaving me off the roster.

Years later, I attended a Navy training in Bethesda, MD, that included a tour of the massive United States Naval Ship (USNS) Comfort. This was my first up close encounter of the ship. I was in awe of the floating surgical platform, and the visit increased my desire to serve onboard one day. In 2009, a year after transitioning to the U.S. Public Health Service (USPHS), I was selected by Commissioned Corps headquarters from hundreds of officers for a leadership role on the Comfort. At last, my time to sail was near. A few days after receiving this news about this opportunity, I received a devastating blow. My agency reversed their decision and denied my approval. My dream was crushed.

Fast forward to 2020 - I accepted an assignment as the Administration for Strategic Preparedness and Response (ASPR) Liaison to USSOUTHCOM. I was excited that this position had a direct link to the Continuing Promise mission that the Comfort served. The COVID Pandemic postponed 2020 and 2021 planning, but news came that Continuing Promise 2022 (CP-22) was on schedule. I joined the planning calls and gathered mission events information. I was hopeful that USPHS could support as in previous Continuing Promise missions, but many challenges surfaced that could not be

overcome in the shortened planning timeline. As the realization set in that USPHS would not be included in CP-22, I learned of a vacant position on the Comfort that SOUTHCOM could not fill. My attention then shifted to volunteer for this vacancy; represent USPHS, increase our visibility, and communicate our capability to support future health engagements.

It wasn't easy securing the SOUTHCOM position onboard the Comfort, but the stars (and nautical star) aligned. During CP-22, I served as an extension of SOUTHCOM Public Private Cooperation branch providing critical leadership, communication, and logistical support in collaboration with non-governmental organizations (NGOs) and partner nation (PN) colleagues on and off ship. I also assisted the Embassies with securing interpreters. NGOs filled important gaps and expanded capacity and capability for medical outreach. PN colleagues and interpreters expanded the international scope and provided a richer, international collaboration. I directly supported over 80 NGOs embarked on the ship, as well as 17 partner military representatives from eight countries. I served as the focal point, addressing multiple needs and concerns of these groups throughout the mission. My reach and influence quickly extended beyond my primary role, assisting many active-duty personnel, including military medical students and residents. As a senior officer, my leadership support became integral to the CP-22 execution and success.

CP-22 ports included Guatemala, Honduras, Colombia, Dominican Republic, and Haiti. At each port, Navy-led medical teams worked alongside PN medical personnel to provide care onboard and at land-based medical sites to strengthen partnerships, increase readiness, and enhance the combined capabilities to respond to public health disasters and humanitarian crises. The mission also enhanced collaboration between USPHS, ASPR and USSOUTHCOM.

see **PROMISE** continued on page 14

CALL FOR APPLICATIONS: JUNIOR OFFICERS 2023 RADM JERROLD MICHAEL FELLOWSHIP

HISTORY

The PHS Commissioned Officers Foundation (COF) established the RADM Michael Fellowship to honor the late Rear Admiral Jerrold M. Michael, an engineer officer who was a lifelong advocate for improved public health education. His devotion to the U.S. Public Health Service Commissioned Corps and academia is legendary. RADM Michael was Dean of the University of Hawaii (UH) School of Public Health from 1972 to 1992. He continued as Professor of Public Health until 1995. He later served as Professor Emeritus at UH and as an Adjunct Professor of Global Health at the Milken Institute of Public Health, George Washington University.



ELIGIBILITY

- USPHS Commissioned Corps at the rank of 01-04
- Current dues-paying Commissioned Officers Association (COA) member
- Applied/accepted as a non-degree U of MD School of Public Health student
- Able to begin coursework in August 2023 and complete in 12 months

DEADLINE

The application period will be **March 20, 2023 - May 15, 2023**.
The recipient(s) of the fellowship will be announced in June 2023.

APPLY

Find more information at:

PHSCOF.ORG/SCHOLARSHIPS/RADM-MICHAEL-FELLOWSHIP





Connecting the Dots

by RDML Randall Gardner (Ret),
President, COF Board of Trustees

Time flies! It seems like it was yesterday we were absorbed with the news of the COVID-19 pandemic spreading across the world at an alarming rate with the certainty that only history reveals. I daydreamed about the number of times I emphasized to my fellow Commissioned Corps officers that we must diligently train for enormous public health threats like this one. Now, several years beyond the uniform, I pondered where I may have landed and how I could have contributed to beating the pandemic in uniform. I truly thank all the responders and those of you that backfilled and supported their efforts. Enough of this and hopefully the rest of what I have to say will hold your attention.

Flash forward to today! There are more former and retired USPHS officers than there are on active duty. Also, if we add all of our public and civilian supporters, we have a force that is clearly underestimated and underutilized. As I get closer to the 56th Annual COF Scientific and Training Symposium, I wonder if we can make a game-changing play to increase the visibility of the Commissioned Corps as a leading force in public health in the future. I am aware that many of you have generously donated to the new

USPHS PBS Documentary "Invisible Corps: In Officio Salutis." I will be seeing the premier of the documentary when you all do – during the symposium on May 9th. I do not know exactly what footage and information will be in the final cut but what I do know is that if we never try, we are not likely to succeed in educating the world about the USPHS. Since the majority of the readers have experience and/or connections in public health, it is now time for you to help arm COF with the support we need to direct the conversations about the Commissioned Corps. No matter which category or career you represent, our collective story needs to be told. Some of you are working in public health academia, policy, and communications with extended networks while others are personally connected influencers and we need your assistance. As I read the opinion of a public health expert on the outlook of the Center for Disease Control and Prevention (CDC), it was clear to me there needs to be a resurgence of the USPHS. I am interested in what your thoughts are on all of this.

For those of you that may not be aware, the Public Health Service Operating

Divisions of the Department of Health and Human Services (DHHS) were once organized and coordinated under the organizational structure of the USPHS. As we continue to traverse the changing future of the work environment where our mobility and technology stretch our physical and virtual presence, the threat most apparent to me is the ability to communicate and focus on the mission of public health. Why us and why now? We have the opportunity to take advantage of the public health impacts we have made in the past few years and improve the communication and focus of public health in America. The USPHS of the future should be an efficient organization where public health leaders within DHHS align resources, strategies, goals, and communications with limited duplication of effort. I have experienced how the Commissioned Corps has overcome communications and alignment barriers for the benefit of who they serve and it is now time to tell our story. The COF would like to partner with all entities that share our passion in the advancement of public health for our nation. I look forward to seeing all of you in Tulsa.

AWARDS from page 1

support clinical decisions through use of information technology. She helped develop the NIH Clinical Center's clinical research information system, a model for the nation. She was first to extend the use of information technology to increase healthcare manpower for Hurricane Katrina victims, which informed the development of the civilian Medical Reserve Corps and the USPHS response to the Ebola crisis. RDML Romano advanced translational science globally by developing a World Health Organization manpower database on nursing and midwifery. She chaired the Federal Nursing Service Council of Chief Nurses, encouraged the adoption of the Institute of Medicine's recommendations for the future of nursing, and achieved consensus on the federal scope of practice and educational requirements which became a model for civilian education.

RDML Romano was elected as a fellow in the American Academy of Nursing and the American College of Medical Informatics. As USPHS Assistant Surgeon General,

she provided oversight to Commissioned Corps Operations, Force Readiness and Deployment, Reserve Affairs, Volunteer Civilian Medical Reserve Corps, Military Liaison and Veteran Affairs, and Science and Communication. She was the chief advisor for personnel matters to 6,000 members of the USPHS Commissioned Corps. As the Director of the Office of Reserve Affairs, she managed operations for 4,000 reserve officers in the USPHS Commissioned Corps to provide a surge capacity for agency missions and disaster support roles and served as the Surgeon General's principal advisor for preparedness and activation of reserve assets. She directed planning, recruitment, commissioning, training, and deployments to support the mission of multiple federal, state, and local agencies, and developed framework and policy concepts for implementation of a USPHS Ready Reserve force for emerging public health needs and determinants of health response.

As the USU Graduate School of Nursing Dean, she created an educational model

for clinical doctoral education for nurses and provided structure for the nurse scientist program. RDML Romano raised the school's standing to the top 5% of U.S. nursing graduate schools and the nurse anesthetist program is ranked fourth in the country. Under her leadership, the USU Graduate School of Nursing was designated a National League for Nursing Center of Excellence in nursing education for creating environments that enhance student learning and professional development and for sustained achievements in creating environments that promote the pedagogical expertise of faculty.

Functional Mission Award: Training and Education

COA Life Member and Scientist CDR Jason Wilken received the Training and Education Award for his efforts in developing technical guidance and training for preparing healthcare facilities for chemical emergencies. CDR Wilken is a CDC Career Epidemiology Field Officer

see **AWARDS** continued on page 13



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Emergency Medical Responder (EMR) Training with HHS staff, including Public Health Emergency Response Strike Team (PHERST) Officers

by LCDR Mirabelle Adamu, LT Nikia Jones-Shaw, LT Danielle Eustace, LT Johnny Nwankwo, and LT Dylan Mclellan

To start 2023 on a positive venture, 11 staff including five Public Health Emergency Response Strike Team (PHERST) officers from various categories embarked on a fast-paced journey by partaking in an Emergency Medical Response (EMR) class that involved engaging in lectures and class discussions, followed by fulfilling homework expectations, and performing written and practical skills. This class was facilitated by Mr. Lee Silverman, a retired fire paramedic that provided 37 years of service with the Montgomery County Fire & Rescue Service (MCFRS). He was an EMT/Paramedic Instructor for 29 years. He retired as a Captain, serving at the Fire Rescue Training Academy as the Emergency Medical Services Training Officer for MCFRS.

The training was completed over 12 days throughout January. The categories represented by the PHERST officers in attendance were nurse, environmental health officer, and pharmacy. By the end of the training, non-clinical participants gained ample lifesaving skills and confidence to execute interventions during high-stress, critical emergency responses. Some skills learned included a refresher of basic life support (BLS), the “stop the bleed” initiative, traumatic injury stabilization, and providing emergency care interventions for both responsive and unresponsive patients.

Nurse Officers Perspectives: LT Mclellan and LT Eustace mirrored similar experiences referred to in this course. It was helpful to gain pre-hospital perspectives of emergency care delivery as first responders. Opportunities were provided to brush up on manual skills that are only sometimes utilized in standard hospital settings. From manual blood pressure checks to splint placements using EMS supplements, the hands-on experience was most welcome. The course also served as an opportunity to help and educate non-clinical peers. For experienced nurses, identifying, treating, and stabilizing patients in austere environments, decision-making becomes dependent on medical direction as opposed to clinical practice in the emergency department (ED) or operating room (OR) settings, where one has access to various types of diagnostic testing and definitive care measurement implementation.

Pharmacist Perspective: LCDR Adamu is grateful for this opportunity, which has prepared her to be ready to act in emergencies and be able to provide life-saving care outside of the hospital before professional help arrives. She also appreciated the opportunity to refresh her BLS skills, learn how to put on a cervical collar on a person with a suspected head or neck injury, splint a fracture, how to use a tourniquet to stop the bleed, triage during mass casualty incident (MCI), and strap injured persons on a stretcher. She noted that she feels more confident in responding



Mr. Silverman demonstrating how to splint a hand injury



C-spine immobilization maintained while transferring patient (LT Danielle Eustace) on backboard.

see **PHERST** continued on page 23

The Power of Praise

by CDR Kristie Purdy, MS, RDN/LD, BC-ADM, CDCES

Chair, COA Board of Directors

"Everyone has an invisible sign hanging from their neck saying, 'Make me feel important.' Never forget this message when working with people." ~Mary Kay Ash

Praise is an expression of approval or admiration for someone or something. It is such a simple concept, yet it is a concept many of us often overlook in our day-to-day lives. While many of us know the effect praise can have on children, praise can have the same effect in the workplace. Praise is one of the most powerful things you can offer your team and an individual.

Whether we are trying to meet an agency deadline or make it in time for the carpool line, we are busy and in a hurry to get things done. The simple effort of praising those around us, those who we work with or live with, is often forgotten. How many times have we found ourselves thankful for the efforts of those around us, but have not taken the time to show our gratitude through praise? The issue is not the lack of desire to show praise to others. Oftentimes, the issue is we forget or just are unsure of how to praise others.

I hope you were able to join COA's virtual gathering in January on "The Incredible Power of Praise," presented by Linda Bruno. If you were not in attendance, I highly encourage you to take time and view the recording made available to COA members by clicking on the events page on our website or at <https://tinyurl.com/powerrecording>.

According to a survey conducted by the American Psychological Association (APA), employees who feel valued are more likely to report better physical and mental health, as well as higher levels of engagement, satisfaction, and motivation compared to those who do not feel valued by their employers. Almost all employees (93 percent) who reported feeling valued, said they were motivated to do their best at work. This compares to just 33 percent of those who said they do not feel valued by their employers.

The concept of praise seems so simple, right? Someone does a great job, and it is acknowledged. However, Bruno excelled in

taking this concept a step further. There were two topics of praise that personally resonated with me from Bruno's presentation. First, she challenged the participants to become intentional in their acts of praise.

Intentionality is something I know I struggle with. I desire to have those around me know what a fantastic job they are doing. I may express my gratitude through a simple "thank you." However, I pondered how often have I taken just a few minutes to really praise the individual specifically for their efforts and the impact those efforts had. How many times have we told ourselves, "They know how I feel about them?" If we do not take time to verbalize our praise, do those around us know how much they are truly valued?

Praise is one of the most powerful things a leader can offer their team. When used strategically, praise may be a powerful tool to provide motivation. At the end of the day, praise just makes people feel good.

The second concept that resonated with me from Bruno's presentation was to avoid always making a praise sandwich, otherwise known as the "Oreo Cookie Approach." This approach to praise occurs when corrections or critical feedback are sandwiched between two honest, positive statements.

How do you feel when you receive praise for something you did? Feels great, right? Now think about how you feel when you receive an abrupt email pointing out a mistake, no matter how minute the mistake may have been. This does not feel so great, does it? No matter what the positive statement was, it does not make it any easier to absorb the negative statement. Many of us walk away from a "praise sandwich" focusing all our attention on what was not done right.

While the act of praise may not come easily to everyone, we are able to grow as leaders when we stop to appreciate the work of others. I hope you take time to view the number of practical ideas Bruno offered in the "Incredible Power of Praise" and strategically use praise to uplift those around you!

AWARDS from page 10

assigned to the California Department of Public Health and served as Scientist Professional Advisory Committee (SciPAC) Chair in 2020-2021.

Functional Mission Award: Research and Development

COA member LCDR Adeola Adeyeye was nominated for sustained, high-quality achievements in scientific leadership as the medical officer (MO) for the HIV Prevention Trials Network (HPTN) studies that resulted in the approval of long-acting Cabotegravir (CAB-LA) as APRETUDE by the FDA on Dec. 20, 2021. She is an astute physician, having contributed globally to the treatment and prevention of HIV/AIDS in all populations. She is the Associate Director for Science, Division of Global HIV & TB at the Centers for Disease Control and Prevention (CDC).

Female Physician Leadership Excellence Award

COA member CAPT Francisca Abanyie was presented with the Female Physician Leadership Excellence Award for her contributions to military medicine, mentoring others, and inspiring young women working in the fields of medicine and science. Her career achievements, demonstrated leadership, community service, and commitment to enhancing the role of women in medicine were recognized. She currently serves as Deputy Director of Centers for Disease Control and Prevention's Commissioned Corps Activity.

Federal Nursing Leadership Excellence Award

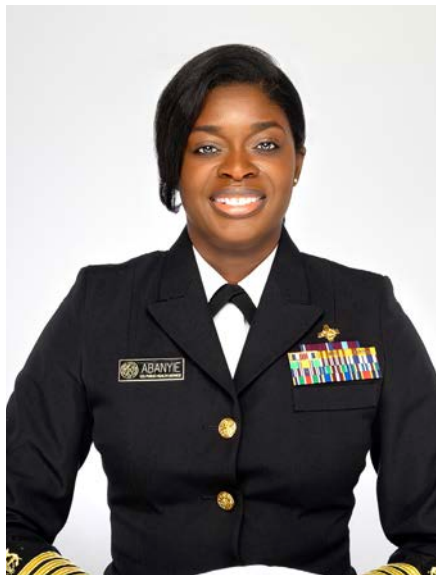
COA member LCDR Carissa Haney was presented with the Midgrade Military Federal Nursing Leadership Excellence Award for her exemplary leadership and skill resulting in noteworthy clinical or administrative accomplishments. She is currently serving as a nurse practitioner and clinical nurse consultant with the Health Resources and Services Administration.



CDR Jason Wilkin, recipient of the Functional Mission Award for Training and Education



LCDR Adeola Adeyeye, recipient of the Functional Mission Award for Research and Development



CAPT Francisca Abanyie, recipient of the Female Physician Leadership Excellence Award



LCDR Carissa Haney, recipient of the Federal Nursing Leadership Excellence Award

PROMISE from page 7

Highlights of my two months included reconnecting with Navy shipmates from past duty stations, forging connections with a new generation of sailors, and working with volunteers to selflessly comfort and care for thousands of underserved individuals. After disembarking the ship, I reflected on impacting many of the 1,000+ medical and Military Sealift Command members in some small way, whether it was my presentation about USPHS career paths to sailors at their Career Day at Sea, or the individual fist bump sendoff every day at three consecutive ports for 200+ sailors, soldiers, marines, and airman as they disembarked for the medical sites. Overall, it was an incredible honor to serve. I've known about the Comfort; read about the ship's storied history and heard from USPHS officers who were on past missions. Now, after 23 years of uniformed service, one of my career-long dreams is fulfilled, and I am forever a part of the Continuing Promise.

Veterans can now access their disability benefit decisions online

Originally published by the VA Office of Public and Intergovernmental Affairs

WASHINGTON — Veterans can now access their disability benefit claim decision notice letters electronically on VA.gov, empowering them to quickly and easily see their disability decisions.

Before this option was available, Veterans had to wait for a paper copy of their decision notice to be mailed to them. While previous iterations of VA.gov allowed Veterans to access benefits summary letters, they could not access the full copy of these decision notification letters from their electronic claims folders.

This service became available to Veterans on VA.gov on Jan. 17. Since launching, nearly 280,000 decision notice letters have been downloaded.

"Veterans now have access to their benefits decisions anytime, anyplace – right at their fingertips," said VA Secretary Denis McDonough. "VA disability benefits can also open the door to other federal and state benefits, so quick and easy access to a decision means quicker access to the additional benefits Veterans deserve."

The new electronic option is also expected to reduce calls to the National Call Centers, freeing up call center respondents to answer other questions and requests from Veterans and their families.

To access their decision letters, Veterans can log in to VA.gov and check the status of their claim. For more details, visit VA News.



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New Federal Law Will Allow For USPHS Officers and Spouses To Use State Licenses In New States After A PCS Move

by Dave Corrigan, COA Deputy Director

There is good news on the horizon for USPHS officers and their spouses who rely on professional licenses for their employment. A bill signed into law by President Biden in January will provide better professional license portability from state-to-state for officers and their spouses who move after receiving official orders. Part of the Veterans Auto and Education Improvement Act of 2022 amends the Servicemember Civil Relief Act (SCRA) to address the professional license transfer delays that many service members and spouses experience when changing duty stations. For a USPHS officer to be appointed, almost every category requires the officer to possess a professional license or certification. Additionally, about 35% of service member spouses rely on at least one professional license for their employment. Officers and their spouses have seen

significant delays in being approved to practice in a new state, affecting their income and employment prospects.

This new law aims to streamline this process across all states with very few requirements.

As long as the USPHS officer or spouse is in good standing with the current, and any former, state in which they have held a license, "Such covered license shall be considered valid at a similar scope of practice and in the discipline applied for in the jurisdiction of such new residency for the duration of such military orders." There will be a requirement for the officer or spouse to submit a copy of the official military orders to the licensing authority and to keep current on all state-required continuing education credits.

COA has supported this goal for years as it affects so many of our members. With that said, efforts like this would not

be possible without the collaborative advocacy of groups like The Military Coalition and its 34 other Veterans and Military Service Organizations.

Efforts to streamline this process have been proposed for years, and the issue became even more apparent during the COVID pandemic when license processing was delayed even more than usual. Since 2011, many states have created a streamlined process for their individual authorities. There have even been collaborative interstate licensure compacts that make reciprocity between multiple states easier. However, no law has been as comprehensive as this amendment to the SCRA. At this point, we are unable to determine if certain licensing authorities or individual employers will be delayed in implementing this, but Permanent Change of Station (PCS) moves for USPHS officers and spouses will be easier in the near future.

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Passing of the First Executive Director of COA

by Jacqueline Rychnovsky, PhD, FAANP,
CAE Captain (retired), Nurse Corps, US
Navy, COA Executive Director

The Commissioned Officers Association's (COA) first Executive Director, William "Bill" Joseph Lucca, Jr., passed away on February 27, 2023 at age 94. Bill was born the second of five children to William Joseph Lucca, Sr. and Mary Eva (Bershefsky) Lucca in Manhattan, New York City, NY, on January 21, 1929. Bill attended Good Shepherd Grammar School and Fordham Prep High School. He later attended Georgetown University in Washington, DC, earning his undergraduate degree and graduating from Georgetown Law School.

Bill began his career holding positions at the U.S. Chamber of Commerce and Capitol Hill before transitioning into the association field. On October 15, 1962 he became the first Executive Director of COA, a position he held until 1995 when he was succeeded by Commander Michael Lord, USN (retired). Bill is remembered for creating new programs

and uniting groups under a common cause. "When issues came up in the Health & Human Services hierarchy to abolish the Commissioned Corps as 'not needed,' Bill was quite instrumental in finding ways to quiet the negativity and demonstrate the needs of the Commissioned Corps. He went to bat for Corps activities and stood up for what officers stood for, and what we did for the good of the country" said RADM Marlene Haffner, USPHS (retired), who knew Bill while serving in her role as Chair of COA's Board of Directors.

Bill also held Board positions at the American Society of Association Executives (ASAE) and Foundation for International Meetings (FIM). He is survived by his wife, Janice, and his children, Robert (Jennie) and Elizabeth (John); his five grandchildren, Kathryn, Jack, William, Blake, and Hayden, his brother and best friend, Joseph; his sister, Concetta; and many extended family members who loved him deeply. He will be remembered as a lovable character with a gentle heart and beloved husband,



William J. Lucca, Jr., Executive Director, COA

father, grandfather, and friend, whose life touched many.

A memorial service for Bill was held on March 14 at Saint Luke Catholic Church in McLean, VA. Donations can be made in Bill's memory to The Children's Inn at NIH.



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*****See you in Tulsa for the 2023 USPHS Symposium*****

VA Wants Vets to Use Their Benefits When Choosing a Final Resting Place

Reprinted with Permission. This story was written Jan. 25, 2023 by Patricia Kime for Military.com

The Department of Veterans Affairs is raising awareness of little-used benefits for veterans: burial at a VA, state or tribal veterans cemetery, and headstones or markers for veterans buried in private cemeteries.

According to VA officials, just 20% of eligible veterans who died last year were buried in a VA-managed or -supported cemetery, a benefit that comes at no cost to the veteran's family. And fewer than half who qualified for a burial allowance or headstone used the opportunity, according to Under Secretary for Memorial Affairs Matt Quinn.

As the VA nears the 50th anniversary of assuming management of national cemeteries, the department is spreading the word to veterans and families that vets can apply for eligibility before they die, taking care of the needed paperwork beforehand to ease the financial and emotional burden on their families and make their wishes known.

"I want families to know that they can honor the services of their veteran with a VA-provided headstone, marker or medallion, but I also want every veteran or veteran's family to know they have the option of being interred in a national, state, territorial or tribal veterans cemetery," Quinn said during a roundtable with reporters Tuesday.

The VA manages 155 cemeteries nationwide and funds an additional 121 state, territorial and tribal veterans cemeteries. Veterans who are eligible for VA burial benefits include all who were discharged under something other than dishonorable conditions; spouses or surviving spouses of eligible veterans; dependent children; and some others.

The VA has a goal to ensure that 95% of the nation's 19 million veterans live within 75 miles of a VA or VA-supported cemetery; currently, the department is "just shy" of 94%, according to Quinn.

"It's that final benefit that the veteran has earned and that the nation can show to that veteran's family appreciation for their sacrifice and service," Quinn said.

During a meeting of the Veterans' Family, Caregiver and Survivor Advisory Committee on Wednesday, VA Secretary Denis McDonough noted that the burial benefits are underutilized and said the department is planning additional outreach to veterans to publicize them, rolling information on their availability into the information provided to those who use the VA's new life insurance program, VALife.

About 85% of eligible veterans use education benefits offered through the VA, while slightly more than one-third utilize VA health care. But just 15% of veterans are buried in VA-managed cemeteries.

"The uptake on the NCA [National Cemetery Administration] benefit is nowhere near where it should be," McDonough said. "We are meant to be there for you every step of the way."

The department is expanding opportunities for veterans to be buried in VA or supported cemeteries as it closes in on its goal to make them more accessible. The VA plans to open a columbarium-only cemetery in Queens, New York, this year, part of an urban initiative for the NCA that will provide burial sites for cremated remains in cities with few in-ground burial options. A columbarium is a building that holds cremated remains.

Along with another urban columbarium in Indianapolis, Indiana, and two new rural cemeteries in Elko, Nevada, and Cedar City, Utah, the VA plans to add 310,000 sites for interment of cremains in the next several years, for a total of 4.2 million gravesites.

The VA provided roughly 350,000 headstones for veterans' graves and 12,000 medallions to adorn the private gravestones of veterans in 2021. But given that nearly 642,000 veterans die each year, the number is a fraction of those eligible for those benefits and more.

In addition to burial at no cost in VA and VA-supported cemeteries, veterans are eligible for headstones or medallions to place on private headstones as well as burial allowances for veterans who die of service-connected conditions and prefer to be buried in a non-VA cemetery.

Veterans who die in a VA medical facility of a non-service-connected condition also are eligible for limited burial and plot allowances for interment at a private cemetery.

Quinn urged veterans to consider applying for eligibility for burial benefits as part of their estate planning. They can learn about applying for benefits on the VA's website without any obligation to be buried in a national cemetery or charge, Quinn said.

"This is one of the best ways to ensure a veteran's family knows their loved ones' wishes and that NCA is able to provide the benefits for service to our country. I have done this myself," he said.

CALL FOR APPLICATIONS: High School Seniors

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HISTORY

The scholarship is named after **Helena O. Mishoe, PhD, MPH**, retired Rear Admiral of the Commissioned Corps of the U.S. Public Health Service. This "Believe" Scholarship inspires students to be scholars, serve their community, and achieve their dreams. It also continues RDML Mishoe's legacy as a believer in the dreams of those who have demonstrated tremendous resiliency in overcoming challenges, and who will become visionary change-makers achieving great things to make our world a better place for all.

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- Pursuing a degree in the sciences or a health-related field
- U.S. citizen or permanent resident

NOTE: The scholarship is for students from underrepresented populations in the health sciences and research, or health-related disciplines (such as racial and ethnic minority groups, rural areas, first generation college students, and individuals with disabilities).

DEADLINE

The application period is **March 27, 2023 - May 19, 2023**. The recipient(s) of the scholarship will be announced in June 2023.

APPLY

Visit <https://www.phscof.org/scholarships/mishoe-believe-scholarship/>



A Social Worker with a Niche for Design

by LT Christine Nappa, LCSW

As a young adult attending Syracuse University, my dream was to become a graphic designer.

I never imagined I would use my graphic design skills as much as I do as an officer in the U.S. Public Health Service (USPHS) Commissioned Corps. I learned that tapping into my creativity makes me both a more innovative and resourceful social worker.

I graduated with a Bachelor of Science in graphic art and envisioned that I would work for a major company like Google or Disney. After graduation, I quickly realized that graphic design was more of a hobby than a career path. I struggled quite a bit with this realization, as I had just spent four years at a very expensive university learning about all things graphic design, media, and communications.

Eventually I came to terms with wanting to make a career change, and five years later I decided to become a social worker, specializing in military and veteran services. I graduated with a Masters of Social Work from the University of Southern California, and now, I am fulfilling my second career dream as an active-duty social worker. In July 2021, I commissioned as a Licensed Clinical Social Worker (LCSW) with the Public Health Emergency Response Strike Team (PHERST), based out of Commissioned Corps Headquarters (CCHQ).

When I joined the USPHS, PHERST was a brand-new program. Joining a newly developed program came with unique opportunities, like a need for marketing and communications materials. When the idea of a PHERST logo came up, I volunteered to take on this task. I designed the logo, which was approved by CCHQ senior leadership; then, word spread about my graphic design experience. Subsequently, I provided graphics support for the CCHQ challenge coin, the USPHS coin, an admiral's coin, and several special event communications documents. While deployed to American Samoa in support of the COVID-19 response, I led a group of six officers to design the challenge coin commemorating our deployment (photo above). I also contributed to various professional organizations' marketing endeavors.

Working on several graphics projects since I joined the USPHS has renewed my long-dormant passion for all things related to digital



LT Christine Nappa worked with a team of officers to design the challenge coin commemorating their deployment to American Samoa. (Credit for the turtle and shark design: Karli Shanklin)

print design. It allows me to explore my creativity and exercise the visual and intuitive aspects of my brain. Not only has tapping into my creativity allowed me to utilize my graphic design skills, but it has also made me a stronger social worker. When I deployed to American Samoa, I created handouts with psychoeducational materials to share with the other deployed officers. In Kauai, Hawaii in support of the Innovative Readiness Training (IRT) Tropic Care 2022, I created psychoeducational training materials for patients and service members using limited resources.

Working with other officers to design various marketing and communications materials brings a special type of energy to the workplace. It creates an enjoyable space apart from the hustle and bustle of meetings and emails. Each person has their own perspective, unique identity, and imagination that adds inspiration to a team project. I encourage all officers to explore their creativity in the workplace and see what innovative ideas ensue.

Out of the Darkness Walk Offers USPHS Officers and D.C. Community Members an Open Environment to Freely Discuss Mental Health and Suicide

by LCDR Christine Corser, PharmD, MS, LCDR Tramara Dam, PharmD, BCSCP, LCDR Sylvia Park, PharmD, and LT Karen Lumbu Kinard, MHS, REHS/RS

On October 22, 2022, thirty United States Public Health Service (USPHS) officers convened to support the Out of the Darkness Community Walk and Resource Fair event in Washington, D.C. It was a collaborative event. USPHS officers from two chartered advisory groups in the Office of the Surgeon General (OSG) - the Prevention through Active Community Engagement (PACE) and the Asian Pacific American Officers Committee (APAOC) - provided public health education and USPHS recruitment materials to over 325 members of the community.

The American Foundation for Suicide Prevention (AFSP) organizes the Out of the Darkness Community Walk and Resource Fair events in various cities across the country. These events encourage communities to come together and have open conversations about mental health and suicide. For many participants, it also serves as a way to remember family, friends, or colleagues lost to suicide. During the event in Washington D.C., members of D.C. Commissioned Officers Association (D.C. COA) walked together and alongside community members to support awareness of mental health and suicide. In addition, a significant duration of the event involved pre-walk activities which afforded APAOC and PACE officers a venue to engage with the community and to promote the Surgeon General's priorities. Like many officers throughout the country, the COVID-19 pandemic has kept us away from supporting various community events in-person, so this was a welcome and appreciated opportunity for all. LCDR Tramara Dam, one of the lead officers for APAOC, shared, "I am happy to see community events becoming more normal again. I missed being able to support community events during the pandemic."

While in uniform, officers supporting the pre-walk aspect of the event hosted a table and educated the community on the Healthy Mind Initiative (HMI) and offered various population-specific data related to suicide. Suicide in Asian American and Native Hawaiian/Pacific Islander (AANHPI) youth is the leading cause of death in those 15-24 years old. APAOC established HMI in 2018 to raise awareness on youth mental health issues within the AANHPI population, reduce stigma, and encourage parents and youth to seek help when needed. In 2022, APAOC collaborated with PACE to develop an OSG-approved HMI lesson plan to expand the HMI effort nationwide. The event was a prime opportunity to introduce HMI to the community and to share the new Suicide & Crisis Lifeline -988. USPHS officers were able to share, in detail, the purpose of the lifeline and explain that callers would be connected with a trained counselor who would listen and provide support including connecting the caller with appropriate resources. LT Karen Lumbu Kinard, Washington D.C. PACE Lead, recalls one



DC Community members listening to Healthy Mind Initiative presentation.

interaction that stood out to her, "One lady had lost a friend to suicide only a few days earlier and while she was struggling with the sudden loss, she knew she had to come support the event and unite with others who have undergone similar losses."

Ten APAOC and PACE officers, representing various USPHS categories, staffed a table that received 325 visitors throughout the event. LCDR Sylvia Park, another lead officer for APAOC, noted, "I heard from some visitors at our table that throughout the COVID-19 pandemic they had trouble accessing information either due to language barriers or perceived miscommunications in the news. I was able to send them home with factual materials which they could then share with their family, friends, and neighbors."

As for the walk itself, it started at dusk which signaled the challenges and "darkness" individuals with mental health experience on a day-to-day basis. The evening walk also helps promote community coming together on these issues impacting millions of Americans and moving away from keeping these issues hidden in the "dark," and instead instilling a culture where all can talk more openly about mental health. CAPT Sara Anderson led the walk for D.C. COA participants; the walk gave officers an opportunity to remember, grieve for lost family and friends, and hear from others with personal experiences relating to mental health and suicide. The walk also afforded additional opportunities for the USPHS officers to educate others about the 988 Suicide & Crisis Lifeline, to highlight quick and important points about suicide and mental health, and to raise USPHS visibility in the community in pursuit of improving USPHS recruitment.



Spiritual Wellness

by LCDR Katrina Redman, MT, SPOC, M.Div., Chaplain (BGCT)

Do You Feel Safe?

I have been meditating on safety today. With so many acts of violence and natural disasters occurring daily, it may be hard to feel safe at times. What does it mean to you to feel spiritually safe?

While I was researching the religious holidays in March, I noted that there are two belief systems (Wiccan and Baha'i) which celebrate holidays on March 21st, which is the vernal equinox. An equinox occurs twice a year. It is when the day and night are approximately equal in length. Equal. Balanced. Steady. These are words that we associate with feeling safe.

Saint Patrick, who is pictured here, was a British priest during the fifth century. He is credited with having brought Christianity to Ireland. He is holding a three-leaf clover because he used this plant, which is commonly found in Ireland, to teach the Holy Trinity. Visual aids are a teacher's friend! What you might not know is that at the age of 16, Saint Patrick was captured by Irish raiders and spent six years in Ireland as a slave. He relied heavily on his faith to endure those years. After escaping and reuniting with his family, he had a deeply moving dream. He felt a calling to minister in Ireland to the Irish people, but he felt unfit for the task. He felt that he was spiritually unequal, unbalanced, unfit, and unsafe because of his education. He began ministerial studies and when the burden to answer his call could not be denied, he finally went to Ireland, and his fears vanished. Despite the threat of martyrdom, he was known for his continuous expressions of gratitude to God.

How did St. Patrick go from feeling spiritually unsafe to confident and grateful? The answer is that he had to dive in. He had to first do the work that was required of him spiritually. When he took the risk to do what God called him to do, he surrendered his own understanding to that of a higher power. Only after this was done could he experience the utter joy even in the face of grave danger. He was finally able to feel safe spiritually.

So how does feeling spiritually safe relate to our work? I admit that I have felt overwhelmed at times with all of the changes in my work. Many of you have told me that you feel the same. USPHS has had to evolve so much and so quickly since my commissioning. Yet, despite the chaos around me, I am able to feel peace and gratitude because I feel spiritually safe. Be safe everyone. You are in my thoughts and prayers.



Education: Wiccan Sabbats

Wiccan holidays that are based on the seasons and Earth's natural rhythms. Sabbats celebrate the Wheel of the year or Earth's journey around the sun.

Spiritual Exercises

1. Website: <https://www.britannica.com/biography/Saint-Patrick>
2. Read Everyday Spiritual Protection: Simple Techniques to Safeguard Your Mind, Body, and Energy by Cerri Wolf
3. Article: Overcoming fear, denial, myopia, and paralysis by Mark D. Hathaway DOI: 10.1163/15685357-02002100

Questions? Comments? Contact me at khredman@hotmail.com.

EXECUTIVE DIRECTOR from page 1

the Defense Health Agency, and my question has been referred to those with MTF expertise. I'll be sure to update you on their response once received.

Just two weeks ago, I attended an Executive Session for Military Service Organizations (MSOs) and Veteran Service Organizations (VSOs) hosted by the new Director of the Defense Health Agency, Lieutenant General Telita Crosland. LTG Crosland assumed the position of the DHA Director on January 3, 2023.

LTG Crosland comes to the DHA with an impressive resume. A Family Medicine physician, LTG Crosland graduated from the U.S. Military Academy at West Point and attended medical school at the Uniformed Services University of Health Sciences (USU); additionally, she has earned a Master of Public Health and Master of Science from USU and a Master of Science in National Resource Strategy from the Eisenhower School. Prior to assuming this position, she served as the Deputy Surgeon General of the U.S. Army, and the Deputy Commanding General of the United States Army Medical Command (MEDCOM).

Leading one of America's largest and most complex health care systems is no small task. In addition to providing care through over 700 military treatment facilities, the DHA manages private sector care to nearly 10 million beneficiaries, including you! Her DHA Campaign Plan matters to us because it will frame any future concerns or questions we have about TRICARE. The DHA has pledged to executive the following four priorities:

- **Great Outcomes.** This makes every service member medically ready through the delivery of safe, integrated, patient-centered care.

- **Ready Medical Force.** Medical competency and skills sustainment is essential to build and maintain skills for deployment.
- **Satisfied Patients.** Patients will have an exemplary experience when they receive care from the Military Health System, which includes both civilian and military provided care.
- **Fulfilled Staff.** Without satisfied staff, optimal care cannot be delivered.

At her inaugural meeting on February 28th, LTG Crosland and her staff extensively briefed us the topics of Individual Longitudinal Exposure Record (ILER) and Airborne Hazards and the Open Burn Pit Registry. You are eligible to participate if you served in Operations Desert Storm/Desert Shield (ODS), New Dawn (OND), or Iraqi Freedom/Enduring Freedom (OIF/OEF), or deployed to countries in the Southwest Asia theater of operations any time after August 2, 1990, or Afghanistan or Djibouti after September 11, 2001. Also briefed at this meeting was the Red Hill fuel water contamination in Honolulu, Hawaii. Both of these issues are complex, and we encourage you to contact COA headquarters if you have questions or need guidance.

Near the conclusion of the meeting, LTG Crosland addressed the concerns of VSOs and MSOs about changes to the TRICARE pharmacy network and difficulties with mental health access. I expect that we'll hear more about this in the coming months as LTG Crosland settles into her new position and continues to hear concerns from engaged associations like COA.

Until next month!

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Jacque Rychnovsky, COA Executive Director
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A complimentary box lunch will be provided to ACOA members who RSVP and attend in person. Points of Contact for the Event are CDR Rachael Cook (nevicook@gmail.com) and LT Cashmere Miller (cashmere.miller@protonmail.com).

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TIME

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CAPT Robert Epstein
CAPT Barbara Grajewski*
CDR Keith Olin
CAPT Paul Thomas*
CAPT Ray Walche

We Welcome New Members of COA, February 1 - January 28, 2023

LTJG Aya Andrews, ID
LT Nicole Arguedas Villalobos, GA
LT Mary Awuah, MS
LT Anthonia Azubike, NC
LTJG Claude Bonnet, CT
Dr. Aaron Chambers, CA
LT Nikkita Crozier, TX
LT Madelyn Day, NC
LT Lucy Efobi, NJ
LT Jorge Franco, NC
LT Tia Hale, AK
LT John Heafner, MO

LT Elizabeth Johnson, MT
LT Dawid Kierys, AZ
LCDR Elliot Klapperich, SD
LCDR Matthew LaForest, OK
LT Catherine, Lamprey, MD
ENS Destiny LaPointe, MA
LT Pedro Melgar, AK
CAPT Mark Miller, OK
LT Christopher Nartker, WV
LT Tara Nguyen, VA
LT Chinwe O'Hara, GA
LT Arlene Page, GA

LT Carlos Rodriguez Aponte, CO
LCDR Heather Samuelson, IN
LT Hom Sharma, TX
LT Logan Smolla, NM
LTJG Jana Stakeley, TX
LTJG Isabella Tam, CA
LTJG Devonte Thomas, NC
LT Chigozie, Udemgba, LA
LT Jordan Vidal, AZ
LT Frances Vignier, MD
LCDR Michael Yeh, GA
CDR Anthony Zeccola, FL



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PHERST from page 11

to any medical and trauma situation at work and within her community.

Environmental Health Officers Perspectives: LT Nwankwo stated, "In a disaster deployment, the environmental health process of identifying and assessing for contaminants in the air, water, soil, food, and other potentially harmful agents are critical to the health and safety of victims of disaster; but it's also important to the members of the emergency strike team". In November 2022, the U.S. Department of Agriculture reported that food allergies affect about 2% of adults and 8% of children across the United States. Annually, anaphylaxis as a result of food allergies results in about 30,000 emergency room visits, 2,000 hospitalization, and 150 deaths. Anaphylaxis can also be caused by certain insects and medications. Given the severity of certain allergies of potential patients in disaster centers, it is important that

environmental health officers can minimize exposures, recognize allergic reactions, and treat patients with anaphylactic reactions until advanced care is available. Closing the gap between basic first-aid and emergency medical response skills is crucial for PHERST officers as they frequently deploy to support various disasters within the U.S. and abroad.

LT Jones-Shaw was also one of the environmental health officers in the class and learned critical lifesaving skills, such as effective team communication and calmness in chaotic, high-intensity situations. She is thankful for this class organized by Mr. Hennessy and taught by Mr. Silverman. She added that "these skills make me a better officer by instituting a more knowledgeable understanding of traumatic injuries, how to handle them, and in turn make me a better asset for the Public Health Emergency Response Strike Team."

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