

The Therapist Professional Advisory Committee (TPAC) Charter

Revised 6/13/07

(I) MISSION

The Therapist Professional Advisory Committee (TPAC) was created by, and is to advise and serve the Surgeon General and the Public Health Service through the Chief Professional Officer (CPO), on issues relating to the professional practice and the personnel activities, civil service (CS) and commissioned corps (CC), of the **Therapist** Category. Working through the CPO, the TPAC provides similar advisory assistance, upon request, to the Operating Divisions (OPDIVs) or Staffing Divisions (STAFFDIVs) of the Public Health Service (PHS), and to non-PHS programs that routinely use PHS personnel.

(II) RELATIONSHIP OF THE TPAC TO THE UNITED STATES PUBLIC HEALTH SERVICE (USPHS)

In carrying out its responsibilities, the TPAC operates in a staff capacity. It does not substitute for line management or in any way exercise the prerogatives of the respective operating programs. Thus the TPAC advises the CPO, who in turn advises the Surgeon General. While TPAC members are chosen from the respective PHS OPDIVs, they neither represent OPDIV management nor speak for the OPDIV. They are knowledgeable professionals who represent a cross section of the interests, concerns, and responsibilities of the professionals in OPDIVs and organizations staffed by PHS personnel.

(III) OBJECTIVES

The TPAC serves in a resource and advisory capacity through the CPO to assist in the development, coordination, and evaluation of activities related to the professional discipline(s) it represents in the PHS with the specific objectives of:

1. Identifying and facilitating resolution of issues of concern as they relate to the Therapist Category and related civil service professional disciplines.
2. Assessing PHS personnel needs and assisting in meeting these needs through recruitment, training, utilization, and recognition of officers in the Therapist Category and related civil service professional disciplines.
3. Developing position papers, statistical reports, and/or guidelines where appropriate, in order to advise and comment on matters relating to the personnel issues and professional practice of the Therapist Category and related civil service professional disciplines.

4. Promoting the development and utilization of audiology, occupational therapy, physical therapy, and speech and language pathology, by the PHS and other Government programs.
5. Promoting cooperation and communication among the audiologists, occupational therapists, physical therapists, speech and language pathologists and other health professionals.
6. Promoting all aspects of the Therapist Category and related civil service professionals throughout the OPDIVs of the PHS.
7. Providing liaison among professional disciplines within and among PHS components, and providing advice and consultation to the OPDIVs Heads and operating programs upon request.
8. Advocating for best practices within the professions represented by TPAC.
9. Facilitating relationships with professional organizations and academia to promote the linkage between public health and the professions and disciplines of the USPHS.

(IV) FUNCTIONS

In carrying out its broad mission and objectives, the functions of the TPAC shall include but are not limited to the following:

1. Provide general professional advice and recommendations.
 - a. Review and comment on issues referred to the TPAC through the CPO by the Surgeon General, OPDIVs Heads, and /or STAFFDIV Heads.
 - b. Deliberate issues, develop findings, and present recommendations through the CPO to the Surgeon General.
 - c. Provide advice on the professional aspects of the Therapist Category such as new technologies, regulations, curricula and roles.
 - d. Provide advice on ethical and professional standards.
 - e. Review and provide recommendations concerning proposed or needed changes to appointment standards and professional requirements such as licensure requirements to maintain high quality staff.
2. Act as a primary resource for career development:

- a. Advise on CC and CS practices concerning career development.
 - b. Advise on operating practices concerning the appropriate/optimum use of personnel designed to best meet PHS needs and the needs of the individual.
 - c. Advise on issues related to PHS promotion practices and, for commissioned officers, assimilation into the Regular Corps for the Therapist Category.
 - d. Formulate criteria for the selection of candidates for training and/or other career development options.
 - e. Identify both continuing and long-term intramural/extramural education needs of the Therapist Category, and identify and recommend training and/or experience opportunities designed to meet those needs.
3. Provide advice and assistance on staffing issues:
- a. Assess and project need for the Therapist Category staffing levels, both CC and CS, throughout the PHS.
 - b. Provide advice on the goals, objectives, and procedures designed to meet the PHS staffing needs and assist in category retention initiatives.
 - c. Provide guidance for recruitment to the short-term student affiliation programs (COSTEP, summer students, etc.).
 - d. Develop, and/or review and critique, therapist category-specific PHS recruitment materials, procedures, and programs.
 - e. Help establish networks of current and former PHS professionals to assist and facilitate recruitment activities.
 - f. Provide guidance to approved PHS “Associate Recruiters” and other recruiters concerning the recruitment of qualified candidates to the Therapist Category and related civil service professional disciplines.
 - g. Assist in the development of orientation materials for newly hired Therapist Category professionals and provide advice/recommendations concerning orientation programs.
4. Communicate and encourage appropriate use of awards/recognition systems:

- a. Identify, establish, and help administer special professional and Therapist Category specific awards, to include recognition for participation in the committees, subcommittees, and Task Forces.
 - b. Maintain awareness of the existing CS and CC award programs and opportunities and encourage the nomination of qualified individuals for such awards.
5. Serve as a communication link and information resource for the category:
- a. Communicate important information concerning professional, ethical, and technical issues to the CC/CS Therapist Category staff.
 - b. Encourage individual membership and involvement with professional organizations and societies in order to promote open communication with non-federal colleagues.
 - c. Ensure the distribution of minutes and/or other TPAC-developed materials to the extent possible and appropriate to CC and CS staff. Ensure the availability of TPAC minutes to other PACs and the Office of the Surgeon General through the TPAC website.

This list of functions is not all inclusive. The TPAC has the responsibility to identify and add functions as necessary to carry out its objectives. Such functions shall be in concert with the overall mission of the TPAC.

(V) MEMBERSHIP

- 1. **Basic Eligibility Requirements:** Members must be full-time CC or CS personnel, and at the time they are nominated and appointed to the TPAC meet the eligibility requirements for initial appointment to the Therapist Category and personnel systems. In addition, all CC personnel must meet the Office of Force Readiness and Deployment (OFRD) basic readiness standards at the time they are nominated and appointed to the TPAC and throughout their term of service on the TPAC.
- 2. Staff from the Office of the Secretary (OS) and the Office of Public Health and Science (OPHS) may serve on the TPAC as a voting member providing that they recuse themselves from voting on issues and decisions that may have the appearance of a conflict of interest with respect to their duty assignments.
- 3. **Size of the PAC:** The TPAC shall have no fewer than seven and no more than twenty voting members.
- 4. **Organizational Representation:** In order to provide the range of experiences and perspectives necessary for addressing issues before the TPAC, every effort must be made

to have the broadest representation possible among all agencies that are routinely staffed by Commissioned Corps Officers of the Therapist Category.

5. Geographic Considerations: The TPAC will have at least two voting members whose regular duty station is geographically removed by a distance of 75 or more miles from the Washington Metropolitan Area.
6. Gender and Minority Representation: The TPAC will make a concerted effort to include both men and women and racial and ethnic minorities in the composition of its membership.
7. Personnel System: The TPAC will make a concerted effort to include civil service personnel in the composition of its membership.
8. Professional Seniority: The TPAC will have at least one voting member, who at the time of their appointment to the TPAC had less than five years of professional experience as a therapist.
9. Professional Discipline Composition: Cognizant of the fact that the TPAC is structured around the PHS Commissioned Corps defined professional categories that encompass more than one major professional discipline. The TPAC should attempt to be as inclusive as practical in selecting members who possess the requisite credentials for each respective sub-discipline that makes up the Therapist Category.
10. Ex-Officio Members (non-voting): The Chief Professional Officer is an ex-officio member of the TPAC [see IX (1)]. The JOAG Representative is an ex-officio member of the TPAC. The former chair may serve one additional year as an ex-officio member of the TPAC [see VIII (3)]. The TPAC may identify other individuals and request that they serve as ex-officio members.
11. Liaison Members (non-voting): The TPAC may identify individuals to serve in a liaison capacity to provide information or assist with activities.

(VI) NOMINATION PROCESS

1. Annually, the TPAC will solicit, through newsletters and other appropriate means, nominations for vacancies on the TPAC from all individuals in the Therapist Category and represented civil service professional disciplines. Self-nominations will be solicited. The names will be transmitted by the CPO to the nominee's respective OPDIV Head who may endorse the nominee(s) or provide alternate or additional nominations meeting the general representation requirements demonstrated by the original nominees. The OPDIV

Head's response will be reviewed by the TPAC and CPO who will identify, by name, those highly qualified to fill anticipated vacancies. A final list of nominees will be sent by the CPO to the Surgeon General for selection and approval.

2. This nomination process shall be conducted so that the final nomination package is available for the Surgeon General's consideration no less than 60 calendar days prior to the expiration of the regular term of the member.
3. Should the need arise to fill an unexpired term of a voting member, the vacancy shall be filled through the annual nomination process.

(VII) TERM OF APPOINTMENT

1. TPAC members will be selected to serve three year terms. Terms will be staggered to ensure rotational balance
2. Once a member has accumulated a lifetime total of six years of service on the TPAC, they are not eligible for reappointment. Terms of office may be served consecutively at the discretion of the TPAC.
3. Alternates: Cognizant of the demands of the members primary work responsibilities and the need of the TPAC to conduct business, the TPAC has the option of establishing procedures to allow each voting member to appoint, and inform the Chairperson of a single individual from the same OPDIV or professional discipline who can serve as his/her alternate. Such alternates shall have voting privileges when serving in the place of the primary member. It is the responsibility of the primary TPAC member to keep the alternate fully informed and knowledgeable of the TPAC's activities. Any agency clearance or approval requirements for travel/per diem for TPAC activity participation will have to be handled within the agency by the primary TPAC member. All alternates must meet OFRD basic readiness standards.
4. Attendance: Any member of the TPAC who frequently misses meetings without just cause can, at the discretion of the TPAC Chair in consultation with the CPO, be asked to voluntarily resign from the TPAC or the TPAC Chair in consultation with the CPO can initiate a request to the Surgeon General to terminate said membership and so inform the OPDIV head.

(VIII) CHAIRPERSON

1. The chairperson will be elected by the voting membership of the TPAC.

2. Term of the Chairperson: The chairperson will serve a two year term with no opportunity for re-election to that post.
3. Term of Appointment: If the term of chairperson coincides with the expiration of that individual's membership on the TPAC, the former chair may serve one additional year as an ex-officio member of the TPAC provided the OPDIV Head is informed and concurs with the extension. Reappointment as a regular member must occur per the provisions of Section (VI).

(IX) CHIEF PROFESSIONAL OFFICER (CPO)

1. TPAC Membership: The Therapist Chief Professional Officer shall be a non-voting ex-officio member of the TPAC.
2. Relationship with the TPAC: All output of the TPAC, be it correspondence, reports, minutes of its proceedings, or other, must be transmitted through the CPO who, as he/she may deem appropriate, may provide concurring or non-concurring comments but may not stop or unduly delay such transmittals.

(X) OPERATIONS AND PROCEDURES

1. The TPAC shall develop its own internal operations and procedures (e.g., bylaws). These shall include, at the minimum provisions covering the following:
 - a. Operational year: Determine and report to the Surgeon General the day and month chosen as the beginning of its operational year.
 - b. Frequency of meeting: Meetings will be held once per quarter at a minimum.
 - c. Agenda: A meeting agenda and appropriate background material is to be made available to the members.
2. Records and Reporting:
 - a. Minutes of each TPAC meeting will be developed and approved by the TPAC members.
 - b. Minutes and reports of the TPAC will be distributed in accord with Item IV (5) (C) FUNCTIONS.
 - c. The TPAC must establish a system to maintain a permanent file of the official minutes and reports of the TPAC.

3. Executive Secretary: The Executive Secretary must be a member of the category but is not required to be a voting TPAC member.
4. Quorum: A Quorum consists of at least 50 percent of the TPAC voting membership. An alternate attending in lieu of the member shall be counted in determining the quorum requirement.
5. Voting: Where voting is required or appropriate, i.e., election of the Chair, action will be determined by the simple majority of those voting members present.
6. Committees: Where the TPAC elects to establish standing or ad hoc committees, said membership may include non-TPAC members provided that the chairman of the committee is a voting member of the TPAC.

DECISION

Approved _____ Disapproved _____ Date _____

Kenneth Moritsugu, MD, MPH
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