

Summary of Organizational Changes in USPHS  
Affecting Roles of Assistant Secretary for Health and Surgeon General

Surgeon General. A post created by order of President John Adams in 1797. The early Surgeons General served many years and the Office gathered prestige and credibility.

Assistant Secretary. When the Department was created in 1953, a special, non-career position of Assistant for Health and Scientific Affairs was established in the Office of the Secretary. This was a staff position and did not directly infringe on the responsibilities of the Surgeon General as the head of an operating agency who reported directly to the Secretary. However, over time, many of the high-level negotiations on politically sensitive issues came to be handled by this Assistant, and the Secretary often turned to him for advice on key health policy matters. In 1965, this position was given the title Assistant Secretary, while retaining its staff character. The incumbent, Dr. Philip Lee, exercised an increasingly influential policy role in the following two years.

1966 Reorganization. Reorganization Plan Number 3, approved in 1966, abolished the four-bureau organization of the Public Health Service, which had been established in 1944, and placed all of the Surgeon General's statutory authority in the hands of the Secretary. The Secretary redelegated this authority to the Surgeon General.

1968 Reorganization. In 1968, under authority of Reorganization Plan Number 3, the Secretary gave the Assistant Secretary for Health and Scientific Affairs line authority over the Surgeon General. The formal delegation of authority now went from the Secretary to the Assistant Secretary, who then redelegated it to the Surgeon General. A few weeks later, however, a new order was issued abolishing the status of the Public Health Service as an operating agency managed under the direction of the Surgeon General. It established instead three separate health agencies, the heads of which reported directly to the Assistant Secretary. The Surgeon General became the "principal Deputy" to the Assistant Secretary but without line authority, except in the absence of the Assistant Secretary.

A variety of configurations regarding the Assistant Secretary for Health and Surgeon General have been in operation since 1968 with specific delegations varying according to the organization structure and wishes of the Secretary.

COMPARISON OF ROLES OF ASSISTANT SECRETARY FOR HEALTH AND SURGEON GENERAL

<u>Prior to 1968</u>	<u>1968 - 1971</u> <u>Assistant Secretary for Health and Scientific Affairs and SG*</u>		<u>1976</u>	<u>1977</u>	<u>1982</u>
<p style="text-align: center;"><u>SG</u></p> <ul style="list-style-type: none"> <li>o Line responsibilities over all PHS agencies. Control of all personnel and budget.</li> <li>o Statutory responsibilities of the SG, e.g., transport of hazardous substances; joint travel regulations.</li> </ul> <hr/> <p>SG was the professional spokesman on health matters. The best minds in the PHS provided the scientific and background information to the SG who had the respect of Congress, Government and public.</p>	<p style="text-align: center;"><u>ASH</u></p> <ul style="list-style-type: none"> <li>o Special Assistant to the Secretary (Health and Medical Affairs) appointed by President. Review the health and medical programs of the Department and advise the Secretary. Rank and pay comparable to Assistant Secretary.</li> <li>o Line responsibility over agencies.</li> </ul> <hr/> <p>SGs position began to erode when Dr. Egeberg was ASH and Dr. Steinfeld the SG.</p>	<p style="text-align: center;"><u>SG</u></p> <ul style="list-style-type: none"> <li>o Retained some statutory responsibilities, e.g., transport of hazardous substances; joint travel regulations.</li> <li>o High level policy advisor to ASH on health policy, program, legislative, planning and evaluation proposals and professional personnel issues.</li> <li>o Represents ASH at Departmental, interdepartmental, national and international meetings.</li> <li>o Designates PHS professionals to serve as PHS representatives, e.g., Association of Military Surgeons of the U.S. (AMSUS); American Board of Cardiology.</li> </ul>	<p style="text-align: center;"><u>Acting SG Appointed. Office of SG Informally Recreated.</u></p> <ul style="list-style-type: none"> <li>o Stronger input into policy and management issues.</li> <li>o Responsible for review of health professional personnel issues.</li> </ul> <hr/> <p>Office of SG was not established since ASH-SG were the same person and SG statutory authorities were delegated to the Deputy SG within the Office of the Deputy SG.</p> <p>Dr. Ted Cooper, ASH began to use Dr. Ehrlich as Acting SG. He thought that the ASH should make political decisions but the health spokesman should be the SG. For example, in the swine flu episode there was no one spokesman who had legitimacy in the eyes of the health professions or the public.</p>	<p style="text-align: center;"><u>ASH - SG**</u> <u>Delegations to Deputy SG</u></p> <ul style="list-style-type: none"> <li>o Ex officio member Board of Regents Uniformed Services University of the Health Sciences (USUHS)</li> <li>o Principal liaison for operations with USUHS Medical School.</li> <li>o Ex officio member Board of Regents Armed Forces Institute of Pathology and National Library of Medicine.</li> <li>o Delegate to AMA House of Delegates.</li> <li>o PHS representative AMA Section, Council on Federal and Military Medicine.</li> <li>o PHS member Executive Board Association of Military Surgeons of the U.S. (AMSUS).</li> <li>o Oversight of the Public Health Employee Assistance Program (PHEAP).</li> <li>o Professional focus for Chief Professional Officers (11 category disciplines).</li> <li>o Chief Advisor to ASH-SG health professional personnel issues and personnel policy actions.</li> <li>o Responsibility for Commissioned Corps Awards recommended by Boards.</li> <li>o Delegation of Commissioned Corps medical standards and determine final action regarding medically related personnel actions.</li> <li>o Oversight of bilateral agreement with 20 countries.</li> </ul> <hr/> <p>Dr. Richmond began to use the SG title more and more as time went on as he recognized its credibility with the health professions and the public.</p>	<p style="text-align: center;"><u>ASH*</u></p> <ul style="list-style-type: none"> <li>o Line authority over PHS agencies: <ul style="list-style-type: none"> <li>- Control of PHS budget</li> <li>- Supervises PHS Agency Heads</li> </ul> </li> <li>o Directs OASH Operating Division Heads in their myriad responsibilities and appoints task forces to advise ASH in action leading to policy.</li> <li>o Directs activities of all Deputy Assistant Secretaries of Health to assure uniform interpretation and implementation of policies.</li> </ul> <hr/> <p>The Deputy Assistant Secretary for Health-SG has uncertain and indefinite assignments.</p>

\* Two Individuals  
\*\* One Individual