

Therapist Professional Advisory Committee



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If you have information you would like to pass on, or have a question for TPAC please do not hesitate to contact your Field Representative.

<u>FIELD REPRESENTATIVE</u>	<u>AGENCY</u>	<u>EMAIL</u>	<u>Phone#</u>
Ms. Tina Bauer	IHS Northwest	Tina.Bauer@mail.ihs.gov	(406)-477-4422
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CDR Lou Iannuzzi	HRSA USCG	Liannuzzi@siuh.edu	(718) 226-6343
LCDR Michelle Jordan	Multi-Agency	mjordan@hrsa.gov	(301) 443-7037
LT Jeffrey Lawrence	IHS NM	JLawrence@abq.ihs.gov	(505) 552-5490
LCDR Cindy Melanson	HCFA	Cmelanson@hcfa.gov	(410) 786-0310
LT Jenevieve Neros	IHS AK	Jenevieve.neros@searhc.org	(907) 966-8312
LCDR Sue Newman	BOP WEST	snewman@bop.gov	(817) 413-3435
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LT Michelle Peterman	CMHS	Gatoram2@aol.com	202-645-7610
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Ms. Beth Solomon	NIH SLP	bsolomon@nih.gov	(301) 496-8831
LCDR Matt Taylor	BOP EAST	mtaylor@bop.gov	(978) 796-1000ext.4663

FUTURE TPAC MEETINGS:

The next TPAC Meeting will be on Friday, 27 JUL 2001 from 1000 – 1300 hours, EDT.

CDR Fultz will be chairing this meeting from Shiprock, NM. Future meeting dates are set for 28 SEP 2001 and 14 DEC 2001.

THERAPIST PROFESIONAL ADVISORY
COMMITTEE
MEETING MINUTES
29 MAY 2001

**THERAPIST PROFESSIONAL ADVISORY COMMITTEE
MEETING AGENDA
29 MAY 2001**

- I. CALL TO ORDER
- II. REVIEW AND ADOPTION OF AGENDA
- III. REVIEW AND ADOPTION OF PREVIOUS TPAC MINUTES
- IV. OPEN FORUM
 - A. Introduction of Special Guests
IHS Therapist Chief Consultant M. Duganne
 - B. Action Item Review J. Fultz
 - Senior Officers to Register as Mentors
 - Scientific Advisor Appointments
 - All Committee Chairs to Update the Web Page
 - Report on Respiratory Therapists
- V. OLD BUSINESS
 - A. Therapist Appointment Board Standards J. Fultz
- VI. NEW BUSINESS
 - A. TPAC Membership election Results J. Fultz
 - B. Field Representative Changes R. West
 - C. Executive Secretary Election J. Fultz
 - D. TPAC Membership Task Force J. Fultz
- VII. REPORTS
 - A. Chief Professional Officer C. Richards
 - B. Chairperson J. Fultz
 - C. Awards Committee G. Johnson
 - D. CCRF Committee G. Mead
 - E. Education Committee L. LaBranche
 - F. Fitness/Wellness Initiative Committee R. Parks
 - G. Recruitment and Retention Committee D. Aretino
 - Mentoring Task Force M. Smith
 - Recruitment for Therapist Category M. Melanson
 - Home Page K. Siegel
 - H. Strategic Growth Committee J. Hurley
 - I. Discipline Liaisons:
 - Audiology L. Simpson
 - Occupational Therapy R. Parks
 - Physical Therapy M. Smith
 - Speech Language Path B. Solomon
 - J. COA Therapist Representative R. Parks
 - K. COA Meeting Task Force B. Sellers
 - L. Newsletter D. Brueggemann
 - M. Junior Officer report C. Melanson/M Jordan
 - N. Field Representative Reports R. West

Therapist Professional Advisory Committee Meeting Minutes

Date: 29 MAY 2001

Time: 1700 – 1830 hours EDT

Location: 2001 COA Professional Meeting, Washington, DC

I. CALL TO ORDER:

Roll Call:

MEMBERS: CDR Jeffrey Fultz, Chair
LT Ron West, Executive Secretary
CAPT Dominick Aretino
CDR Nancy Balash (Toppenish, WA)
CAPT David Brueggemann
LCDR Bart Drinkard
CDR Lois Goode (Whiteriver, AZ)
CAPT Georgia Johnson (Baltimore, MD)
CAPT Leo LaBranche – **Proxy LT Ron West**
LT Grant Mead (Rockville, MD)
CAPT Rebecca Parks
LCDR Richard Shumway – **Proxy CAPT Mark Dardis**
Ms. Beth Solomon
LCDR Frank Weaver (Shiprock, NM)
CAPT Ivana Williams

CPO: CAPT Charlotte Richards

GUESTS: CAPT Becky Sellers (COA Meeting Rep)
CDR Karen Siegel (Home Page)
LCDR Eric Payne
CDR Martha Duganne (IHS Therapist Chief Consultant)
CAPT Mike Flyzik (Therapist Liaison OSG)
CDR Penny Royall
CAPT Jim Jones
CDR Terry Cavanaugh (Sitka, AK)
LT Jenevieve Neros (IHS AK Field Rep, Sitka, AK)

Signing on or coming in during the Meeting:

MEMBERS: CAPT John Hurley (Member, Shiprock, NM)
CAPT Mark Dardis (Member, Phoenix, AZ)

GUESTS: LCDR Michelle Jordan (Member elect, Field Rep., Jr. Officer Committee Chair)
LCDR Liza Figueroa (Guest, Phoenix, AZ)
LT Joseph Rasor (IHS AZ Field Rep, Phoenix, AZ)
CDR Susanne Pickering (Teleconference Coordinator)
CDR Michael Smith (Mentoring Rep)
LT Jeff Richardson (Guest, Sells, AZ)

II. REVIEW AND ADOPTION OF AGENDA:

The agenda was approved as written.

III. REVIEW AND ADOPTION OF PREVIOUS TPAC MINUTES:

The TPAC Minutes for 26 APR 01 were approved.

IV. OPEN FORUM

INTRODUCTION OF SPECIAL GUESTS:

CDR Martha Duganne, IHS Therapist Chief Consultant: She reported that she was recently appointed to this position replacing CAPT Mike Huylebroeck. She reported that this is a unique position available only to a handful of categories. The primary role of the IHS Chief Consultant is

to perform tort claim review, peer review, agency consultation and planning, and IHS Loan Repayment review. CDR Duganne reported that she is going to try to increase ties with the TPAC and promote communication. She reported that she will be the conduit for IHS Agency matters and will try to communicate regularly to the TPAC.

ACTION ITEM REVIEW:

All Senior Officers to Register as Mentors:

CDR Smith reported that there are now seven mentoring pairs matched with five mentors waiting in the database. She stated that the forms are on the website and can be downloaded, completed and faxed to her. CDR Smith performed a preliminary assessment of the pairs to address any problems or needs

DCP Listserve:

CDR Fultz encouraged all Commissioned Officers to sign up on the DCP Listserve at www.dcp.psc.gov Click on the "Services" icon and then click on "subscribe to the Listserve".

Science Advisor Appointments:

CDR Fultz reported that he and CAPT Richards have reviewed a short list of candidates to serve as advisors to the Secretary of the Department of Health and Human Services, Tommy Thompson. The names have been submitted and are awaiting approval. Those who are interested in being a Science Advisor should contact CAPT Richards.

All Committee Chairs to Update the Web Page:

CDR Siegel reported that she has been in contact with CDR Smith from Mentoring and CAPT LaBranche from the Education Committee and has updated their sections. CDR Fultz encouraged all committee chairs to regularly review their sections and to send updates to CDR Siegel. LT West requested that CDR Siegel act as a "Watchdog" so that the web page can keep current.

Report on Respiratory Therapists: **ATTACHMENT D**

CAPT Hurley reported that the attached document speaks for itself. He stated that there are still a number of questions to be answered and logistics to be worked out. He reported that there are three distinct levels of education and that there needs to be a formal written criteria for inclusion and exclusion. CAPT Hurley noted that Respiratory Therapists have a specialized practice that doesn't encroach on other disciplines. He felt that it shouldn't present a controversy in our category.

He recommended that since licensure is not a requirement for RT, that the entry level for the Commissioned Corps be set at a bachelors degree training in Respiratory Therapy with licensure in any state; RTs must also possess their disciplines highest level credential. He didn't know how to enforce this requirement for Civil Service employees who would also be counted as members of our category. CAPT Hurley reported that there are currently over 300 Civil Service Respiratory Therapists employed in the entire Federal Government. He stated that he is trying to break that number down to RTs in the PHS and RTs with bachelors degrees.

CDR Fultz requested that the Strategic Growth Committee find out these demographics so that the TPAC can make a decision on this issue by the next TPAC Meeting and initiate a position paper to be forwarded to DCP. CAPT Parks recommended that a bachelors degree be the entry level for both Commissioned Corps and Civil Service personnel to be included in the Therapists Category.

LT West commented that if the whole purpose behind the inclusion of RTs is the growth of the category, then the TPAC should be proactively seeking all potential professionals like Recreation Therapists, Chiropractors, and Athletic Trainers. CDR Fultz reminded PAC members that just because the TPAC makes recommendations doesn't mean that DCP is going to act on those

recommendations. He asked the members to consider other disciplines that might also fit into the Therapist Definition as stated in the TPAC P&P.

V. OLD BUSINESS

APPOINTMENT BOARD STANDARDS:

CDR Fultz received a written message from CDR Green at DCP. He reported that the Appointment Board Standards are in the final stages of approval, but will not be retroactive. He will have more specific information forthcoming. CDR Fultz made this an **action item** for the next TPAC meeting.

VI. NEW BUSINESS

TPAC MEMBERSHIP ELECTION RESULTS:

CDR Fultz thanked all those who submitted self-nomination forms. He reported that there were five vacancies and that there were four members who ran for re-election. All four of those members were selected to serve a second term. Those individuals are: CAPT LaBranche, CDR Goode, LT Mead, and CAPT Parks. The remaining vacancy went to LCDR Michelle Jordan. The two alternate positions were filled by LCDR Jessie Whitehurst Lief and LCDR Scott Gaustad. CDR Fultz congratulated the new members and alternates who will begin their 3 year terms 01 JUL 01.

FIELD REPRESENTATIVE CHANGES:

LT West reported that there has been one Field Representative change over that past month. The IHS New Mexico position was vacated. He thanked LT Shakira Strickland for her service in this position. LT West announced that LT Jeff Lawrence has been appointed to be the new IHS New Mexico Field Representative. He welcomed LT Lawrence and encourage him to fully represent those that he serves.

TPAC EXECUTIVE SECRETARY ELECTION:

CDR Fultz reported that LT West will completed his term as TPAC Executive Secretary 30 JUN 2001. He stated that to date there have been no self-nominations received. CDR Fultz requested that all members consider the opportunity to become TPAC Executive Secretary and to contact him if they are interested.

CDR Fultz commended LT West for a job well done.

TPAC MEMBERSHIP TASK FORCE:

CDR Fultz reported that there has been some concern from category members in the BOP that there has not been a BOP TPAC member in two years. The last BOP TPAC member was LT Grant Mead, who transferred to HRSA during his term. The BOP therapists comprise 20% of the Therapist Category. The agreed solution to this matter was to create a Task Force. The Task force will be headed by CAPT Charles McGarvey. He will select the members of his task force. They will investigate and make recommendations on this matter. The specific charge of the task force will be to determine if all agencies must be represented on the TPAC, and if they do, how this can be accomplished.

VII. REPORTS

CHIEF PROFESSIONAL OFFICER

CAPT Richards encouraged all officers to attend the Basic Officers Training Course (BOTC) and follow it up with the internet course Intermediate Officers Training Course (IOTC). There is an award ribbon for those who complete both courses. She thought it ironic that she will be attending the retirement course before she attends the BOTC.

CAPT Richards tasked the TPAC to implement a plan to keep the Therapist Healthy Lifestyle position in the OSG presently filled by CAPT Flyzik. She reported that it was originally organized to be funded by IHS for a two-year period. This will expire as of March 2002 if we do not plan now. The PHS is agency driven and she encouraged all category members to lobby their

agencies and chief consultants for backing. CAPT Flyzik reported that the OSG operates from people detailed from the agencies. CDR Fultz stated that he would put the issue of Healthy Lifestyles Coordinator on the agenda for the next CPO/PAC Chair Committee Meeting. CAPT Flyzik noted that the Medical Affairs Branch may be an avenue to sponsor or create a permanent position for the Healthy Lifestyles Coordinator in the OSG. LT Razor requested that a formal explanation be sent out to category members regarding the position, the reason why it was established, a position description, the current accomplishments, and where it is headed in the future.

CAPT Richards reported that the issue of Respiratory Therapists becoming part of our category started when ADM Davidson was asked to speak at the Respiratory Therapists National Convention. She reported that he approached her as CPO to find out some information. ADM Davidson assumed that they were already part of our category. He recommended that this might be one way to grow the category.

CAPT Richards reported that there is rumor that some of the disciplines in the HSO category are trying to separate and create a new medical service category or even unite with one of the smaller category.

CHAIRPERSON

CDR Fultz commended all TPAC Members with perfect attendance over the past year: CDR Fultz, LT West, CAPT Dardis, CAPT Hurley, CAPT Johnson, CAPT LaBranche, CAPT Parks, and LCDR Frank Weaver. He thanked them for their dedication.

CDR Fultz reviewed the accomplishments of the last year. He reported that a main goal was to improve communication. CDR Fultz commended LT West for his organization of the first ever category email roster. He commended CDR Karen Siegel for the creation and maintenance of the category web page. He added that the simplification and standardization of TPAC membership and subcommittee self-nomination forms have helped improve the communication by allowing the TPAC and subcommittee chairs to be aware of the interests of category members.

CDR Fultz stated that another goal was to enhance the participation in TPAC meetings and TPAC activities. He reported that 1-800 teleconferencing is now being used for all TPAC meetings thanks to CDR Pickering and CDC. This makes access to TPAC meetings available to all category members. Because of this, during the February 2001 TPAC meeting there were 42 category participants. This represents 1/3 of the category. CDR Fultz elaborated that the TPAC was the only PAC that made its COA PAC meeting available to callers via teleconferencing. He added that the TPAC created a task force to investigate new ways of communication. The technology industry is on the verge of enhancing real time video conferencing via the internet. When this occurs, LT Razor, who headed the task force, will keep the TPAC updated.

CDR Fultz recognized the great accomplishments of the Fitness/Wellness Initiative with the help of CAPT Mike Flyzik. He commended the efforts of CAPT Parks and the Fitness/Wellness Committee for supervising and directing the Therapist Category in the many different activities that have happened across the nation.

CDR Fultz expressed his pride in the TPAC's recruitment efforts. He boasted that there is no comparison to the other PACs. He stated that the TPAC's recruitment activities will serve as a template for the other categories. He recognized the exceptional efforts of LCDR Weaver as the IHS Recruited in his exploration of possible expansion opportunities. He also recognized the efforts of CDR Marylouise Ganaway for her work centrally as the DCP Placement Officer.

CDR Fultz reminisced that in the past year the TPAC has developed two new committees to better coordinate the TPAC's ongoing efforts. The CCRF Committee under the direction of LT Mead made strides in identifying the roles of therapists during deployment by the Office of Emergency

Preparedness. The Strategic Growth Committee under the direction of CAPT Hurley opened and explored new avenues for growth opportunities. They are leading the Therapist Category in a positive direction and are working as trailblazers by considering new ideas and possibilities for expansion. CDR Fultz reported that the Mentoring program has also made tremendous strides this past year. CDR Fultz directed that every new officer needs a mentor.

CDR Fultz recalled the ongoing necessary changes made to the TPAC Policy and Procedure Manual. He commended the efforts of TPAC Charter Review task force headed by CAPT LaBranche. This task force made numerous recommendations for making the TPAC P&P more specific. The task force's recommended revisions for the TPAC Charter were unanimously approved. The role of TPAC Field Representative has been revised and many of the Field Representative positions have been changed to allow more opportunity for TPAC service and communication

CDR Fultz reported that there have been two new category awards added over the past year. He commended the efforts of the Awards Committee headed by CAPT Johnson. The new awards are the Junior Officer of the Year Award and the Clinician of the Year Award.

CDR Fultz stated that over the past year that the TPAC followed up with a project started by CAPT Hurley. The category t-shirts were designed and printed and are now available to all category members. This t-shirt will allow the TPAC to be high profile and bring new interest and awareness to the Public Health Service.

CDR Fultz commended all persons who are demonstrating leadership outside of the TPAC. He noted that he only serves as the TPAC Chairperson, but is also the Chairperson of the CPO/PAC Chair Committee. LCDR Jordan currently serves as the Junior Officer Committee Chairperson. CAPT Parks serves as the national Treasurer of COA. Several officers serve as area COA officers. Many category members serve in positions for their national and state professional organizations. CDR Fultz encouraged continued service.

CDR Fultz thanked CAPT Sellers for her work on the Therapist Education Day at the national COA meeting. He commended her for putting together a program that will be of interest to many professionals.

CDR Fultz projected that for the next year that expansion needs to be a priority. As for the future of the Therapist Category, CDR Fultz encouraged the exploration of wellness centers and the role of each professional in the development of wellness centers. He stated that in the next year the TPAC should establish wellness center billets for category professions so that when the transition to wellness centers takes place the Therapist Category will have billets established. CDR Fultz encouraged the continuation of fitness activities and being leaders in the Healthy Lifestyles Initiative.

CDR Fultz closed by thanking all those persons who have served the TPAC over the past year.

AWARDS COMMITTEE: ATTACHMENT A

CDR Fultz reported that selections have been made for all four awards and those individuals will be recognized at the COA luncheon.

CCRF COMMITTEE: ATTACHMENT B

See Attachment

EDUCATION COMMITTEE:

The list of educational courses is posted on the web page. Slots are filling up fast.

FITNESS/WELLNESS INITIATIVE COMMITTEE:

CDR Fultz reported that the COA educational day is devoted to this topic. A video will be made of the presentations.

RECRUITMENT AND RETENTION COMMITTEE: ATTACHMENT C

Vacancies:

Agency	Vacancies Position	Location and Description
IHS	1 Staff PT	Anchorage, AK Jan/Feb 2001
	1 Staff PT	Whiteriver, AZ
	1 PT	Ft. Defiance, AZ
	1 Chief PT	Winslow, AZ
	1 OT	Chinle, AZ
	1 PT temp	Chinle, AZ
	1 Ped. PT	Part Time at Tuba City, AZ
	1 Chief PT	Keams/Polacca, AZ
	1 Chief PT	Crownpoint, NM
	1 OT	Shiprock, NM
Ft. Belknap	PT	Montana 406-353-3187
Sage Memorial	1 PT	Ganado, AZ
NIH	0	
CMHS	1 OT	Washington, DC
HCFA	www.hcfa.gov	
HRSA	www.hrsa.gov	
CDC	www.cdc.gov	
Multi-agency	DCP website	

Mentoring:

Reported as an Action Item.

Home Page:

Reported as an Action Item.

STRATEGIC GROWTH COMMITTEE: ATTACHMENT D

See Attachment

DISCIPLINE LIAISONS:

CDR Simpson, Audiology Discipline Liaison, No Report.

CAPT Parks, OT Discipline Liaison, reported that the Tri Services Deputy Committee Meeting for May was cancelled and there is nothing to report at this time.

CDR Michael Smith, PT Discipline Liaison, reported that she has nothing to report from the Quad Service Meeting.

Ms. Beth Solomon, SLP Discipline Liaison, No Report.

COA THERAPIST REPRESENTATIVE:

CAPT Parks reported that the COA is currently holding an election for board members. She encouraged everyone to vote. She stated that the Finance Committee which she chairs as Treasurer is going to meet with the new investment portfolio manager to review the current investment pathway and policies.

CAPT Parks reported that there is a new organization called the Commissioned Officers Foundation for the Advancement of Public Health (COF). They meet regularly and are made up of a group of distinguished retired admirals. ADM (Ret.) Jerry Michael Chairs this organization. She stated that

it is a non-profit organization with the purpose of helping the COA become financially independent.

CAPT Parks reported that there will be a Meeting of the Assembly this week. She will give the annual treasurer's report for the COA at that meeting.

COA MEETING TASK FORCE:

CAPT Sellers thanked those who helped organize the COA event this year and especially the Therapist Educational Day. She reminded those present about the individual paper presentations. She requested that the TPAC select another person to chair the COA Meeting Task Force for next year. The 2002 COA Meeting will be held April 21 – 25, 2002 in Atlanta, Georgia.

NEWSLETTER:

CAPT David Brueggemann reported that the newsletter was distributed. He apologized for the delay.

JUNIOR OFFICER REPORT:

LCDR Jordan reported that she met with CAPT Barror regarding the future of the Junior Officer Advisory Committee. She reported that the committee is working on its charter. She stated that the committee functions as a support for Junior Officers in all categories and to assist the PACs in Junior Officer issues. She invited all Junior Officers to participate in the meetings held on the third Friday of each month. She reminded all present that in the Public Health Service that Junior Officers are considered to be those individuals with the rank of O-4 and below.

FIELD REPRESENTATIVES REPORTS:

See Field Reports section on web page.

CLOSING ROLL CALL:

MEMBERS: CDR Jeffrey Fultz, Chair
LT Ron West, Executive Secretary
CAPT Dominick Aretino
CDR Nancy Balash (Toppenish, WA)
CAPT David Brueggemann
CAPT Mark Dardis (Phoenix, AZ)
LCDR Bart Drinkard
CDR Lois Goode (Whiteriver, AZ)
CAPT Georgia Johnson (Baltimore, MD)
LT Grant Mead (Rockville, MD)
CAPT John Hurley (Shiprock, NM)
CAPT Rebecca Parks
Ms. Beth Solomon
LCDR Frank Weaver (Shiprock, NM)
CAPT Ivana Williams
CPO: CAPT Charlotte Richards
GUESTS: CAPT Mike Flyzik
CAPT Becky Sellers
CDR Karen Siegel
LCDR Eric Payne
CDR Martha Duganne
CDR Penny Royall
CAPT Jim Jones
CDR Michael Smith
LCDR Michelle Jordan
LCDR Liza Figueroa (Phoenix, AZ)
LT Joseph Rasor (Phoenix, AZ)

CONCLUSION:

CDR Fultz concluded the meeting by thanking CAPT Dave Brueggemann for his participation and service on TPAC. He encouraged him to continue to serve the TPAC as a non-member. He remarked that the next TPAC meeting will be on 27 July from 1000 to 1300 hours EDT. Teleconferencing will be available. The tentative dates of 24 AUG and 26 OCT are no longer valid.

Respectfully Submitted: LT Ron West, TPAC Executive Secretary.

Concur: CDR Jeff Fultz, TPAC Chair.

Concur: CAPT Charlotte Richards, CPO Therapist Category.

TPAC Subcommittee Reports

- AWARDS COMMITTEE: CAPT GEORGIA JOHNSON – ATTACHMENT A
- EDUCATION COMMITTEE: CAPT LEO LABRANCHE – See Web Page
- CCRF COMMITTEE: LT GRANT MEAD – ATTACHMENT B
- FITNESS AND WELLNESS COMMITTEE: CAPT REBECCA PARKS – No report
- RECRUITMENT AND RETENTION: CAPT DOMINICK ARENTINO – ATTACHMENT C
- STRATEGIC GROWTH COMMITTEE: CAPT JOHN HURLEY – ATTACHMENT D
- COA MEETING TASK FORCE: CAPT BECKY SELLERS – No report

THERAPIST PROFESSIONAL ADVISORY COMMITTEE

AWARDS COMMITTEE
CAPT Georgia Johnson, Chair
18 May, 2001

1. The Therapist Category winners have been selected for 2001:
Therapist Junior Officer of the Year – LCDR Ron West
Therapist Clinician of the Year – LCDR Richard Shumway
Josef Hoog – LCDR Bart Drinkard
William Fromherz – CAPT Willis Trawick

2. Congratulations to these officers!!
Also, thanks to all who submitted nominations on behalf of your fellow officers.

3. I would like to thank the following individuals for serving on the various award committees this year:
CAPT Dominick Aretino
CAPT Mike Flyzik
CAPT Mike Hulybroeck
CAPT Jim Jones
CAPT Charles McGarvey
CAPT David Nestor
CAPT Charlotte Richards
CDR Jeff Fultz
CDR Susan Miller
CDR Karen Siegel
CDR Linda Simpson
Ms. Beth Solomon

CCRF Committee Report

I wanted to take this opportunity to speak to you all regarding the progress in the committee. As some of you may know, CDR Pickering, LCDR Gaustad, and myself have taken the initial responsibility of putting together a rough draft model for our categories involvement with CCRF. My thoughts regarding this process were to have the rough draft finished and supply copies to you all for additional comments and suggestions that would reflect the deployment criteria already established.

Some new CCRF information pertaining to this creation have come forward. I have been working closely with CDR Slepski and CAPT Babb regarding the new standards that are being put into place for the entire CCRF. These changes are as follows:

- Entry standards (height & weight) are being put into place.
- Fitness Standards (CAPT Richards talked briefly about these at the COA TPAC Meeting)
- FMRB (Field Medical Readiness Badge) qualifications have changed to become deployment qualified.
- On Line class/course requirements are in place and must be completed prior to any deployment or to stay on an active Ready Roster.
- Clinical Officers who are in Administrative Positions who desire involvement in CCRF will have to have at least 112 hours of documented clinical exposure per year. This is across the board on every discipline.
- Clinical Officers in Admin. Positions may be given an opportunity to back fill in a clinical position emptied by a Clinical Officer deployed on a CCRF mission. Thus building upon the clinical hours needed to be deployment qualified.
- Building a Reserve Officer's Roster of Therapist Officer's that are considered IRR.
- Maintaining existing Officer's qualifications so that you are not taken off the Ready Roster List.

These are some of the changes that have transpired while we have been working on our deployment manual. I welcome any comments that you may have.

CDR Pickering, LCDR Gaustad and I have still separated sections of the Therapist SOP Manual. This is still requiring a lot of development time and on top of everything else, we have had some difficulty conferencing among ourselves to push this further. I suspect with the upcoming summer months and regular duties that we will be meeting with some difficulty. Hopefully soon, the Manual will come to fruition and we will task other committee members to take on other development tasks. Right now, I believe that we are getting the gist of the content together and will continue the development.

Please feel free to contact me should you have any questions. Thank you.

Respectfully yours,

LT Mead

To: LT Ron West, TPAC Secretary
From: CAPT Dominick Aretino, Chair Recruitment and Retention Committee
Subj: Committee Report
Date: 23 May 2001

Enclosed please find the reports from the officers on this committee:

Mentoring: CDR Michaele Smith, NIH

CDR Smith reports that we now have mentors in our database. At present there are seven active mentor-mentee relationships with five mentors awaiting a match-up. We need to keep up our database so please fill out the application if interested.

Michaele has received positive comments in relationship to the program and appreciates everyone's participation. She would like to thank the following mentors for their part in the program: CAPT's Becky Parks, Becky Sellers and Dominick Aretino, CDR's Michaele Smith and Lois Goode, LCDR's Frank Weaver and Bart Drinkard.

Thank you CDR Michaele Smith for all of YOUR efforts.

Home Page: CDR Karen Siegel

The Therapist Home Page has been up and running for some time. CDR Siegel requests that you use the following address: <http://www.cc.nih.gov/rm/pt/tpac.htm>

The most recent information includes an updated section on the mentoring program which displays an application for mentors and mentees. Also periodic continuing education courses from CAPT LaBranche are now on the home page. Karen encourages you all to visit the web page and send her comments. This can be accomplished directly on the web page or via email karen_siegel@nih.gov

Thank you CDR Karen Siegel for the professionalism of this web site.

Recruitment: LCDR Mark Melanson

LCDR Melanson has contacted the therapists who have been boarded and medically cleared and gave them a list of all the current vacancies. The applicants were happy to receive a call apprising them of job prospects within PHS. There are currently 5 PT's and 1 OT awaiting placement.

Per Mark the vacancies are reported at the following facilities:

Shiprock, NM	OT
Chinle, AZ	PT (temporary 18 month position)
Chinle, AZ	OT
Tuba City, AZ	½time pediatric PT
Polacca, AZ	PT
Ft Belknap, MT	PT

Thank you CDR Melanson for keeping us current with vacancies and newly boarded therapists.

Respectfully submitted,

CAPT Dominick Aretino

Subject: Strategic Growth Committee Report

The Strategic Growth committee was formed with the intent of exploring new employment opportunities for the Therapist category. The size of the Therapist Category Commissioned Corps is approximately 106. Most of the positions are located in the Indian Health Service and are Physical Therapists. Job possibilities are very limited for Occupational Therapists, Audiologists, and Speech Therapists. With Native American self-determination eliminating some of the Indian Health positions, it becomes imperative that new environments for service are explored. Therapist category diversity provides many avenues for accomplishing the mission of providing a mobile health force meeting the health needs of the nation. Requests for staffing have been made to the therapist category regarding areas of unmet needs. In response to the above stated needs the Strategic Growth Committee was formed. Areas of exploration are summarized below.

Memorandum of Agreements

MOA/MOU documents have been used for securing agreements with various agencies. CAPT Hurley was working with Harry Marshal, from VA Rehab Services, and received favorable indications that this agency was interested in securing the services of Physical, Occupational and Speech Therapists as well as Audiologists. Working with CAPT Taffet from DCP an agreement was close at hand. With the recent directive from DCP regarding the Office of the Surgeon General's directive on mandatory sponsorship of agencies when providing staff to another agency, negotiations have been put on hold. CAPT Hurley discussed this issue recently with CAPT Skip Miller (Deputy Director of Personnel) and this directive is still in place. If a new employee can be brought into the PSC Branch, then opportunities for MOU/MOA expansion can be reinitiated. Recently, the VA hired a fully qualified Commissioned Corps applicant and Audiologist. Her supervisor is still willing to convert her to CC if we can re-establish MOU authority.

Exceptional Family Member Program

This DOD program provides medical services for families with medically challenged dependents overseas. Civilians now man this program that used to be staffed by active duty DOD personnel. Positions are available in America and Europe. CAPT Hurley has been in contact with CDR Kevin McGuinness who has been working on an agreement with the Tri-services for providing Therapists to this program. The tri-service coordinators have been very interested in the possibility of hiring CC officers.

Bureau of Indian Affairs

The Bureau of Indian Affairs also hires PT, OT, SP, and Audiologists and locally has expressed interest in establishing an agreement. This could be moved to the national level and provide multiple opportunities for expansion.

Uniformed Services Coordination

Reciprocal work arrangements with other Uniformed Services will increase awareness of therapist specialties and services available. Many DOD hospitals hire civilian contracted therapists as well as permanent fulltime civilian therapists. If the sponsorship criteria is lifted, this could be another enormous area for expansion. If the MOU moratorium is removed, contact with these facilities will be made.

Native American self determination

With many of the tribes turning to self determination and the 638 process, initial hiring and re-hiring of Commissioned Corps Officers provides the answer to unmet needs for both parties. The SGC committee is contacting IHS and tribal agencies identifying PT, OT, SP, and Audiology positions. We are finding multiple opportunities for expansion once these positions are identified.

Commissioned Corps Readiness Force

Improved coordination with the readiness force will demonstrate the diverse abilities of therapist category members. An extended database has been developed that not only lists the qualifying readiness force identifiers but other capabilities that therapists can provide. This information can be provided to the CPO in a timely fashion when a request or emergency is identified to the CPO. In-depth information regarding sub-specialties have been developed by TPAC and provided to the Emergency preparedness section.

Therapist Identification

Many civilian Therapist/Audiologists are unknown to our category. We are in the process of identifying and contacting these members regarding TPAC participation and membership activities. With increased civilian involvement, Commissioned Corps benefits will be recognized.

Commissioned Corps applicants

Many CC applicants have been fully qualified and medically cleared for duty. Sometimes these applicants are never contacted. The CC applicant gets frustrated by lack of contact and finds other opportunities for employment. We lose many potential CC applicants because of this. We need to contact and maintain good communication with these individuals. The Strategic Growth Committee will contact these applicants on a regular basis to further define their needs. We will also send them timely information regarding areas for employment.

To: TPAC Secretary
From: CAPT John T. Hurley
Date: 5-21-01
Subject: Strategic Growth Committee Report

Members:

CAPT John T Hurley	CAPT Georgia Johnson
CDR Nancy Balash	CDR Sue Miller
LCDR Mark Melanson	LCDR Frank Weaver
LT Joe Rasor	

Guest Speaker

Marilyn Rodriquez-Bowman, Director of Respiratory Therapy, NNMC

The SGC was tasked with answering the questions listed below. The information reported reflects information from SGC members, CPO, Internet sources and conference call discussions. The SGC also participated in a conference call with Ms Rodriquez-Bowman RT. This is a preliminary report for the May COA TPAC meeting.

Education

Respiratory therapists are required to complete either a one-year certificate program, a two-year associate's degree or a four-year baccalaureate degree. There are a few new Master degree programs available. Upon successful graduation they are required to take a competency exam, which lead to the Certified Respiratory Therapist credential (CRT) The Associates and Bachelors degree graduates are eligible to take a voluntary national exam, which, if passed, leads to the Registered Respiratory credential (RRT). With additional training and education the certificate level graduate can become eligible for the RRT exam.

Accrediting Agencies

National Board or Respiratory Care (NBRC Website)

The NBRC is a health certifying board, which was created to evaluate professional competencies of Respiratory Therapists. The primary purposes of the NBRC and its 31-member Board of Trustees are to “provide high quality voluntary credentialing examinations for practitioners of Respiratory Therapy and pulmonary function technology; establish standards to credential practitioners to work under medical direction; issue certificates to and prepare a directory of credentialed individuals; advance medicine by promoting use of respiratory care in treating human ailments; support ethical and educational standards of respiratory care; and, cooperate with accrediting agencies to support respiratory care education”.

American Association of Respiratory Care (AARC Website)

Network of 50 State organizations called Chartered Affiliates, and involves members in state and local activities. Members include Respiratory Therapists, Respiratory Technicians, Pulmonary Laboratory Technicians, Nurses, Physicians, Home Health Providers, Home medical equipment suppliers, and industrial sales representatives. This organization also administers scholarship and grant programs. The AARC regulates state requirements for continuing education and licensure.

There are approximately 300 accredited schools for RT in the United States. 100 schools graduate individuals at the certificate level and 200 schools graduate at the Associate or Bachelor degrees. In 2002 it will probably be required that to be eligible for the CRT and RRT examination and Associate degree will be required.

Licensure/Certification Requirements/ Universal or certain states

All graduates must complete the certification (CRT-Certified Respiratory Therapist) or registry (Registered Respiratory Therapist) exam, becoming board certified and maintain valid state licensure, when required. Not all states require licensure.

All qualified RT's must successfully complete a national exam and become board certified as a CRT or RRT to practice RT

A continued competency program for all individuals credentialed after July 1, 2002 will probably be implemented in 2002

Job Description of RT (From OP office of the Professions)

The practice of the profession of respiratory therapy, which shall be undertaken pursuant to the direction of a duly licensed physician, is defined as the performance of cardiopulmonary evaluation, respiratory therapy treatment techniques, and education of the patient, family and public.

Evaluation shall include the acquisition, analysis and interpretation of data obtained from physiological specimens, performing diagnostic tests, studies and research of the cardiopulmonary system and neurophysiological studies related to respiratory care.

Therapy shall include the application and monitoring of medical gases (excluding anesthetic gases) and environmental control systems, mechanical ventilatory support, artificial airway care, bronchopulmonary hygiene, pharmacologic agents related to respiratory care procedures, and cardiopulmonary rehabilitation related and limited to respiratory care.

Other areas of involvement are:

Extracorporeal Membrane Oxygenation (ECMO) and Extracorporeal Life Support (ECLS). ECMO involves the use of an artificial heart-lung machine to take over the function of those organs in patients whose heart or lungs are failing despite all other treatments. Using ECMO/ECLS allows the heart and lungs a chance to rest and heal, and without this technology the patients would die.

Tests and treatments involving heart and lungs or the use of mixed medical gases with O₂ (helox).

Hyperbaric chambers. The use of O₂ under pressure is effective for wound healing.

Stress testing. RT's are qualified and are becoming more and more independent in providing these tests with only an RN involved to dispense required medications.

Performing sleep studies for those patients who have sleep disorders.

EEGs and polysomnography.

Performing ECHOs.

Involvement in blood gas laboratories, which requires them to draw arterial blood, gases and analyzes them.

Step down units, so that less critical patients not well enough for regular ward care but not sick enough for ICU type care, are adequately addressed. RT's are also working in skilled nursing facilities (SNF).

Recognized Subspecialties

Certified Pulmonary Function Technician (CPFT)

Perinatal-Pediatric care (PPR)

Preliminary Appointment Board Standards Recommendation

Commissionable Profession? (At what level?)

According to Phil Needles the minimum standard for a Respiratory Therapist to be commissioned would be a bachelor's degree. If we move toward having Warrant Officers (apparently there have been discussions) then those with AA degrees could come in as Warrant Officers. Currently the 11 PHS professional categories are set by law (PHS Act). The first step to commissioning would be to develop

recommendations such as education, training, certification, etc. The recommendations could be developed through the PAC and sent forward in a memorandum from CAPT Richards to RADM Davidson.

Potential Impact upon Category: Preliminary Numbers

As of February 2000 there are 337 Civil Service Respiratory therapists. Numbers for PHS are not available but the SGC is currently canvassing the agencies to get a rough estimate of what that number would be.

References

American Association for Respiratory Care website, and gave 2 addresses, info@aarc.org and www.aarc.org.

Phone # for their examining board, the National Board for Respiratory Care, (913) 595-4200.

Direct link to RT job description: <http://www.opm.gov/fedclass/gso651.pdf>

All Federal class descriptions: <http://www.opm.gov/fedclass/>

Clinical Guidelines of RT: <http://www.muhealth.org/~shrp/rtwww/rcweb/>

I hope this information helps. The Strategic Growth Committee recommends that this information be disseminated to all interested therapists. We also recommend that after additional questions have been answered, and general consensus obtained, a TPAC position paper be initiated by the SGC for approval by the PAC

Thank you all for your input

John T. Hurley
Chairperson, Strategic Growth Committee