

# THERAPIST PROFESSIONAL ADVISORY COMMITTEE MEETING MINUTES

## 24 February 2006



Therapist Professional Advisory Committee		
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**THERAPIST PROFESSIONAL ADVISORY COMMITTEE  
MEETING AGENDA  
24 February 2006  
1200 EST**

I. CALL TO ORDER	CDR GAUSTAD	1200
II. REVIEW AND ADOPTION OF AGENDA	LCDR Dahl	1205
III. REVIEW AND ADOPTION OF PREVIOUS TPAC MINUTES	LCDR Dahl	1210
IV. GUEST SPEAKER, DR DORTHY SHANNON, PhD, SLP of CMS		1210-1240
V. REPORTS		
A. CHIEF PROFESSIONAL OFFICER	CAPT McGARVEY	1240-1310
B. TPAC CHAIR	CDR GAUSTAD	1310-1330
C. * ADMINISTRATION COMMITTEE CHAIR	LCDR DAHL	1330-1335
D. * INFORMATION MANAGEMENT CHAIR	CDR NEWMAN	1335-1340
FIELD REP COORDINATOR	CDR FIGUEROA	1340-1345
E. *READINESS COMMITTEE CHAIR	CDR SHAPIRO	1345-1350
F. * STRATEGIC PLANNING AND DEVELOPMENT COMMITTEE	LCDR BOLES	1350-1355
G. * PROFESSIONAL DEVELOPMENT CHAIR	CDR MANRIQUE	1355-1400
H. * THERAPIST CATEGORY LIAISON	CDR MARTINEAU	1400-1410
VI. OLD BUSINESS		
A. Action Items:		
1. TPAC Elections	CDR GAUSTAD	1410-1415
2. 2006 COA	LCDR GROGAN	1415-1420
3. Mental Health Provider Role	CDR GAUSTAD	1420-1425
VII. NEW BUSINESS		
A. Action Items		
1. Selection Process for Chief Clinical Consultant (CCC)	CDR GAUSTAD	1430-1435
2. Respiratory Therapist Task Force	CDR GAUSTAD	1435-1440
3. "Therapist Responder of the Year" Award	CDR GAUSTAD	1440-1450
VIII. OPEN FORUM FOR DISCUSSION	TPAC CATEGORY	1450-1500
IX. ADJOURN		

\* Committee chairs to report committee projects and/or new information as appropriate or defer to committee written reports to be viewed on the TPAC website.

**TPAC CALL IN PHONE NUMBER: 1-888-381-8510, PASS CODE: 87222. Future TPAC meeting dates: April 28, 2006, June 23, 2006.**

## Therapist Professional Advisory Committee Meeting Minutes

Date: 24 February 2006      Time: 12:00- 1500 hours EDT      Location: Teleconference

### **I. CALL TO ORDER: 12:00 PM EDT**

Roll Call:

<u>MEMBERS</u>	<u>TITLE/PROXY</u>	<u>AGENCY/OPDIV</u>
CDR Scott Gaustad	Chair	BOP/Springfield
LCDR Corey Dahl	Secretary	BOP/Carswell
CAPT Linda Hemingway	Not Present	BOP/Ft. Worth
CAPT Michelle Hooper		IHS/Oklahoma
CDR Nancy Balash		IHS/Yakama
CDR Bart Drinkard	CDR Gaustad	NIH
CDR Liza Figueroa		IHS/Phoenix
CDR Michelle Jordan		HRSA/Rockville
CDR Kathleen O'Neill-Manrique	CDR Gaustad	IHS/Polacca
CDR Eric Payne		BOP/Rochester
CDR Rita Shapiro		CMS/Baltimore
CDR Frank Weaver	LCDR Dahl	IHS/Shiprock
LCDR Terry Boles		FDA/Phoenix
LCDR Mike Faz	CDR Gaustad	IHS/Ft. Defiance
LCDR Sue Newman	LCDR Dahl	USDA
LCDR Tarri Randall		IHS/White River
<b>Ex-Officio Member:</b>		
CAPT McGarvey	CPO	NIH

<u>GUESTS</u>	<u>AGENCY/OPDIV</u>
CAPT Susanne Pickering	CDC
CAPT Karen Seigel	NIH
CDR Jeff Fultz	IHS
CDR Lois Goode	IHS
CDR Gary Shelton	IHS
CDR Ron West	IHS
LCDR Matthew Daab	IHS
LCDR Justin Feola	BOP
LCDR Laura Grogan	OFP
LCDR Monique Howard	CMS
LCDR Mark Melanson	CMS
LCDR Lorrie Murdock	IHS
LCDR Jeff Richardson	IHS
LT Brian Elza	IHS
LT David Engelman	BOP
LT Jessica Feda	BOP
LT Timothy Gordon	IHS
LT Thomas Schroeder	IHS
LT Alicia Souvignier	IHS
LT Jill Tillman	BOP
LTJG Yvonne Robison	BOP
LTJG Felipe Zamarron	BOP

### **II. REVIEW AND ADOPTION OF AGENDA:**

The agenda was reviewed and adopted a motion by CDR Payne and seconded by CDR Jordan

### **III. REVIEW AND ADOPTION OF PREVIOUS TPAC MINUTES:**

December 2005 meeting minutes were provided and approved via e-mail to all TPAC members. Minutes were posted to TPAC Web site in January 2006. CDR Payne moved to adopt the December 2005 meeting minutes; seconded by CAPT Hooper.

### **IV. GUEST SPEAKER(S): Dr. Dorothy Shannon, PhD, SLP**

#### **Topic: Outpatient Therapy Caps**

- Caps were initiated by the Balanced Budget Act of 1997. Although still in statute, they were not in effect due to moratoria in 2000-2002, most of 2003 and 2004-2005. The therapy caps went into effect again on January 1, 2006. On February 8, 2006, the President signed the Deficit Reduction Act of 2005 which authorized CMS to allow cap exceptions starting January 1, 2006 when the patient needs the services. Medicare contractors will post educational information on their websites.
- The limits apply to each beneficiary for outpatient therapy service in 2006 for each cap. One cap is for physical therapy (PT) and speech-language pathology (SLP) together and the other is for occupational therapy (OT) separately. The dollar amount of each cap in 2006 is \$1740.
- All Part A services are excluded from the caps. Outpatient therapy services billed by hospitals are not included in the limits either.
- For residents occupying a bed in a nursing home (or a portion of a nursing home) that Medicare certifies as a skilled nursing facility (SNF), Medicare will not always cover services from a hospital outpatient department after reaching the limit (due to consolidated billing). However, documented medically necessary services may qualify for exceptions from the caps (and be billable by the SNF).
- Claims for outpatient therapy that exceed the limits, and are not billed by an outpatient hospital are denied, unless they qualify for an exception. Denied services may be resubmitted to the contractor either automatically or with a request for exception (if not previously disapproved. If the beneficiary requests services above the limits that were not billed by an outpatient hospital, the provider could bill the beneficiary for the cost of the services. Rules unrelated to caps may influence the amounts that may be billed.
- Services provided over the cap have no benefit under the law. They are denied because there is no benefit. These "technical" denials make the beneficiary liable for the costs of services. Submit services above the cap with GY modifiers to obtain a denial that can be used with other insurers, unless they qualify for an exception.
- If services are denied, consider if further services are justified. Most therapy do not exceed caps. Check your records. Do they justify continued treatment? Can you devise a maintenance program? Can nurses, aides, or caretakers, help patient? Evaluate, if you must, to determine if there is sufficient justification for an exception. Consider the exceptions process.
- There are two kinds of exceptions: "Automatic" exceptions that allow the therapist to attest the service is medically necessary and apply a modifier to the claim without a request. "Manual" exceptions that require a request and approval of the contractor before a modifier may be added to the claim.
- If you expect a cap will be exceeded apply as soon as your plan of care indicates that the cap may be exceeded and you have sufficient documentation to justify the exception. Do not apply routinely for all services.
- Submit a request for a specific number of treatment days, not to exceed 15. Requests for exception for PT or SLP services are both requests for exception to the PT/SLP cap. Exception for OT services applies to the OT cap. Apply and justify disciplines separately. Approval of an exception for PT services does not imply approval for exception for SLP or OT services.
- Beneficiaries: Call 1-800-MEDICARE, or the office where services were furnished. Those who furnish services: Call the Medicare contractor (carrier or intermediary) who pays your claims. Contractors and others who have no Medicare contractor: Call the nearest Medicare Regional Office. Regional Offices may contact the Central Office if they cannot resolve the question.

## V. REPORTS

### A. CPO Report

CAPT McGarvey thanked CDR Gary Shelton and CAPT Karen Siegel for updating the category profile. Refer to the CCMIS web site for the information.

- The CPO Board met with the SG and Deputy SG and presented concerns and objection to implementing the "Three and Freeze" proposal this year. They have asked to suspend the proposal. There may be notice in the next couple weeks if it will be implemented.
- The "3-H" proposal will be on a future board agenda. Nothing has changed since the original CPO Board report with concerns.
- Five transformation groups are meeting on a weekly basis and finalizing reports. The reports will be presented to DHHS leadership and the Surgeon General on 2 March. Each group chair will be given twenty minutes to summarize their findings.
- Therapist Category readiness stands at greater than 80%.
- The promotion boards will meet in the near future.
- The chiropractor issue is being revisited. In the next month or so another response to congress will be written.
- The White House report on Hurricane Katrina mentioned the USPHS Commissioned Corps. It proposes legislation to allow the Surgeon General to be in charge of health response during natural disasters. <http://www.whitehouse.gov/reports/katrina-lessons-learned/appendix-a.html>
- The Occupational Therapist deployment role is now on the OFRD web site.

Q & A: CDR Gaustad asked if the new Field Medical Readiness Badges have been awarded yet. CAPT McGarvey stated they have not. He will contact RADM Babb for more information.

- CDR Fultz asked when congressional hearings will begin on commissioning chiropractors in the USPHS. CAPT McGarvey did not know the specific date.

### B. TPAC Chair Report

CDR Gaustad thanked the chairs of all committees and subcommittees for their work.

- CDR Newman and CDR Shapiro have completed and submitted reports for the Civil Service Task Force and Mental Health Provider Role Task Force respectively. Please refer to attached reports (G and F) in the meeting minutes.
- The Crisis Response Service Award has been approved for officers deployed for more than seven days. Check in PIR for notation of CRSA if you have deployed. It should be present for promotion boards.
- Officers should refer to the TPAC web site for the Policy and Procedure to describe how the TPAC Chair and TPAC Committee Chairs are chosen.
- The IHS Chief Clinical Consultant is appointed by the IHS Chief Medical Officer. The appointee may be civil service or commissioned corps.
- Officers should check with their local uniform authority for questions about clinical uniforms worn at work (scrubs).
- The PAC Board met yesterday to make recommendations for changes to the benchmark cover page. Changes may be made between now and May on wording.
- The category Policy and Procedure Manual will be sent to the PAC Board in the very near future.
- Officers cannot apply to detail assignments if they have not completed the probation period in their agency. Newly appointed officers are not eligible either. An agreement between the USMS, DHS, BOP and USPHS allows the only exception.
- CDR Gaustad asked CDR Payne to report on his recent deployment to the Gulf Coast. CDR Payne reported he recently returned from Louisiana in which the DHHS is running three clinics in three state parishes. The number of patients using the free clinics and pharmaceuticals ranged from 5-10 a day to 130 a day, depending on the clinic. Issues remain such as reestablishing a viable health care system in the area and trying to

coordinate with non-profit organizations to run the clinics and local and federal authorities. CDR Payne reported therapists fit well in the liaison role.

#### **(Committee reports provided as attachments C – G)**

**C. Administration Committee:** LCDR Dahl reported the solicitation of self-nomination forms for TPAC membership has been completed. The official ballot will be submitted to TPAC members by 1 March.

LCDR Dahl also announced he is resigning as Therapist Category Associate Recruiter Program Lead. Any officer interested in the position should email LCDR Dahl to express their interest.

**D. Information Management Committee:** LCDR Newman was not present. LCDR Dahl reported the Civil Service Participation Task Force has completed its work and submitted its report to CDR Gaustad (Attachment G). **Field Rep Coordinator:** CDR Figueroa reported a new category roster will be sent out soon and asked that when officers send email they should use the new roster. CDR Figueroa stated that when reports are submitted to field reps beyond the deadline, information contained within will be placed on the next field rep report. She asked when reporting anticipated position openings, a point of contact and specialty should be noted. CDR Figueroa reported there will be a new field rep for the multi-agency position. The full report is contained in the Information Management Committee report.

**E. Readiness Committee:** CDR Shapiro reported the Therapist Category currently stands at 80% readiness. She reminded officers a readiness checklist is present on the TPAC web site. Only one other category has a greater readiness percentage among their officers.

**F. Strategic Growth Committee:** LCDR Boles reported ten applicants for the Commissioned Corps are in various stages of the process including two civil service conversions. He reiterated that LCDR Dahl is resigning as Associate Recruiter Program Lead and the position is open for volunteers. LCDR Boles congratulated CDR Shelton on his efforts to update the category profile. LCDR William Pearce was named COSTEP Subcommittee Chair. A sample thank you letter for COSTEP participants has been included in the TPAC web site. LCDR Boles reported nine individuals are participating in the IHS scholarship program. CDR Jessie Whithurst-Lief was named the Appointment Standards Committee Chair.

**G. Professional Development Committee:** Defer to report. CDR Gaustad reported for CDR O'Neill-Manrique that a career guide for officers is being developed by OCCO and may be available soon.

**H. Therapist Category Liaison:** CDR Martineau not present. No report.

#### **VI. OLD BUSINESS**

TPAC Elections: CDR Gaustad stated the TPAC has officially concluded its call for self-nominations for TPAC membership. The ballot will be sent out soon.

2006 COA: LCDR Grogan stated the final agenda has been completed and will be published on the COA web site. The all-category event will be held in the Colorado History Museum with a catered dinner and dancing for \$40.00 per person. Reservations are needed for the event. Officers may register for the event on the Commissioned Corps web site. LCDR Grogan asked for suggestions for the category event.

Mental Health Provider Role: CDR Shapiro reported the task force completed its work and submitted its report to CDR Gaustad (Attachment F). CDR Shapiro stated the task force found occupational therapists are the only discipline in the Therapists Category qualified to deploy in a mental health provider role. Officers with further questions should contact CDR Gaustad.

## **VII. NEW BUSINESS**

Selection Process for Chief Clinical Consultant: CDR Gaustad reported chief clinical consultants are appointed by an agency chief medical officer. Appointees may be civil service or commissioned officers.

Respiratory Therapist Task Force: CDR Gaustad stated a white paper is being prepared for presentation to the PAC Board. CDR Fultz thanked his task force members: CAPT Hemingway, CDR West, LCDR Randall, and LT Souvignier.

Therapist Responder of the Year Award: CDR Gaustad reported the Responder of the Year Award is not a category award. He stated a category responder award may be something to consider in the future but needs to be presented to RADM Babb for consideration first. CDR Gaustad stated the responder of the year has been chosen and will be named at the COA meeting.

Category Profile: CDR Gaustad stated the category profile has been updated after three years. In order to have it updated on a regular basis officers are encouraged to send information to CDR Shelton and/or CDR Figueroa (Field Rep Coordinator) as needed.

## **VIII. OPEN FORUM**

CDR Gaustad proposed extending the Award Subcommittee mission beyond its current role. He suggested possibly developing an award template which includes Commissioned Corps honor awards in order to expedite the award process. CDR Balash asked what could be done to assist processing awards. CDR Gaustad proposed making this issue an action item for the next meeting.

CDR Balash stated the PAC awards nomination period closed at the end of February. The judges for awards will be randomly selected. Some awards are open to civil service and commissioned corps, while some are exclusive to each type of service. Please contact CDR's Gaustad and Balash with suggestions for changes to the award process. CDR Balash will contact the OSG to clarify questions with the award process.

CDR Gaustad reported CDR Jessie Whitehurst-Lief will not continue to serve as a TPAC Member. She will remain as subcommittee chair and category historian.

CDR Gaustad reported CAPT McGarvey had asked him to perform a category-wide survey concerning the use of manipulation by therapists. He thanked everyone who provided information. Among his findings, CDR Gaustad stated 70% of Commissioned Corps officers felt competent enough to perform manipulations.

JUNIOR OFFICERS: All junior officers are encouraged to join the Junior Officer List serve: <http://list.nih.gov/archives/joag.html>

Therapist website: <http://www.cc.nih.gov/rm/pt/tpac/htm>

## CLOSING ROLL CALL

CONCLUSION: Meeting adjourned at 14:30 Eastern Time

**Next TPAC meeting: 28 April 2006; call in number: 1-888-381-8510, pass code 87222.**

Respectfully Submitted:           LCDR Corey Dahl, TPAC Executive Secretary  
Concur:                                CDR Scott Gaustad, TPAC Chair  
Concur:                                CAPT Charles McGarvey, CPO Therapist Category

**ATTACHMENT A: ADMINISTRATION COMMITTEE REPORT**

**ATTACHMENT B: PROFESSIONAL DEVELOPMENT COMMITTEE REPORT**

**ATTACHMENT C: INFORMATION MANAGEMENT COMMITTEE REPORT**

**ATTACHMENT D: STRATEGIC GROWTH COMMITTEE REPORT**

**ATTACHMENT E: READINESS COMMITTEE REPORT**

**ATTACHMENT F: MENTAL HEALTH PROVIDER TASK FORCE REPORT**

**ATTACHMENT G: CIVIL SERVICE TASK FORCE REPORT**



**ATTACHMENT A: ADMINISTRATION COMMITTEE REPORT**

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**MEMORANDUM**

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**TO:** CDR SCOTT GAUSTAD, TPAC CHAIR  
**FROM:** LCDR COREY DAHL, ADMINISTRATION COMMITTEE CHAIR  
**DATE:** 2/24/06  
**RE:** ADMINISTRATION COMMITTEE REPORT, FEBRUARY, 2006

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**Finance Subcommittee Report, CDR Ron West, Chair**

- Nothing to report.

**TPAC Process Subcommittee, CAPT Rebecca Parks, Chair**

Charter Review and Policy & Procedure Manual Review Task Force

CDR Eric Payne, Chair

- The P&P Manual will be edited and sent to the TPAC after the review by the TPAC Chair is completed.
- The TPAC Charter edits will be completed so it will comply with the latest model charter release. The goal for completion is by the April TPAC meeting.

**COA Meeting Planning, LCDR Laura Grogan**

The Therapist Category Day agenda has been completed. Agendas for the 2006 U.S. Public Health Service Professional Conference are now available for all 11 professional categories. Visit [www.coausphsconference.org/agenda.cfm](http://www.coausphsconference.org/agenda.cfm) to get all the details on the Category Day (May 2) agenda and on the rest of the conference, May 1-4, at the Adam's Mark in Denver, Colorado.

**Member Elections Task Force**

LCDR Corey Dahl, Chair

- The solicitation of self-nominations for TPAC membership has been completed.
- The election ballot will be sent to TPAC members by 1 March.

## **ATTACHMENT B: PROFESSIONAL DEVELOPMENT COMMITTEE REPORT**

DATE: Feb 22, 2006

To: CDR Scott Gaustad, TPAC Chair  
LCDR Corey Dahl, TPAC Executive Secretary

From: CDR Kathleen O'Neill-Manrique, Professional Development Committee, Chair

Re: Professional Development Committee Report  
Therapist Professional Advisory Committee  
24 Feb 2006 Meeting

### **Education Subcommittee:**

Chair: LCDR Tarri Randall

Members: LCDR Jeff Richardson, LCDR Jon Schultz, LT Brian Elza, LT Felipe Zamarron,  
LT Jessica Fedra, LCDR Jeff Lawrence, LTJG Carlos Estevez, LT Dean Trombley,  
LCDR Henry McMillan

- The subcommittee met on January 23 to explore and discuss the feasibility of creating a “best practices” section on the TPAC web site. The purpose of the section would be to educate therapist officers as well as other health professions about our “best practices”, recognized specializations, proficiency and advanced training for the respective disciplines. The committee requests the TPAC to review and comment on a draft survey (attached) before it is dispersed to the category.
- Education postings continue on the TPAC website.

### **Mentoring Subcommittee**

Chair: CDR Michaele Smith

Members: CAPT Rebecca Parks, LCDR Schultz

- There has been a steady flow of young officers requesting mentorship.
- Plans are to review and update of the database soon
- LCDR Schultz has requested to work with me in this area

### **Awards Subcommittee:**

Chair: CDR Nancy Balash

Members: CDR Scott Gaustad, CDR Lois Goode

- This years TPAC category award nominations due 2/28/06- please refer to the TPAC website for nomination procedure and criteria.

## **Promotion Preparation Committee**

Chair: CDR Michele Jordan

Members: CDR Nancy Balash, CDR Ron West, CDR Kathleen Manrique

- Minor changes made to the CV, Cover Page to reflect the verbiage used in the OS, ROS documents. Posted to the web site

## **Retirement Recognition Subcommittee**

Chair: LCDR Julia Woodard

Members: CDR Shapiro, CDR Sue Newman, CDR Ron West, CDR Jean Bradley, CDR Lois Goode

- LCDR Woodard continues to be available for the Retirement planning committee for the annual conference- no current action or information to report on the COA proposed retirement ceremony.
- No therapists retiring this year- at this time.

## **Career Development Committee- OCCO**

- CDR Manrique TPAC representative, CDR Jordan alternate
- Therapy training matrix completed and submitted to CDR Schaeffer- Thank you to the officers who assisted at short notice with reviewing the matrix and providing input and guidance. (attached)
- Continued bimonthly meetings odd, as well as even bimonthly work groups meeting-

This Concludes the Professional Development Committee Report  
CDR Kathleen O'Neill-Manrique

## **Education Subcommittee Survey**

The TPAC Education Subcommittee requests your assistance in gathering information regarding your area of practice. The acquisition of this information will be used to provide a resource and stimulant for career development on the TPAC web page. The committee aspires to provide a list of potential board certifications, advanced training, or any other additional certifications for each discipline. Also, we hope to provide a list of quality Internet resources for clinical practice as well as continuing education opportunities. Thank you.

Do you hold any board certified specialties, advanced training or any other specialty care certifications? If yes, please list them and the certifying organization.

Do you participate in any clinical special interest activities such as journal clubs, study groups, interest groups, etc? If yes, please list them.

Are there any internet resources, or other means, that you frequently access for clinical pearls? If yes, please list them.

Have you attended any continuing clinical education that you would highly recommend? If yes, please list them. (Consider specifically those courses relevant to evidence based practice.)

## **CATEGORY/ CAREER TRACK NEEDS: TRAINING**

**Category/:** **Therapists**

**Sub-Committee Representative(s):** **CDR Kathleen O’Neill-Manrique**

### **Directions:**

1. In Column 1 of the table below, please list competencies or career development “steps” specific to your Category (with consideration given for the career tracks of Clinical, Applied Public Health, and Research as applicable) to meet the needs for a 20-30 year career.
2. The second and third columns should designate, respectively, educational programs/resources necessary to provide identified competencies/steps, and the staffing necessary to coordinate the activities identified for the process listed in column 1.

The boxes in the table will expand to receive the information you supply. Please strive to be clear yet brief.

The inputs from your category will be compiled and coordinated (by CDR Schaeffer) with competencies and training to be provided through Central Corps Training functions (most likely including elements from OCCO and OFRD) which will address topics of Basic, Intermediate, and Senior-level Officership/ Leadership/Management/Readiness training, Flag Officer Training, and Officer Pipeline training (e.g. COSTEP, Early Commissioning, etc.). ***You are expected to seek input from officials in your Category (PAC, CPO, Agency professional discipline chiefs).***

This should be completed for needs that would arise from a Secretarial Decision to immediately implement a mandatory 2- week Call to Active Duty BOTC, and to develop and implement other centralized, category, and agency-specific Training and Career Development programs.

Please provide your input to CDR James Schaeffer, OCCO/ Career Development Officer ([james.schaeffer@hhs.gov](mailto:james.schaeffer@hhs.gov) and (240) 453-6064) by COB on Wednesday, 01 February.

	<b>1. PROCESS: Category Specific Competencies or Career Development stages (include variations for Clinical, Applied Public Health, and Research Tracks if possible)</b>	<b>2: RESOURCES: What programmatic resources are needed to provide these (funding, IT resources, materials, out-of-service training, etc.)?</b>	<b>3: STAFF: What Staffing is Needed @ Category/Agency Levels to Coordinate the Activities Identified in the Process</b>
<b>Basic (0 – 2 Yrs.)</b>	<p style="text-align: center;"><b>Clinical:</b></p> <ol style="list-style-type: none"> <li>1. Therapy category mentor- assigned</li> <li>2. BOTC</li> <li>3. Independent Officer training course</li> <li>4. CME for clinical specialty</li> <li>5. Begin to explore areas of specialization, certification, advanced study</li> </ol> <p style="text-align: center;"><b>Research:</b></p> <ol style="list-style-type: none"> <li>1. 1,2,3,4 above</li> <li>2. Agency specific training</li> <li>3. Training in research design, ethics, statistical analysis</li> <li>4. NIH Therapy Department Clinical Research and Training Program for Post Graduates, Academicians and Students <a href="http://www.cc.nih.gov/rm/pt/educ.htm">http://www.cc.nih.gov/rm/pt/educ.htm</a></li> <li>5. IT software applications training</li> <li>6. Research mentor</li> </ol>	<ol style="list-style-type: none"> <li>1. Funding to attend BOTC</li> <li>2. IT support for internet connection for IOTC, and OFRD training modules or development of CD ROMs to be used in areas where internet is not available or unstable. (Remote IHS areas and overseas areas may not have internet dial up connections.)</li> <li>3. Funding for CME-</li> <li>4. <b>Tuition Assistance-</b> available throughout career <a href="http://www.military.com/Resources/ResourcesContent/0,13964,32879,00.html">http://www.military.com/Resources/ResourcesContent/0,13964,32879,00.html</a></li> </ol> <p style="text-align: center;"><b>Research</b></p> <ol style="list-style-type: none"> <li>1. 1,2,3,4 above</li> <li>2. Professional time/Station leave opportunities to maintain clinical competencies</li> </ol>	<ul style="list-style-type: none"> <li>• <b>Career Staff Officer at Headquarters level for Category- “Detailer” Corps wide USPHS perspective on career advancement- able to integrate Force Management concepts for the good of the officer and the Corps.</b></li> <li>• <b>One Agency Career Advisor – Agency specific perspective- able to identify the needs of the agency and the career progression of the Therapy Officer within the Agency</b></li> <li>• <b>Training Coordinator/Advisor Officer at OCCO- Up to date on the USPHS mission requirements and how training for the Therapist Category can meet those needs.</b></li> <li>• <b>IT support staff- to allow for internet access resources in remote, rural areas, CD ROMs for training modules, video</b></li> </ul>

	<p style="text-align: center;"><b><u>Applied Public Health</u></b></p> <p>1. 1,2,3,4 of clinical  1. Complete training and demonstrate skills in front line staff “Core Competencies for Public Health Professionals” in the 10 Essential Public Health Services as adopted by the Council on Linkages between Academia and Public Health Practice.  (<a href="http://www.trainingfinder.org/competencies/list_levels.htm">http://www.trainingfinder.org/competencies/list_levels.htm</a>)  (<a href="http://www.trainingfinder.org/competencies/background.htm">http://www.trainingfinder.org/competencies/background.htm</a>)  <b>(This may also be added if space permits:</b>  Responsibilities may include basic data collection and analysis, fieldwork, program planning, outreach activities, programmatic support, and other organizational tasks.)</p>	<p style="text-align: center;"><b><u>Applied Public Health</u></b></p> <p>1. 1,2,3,4 above  2. Funding for governmental and/or non-governmental public health and leadership training as appropriate to meet Agency and USPHS needs.  3. Professional time/Station leave opportunities to maintain clinical competencies</p>	<b>broadcasts</b>
<b>Intermediate (5 Yrs.)</b>	<p style="text-align: center;"><b><u>CLINICAL</u></b></p> <p>1. Leadership/Management course- Intermediate  2. “Squadron Officer School” specific to the needs of the USPHS developed by the Commission Officer Training Academy- both in residence and</p>	<p><u>Relevant to all tracks:</u></p> <p>1. CME funding  2. Central funding to allow for in residence Doctoral training  3. Agency/duty station approval for extended clinical training days when participating in interagency, Military</p>	

	<p>correspondence coursework  <a href="http://sos.maxwell.af.mil">http://sos.maxwell.af.mil</a></p> <p>3. US Army-Baylor University Physical Therapy Doctoral Program- in residence</p> <p>4.US Army-Baylor University Physical Therapy Post Doctoral Short Courses  <a href="http://www.baylor.edu/graduate/pt/index.php?id=28051">http://www.baylor.edu/graduate/pt/index.php?id=28051</a></p> <p>*Doug Kersey Neuromuscular Skeletal evaluation course</p> <p>*Joint Operations Deployment Course</p> <p>4. Defense Medical Readiness Training Institute <a href="http://www.dmrta.army.mil">www.dmrta.army.mil</a></p> <p>*Advanced Burn Life Support</p> <p>*Combat Casualty Care Course</p> <p>*Homeland Security Medical Executive Course</p> <p>*Joint Operations Medical Managers Course</p> <p>*Military Medical Humanitarian Assistance Course( USUHS <a href="http://www.usuhs.mil/pediatrics">www.usuhs.mil/pediatrics</a> )</p> <p>5. CME – Discipline specific and</p> <p>*COTA/USPHS sponsored coursework- similar to Army and Navy Knowledge online-  <a href="http://www.usarmy.mil/suite/login/welcome.html">www.usarmy.mil/suite/login/welcome.html</a></p> <p>6. Specialization – Board Certification</p> <p>7. Begin to explore/research advanced graduate coursework</p> <p>8. Uniformed Service University of Health</p>	<p>sponsored CME</p> <p>4.Sponsorship by Headquarters/Agency/Op Div for Post Entry Level/Graduate coursework, Fellowships, Advanced certification clinical course</p> <p>5. Funding for management/officership coursework</p> <p>6. Funding for CME- to maintain clinical competencies</p> <p>7. Professional time opportunities to maintain clinical competencies, pursue graduate coursework</p>	
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Science- graduate degree work  
9. Online advanced programs, e.g., M.S.,  
OTD, MPH, DPT  
10. OFRD Advance course

**RESEARCH**

1. Leadership/ Management/ Officership  
(see clinical above)
2. CME- to maintain clinical competency
3. Continue advanced degree, Masters with  
thesis, research emphasis  
CME to improve research skills: e.g.,  
data analysis
5. Develop network of professional interest  
to support research activity

**Applied Public Health**

1. Complete training and demonstrate skills  
in senior level staff “Core Competencies for  
Public Health Professionals” in the 10  
Essential Public Health Services as adopted  
by the Council on Linkages between  
Academia and Public Health Practice.  
([http://www.trainingfinder.org/competencies/list\\_levels.htm](http://www.trainingfinder.org/competencies/list_levels.htm))

**Applied Public Health**

1. Funding for governmental and/or  
non-governmental public health and  
leadership training as appropriate to  
meet Agency and USPHS needs.



	<p>(<a href="http://www.trainingfinder.org/competencies/background.htm">http://www.trainingfinder.org/competencies/background.htm</a>)</p> <p><b>(This may also be added if space permits:</b>          Demonstrate increased technical knowledge of principles and practices in areas such as epidemiology, program planning and evaluation, data collection, budget development, grant writing, and others. Responsible for coordination and/or oversight of smaller projects or programs.)</p>		
<p><b>Advanced (8+ Yrs.)</b></p>	<p style="text-align: center;"><b><u>CLINICAL</u></b></p> <ol style="list-style-type: none"> <li>1. Maintain CME and Board Certifications/Specializations</li> <li>2. Matriculate and begin work on advanced degree- within discipline or MPH, MBA, HMA</li> <li>3. In residence Fellowship in Therapy Specialization</li> <li>4. Leadership/Management Advanced Coursework</li> <li>5. Advanced Officership courses- COTA USPHS developed in Residence and or correspondence</li> <li>6. National Defense University  <a href="http://www.ndu.edu">www.ndu.edu</a>            Joint Forces Staff College</li> </ol>	<ol style="list-style-type: none"> <li>1. Funding for CME, advanced degree coursework</li> <li>2. Assistance with IT resources especially when stationed in remote rural areas with limited Local IT resources.</li> <li>3. In residence Long Term training</li> </ol>	

[www.jfsc.ndu.edu](http://www.jfsc.ndu.edu)

\*Homeland Security Planners course  
School for National Security Executive  
Education [www.ndu.edu/snsee/](http://www.ndu.edu/snsee/)

**Research**

1. 4,5,6 above
2. Begin work on PhD coursework
3. CME to maintain clinical competencies
4. Maintain/Expand network of professional interest to support research activity

**Applied Public Health**

1. 4,5,6 above
1. Complete training and demonstrate skills in senior level leadership and management for “Core Competencies for Public Health Professionals” in the 10 Essential Public Health Services as adopted by the Council on Linkages between Academia and Public Health Practice.  
([http://www.trainingfinder.org/competencies/list\\_levels.htm](http://www.trainingfinder.org/competencies/list_levels.htm))  
(<http://www.trainingfinder.org/competencies/background.htm>)  
**(This may also be added if space permits:**  
Responsible for major programs or functions of an organization. Demonstrate

**Research**

1. Funding for PhD degree coursework
2. Opportunity for in residence long term training

**Applied Public Health**

1. Funding for governmental and/or non-governmental public health and leadership training as appropriate to meet needs of Agency and USPHS.

	<p>proficiency in program development, program implementation, program evaluation, community relations, writing, public speaking, managing timelines and work plans, presenting arguments and recommendations on policy issues. Demonstrate advanced skill or expertise in a public health discipline such as biostatistics, environmental health, epidemiology, health policy and management, or social and behavioral science.)</p>		
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**ATTACHMENT C: INFORMATION MANAGEMENT COMMITTEE REPORT**

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**MEMO**

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**DATE:** 2/21/06

**TO:** CDR SCOTT GAUSTAD, TPAC CHAIR

LCDR COREY DAHL, TPAC SECRETARY

**FROM:** SUE NEWMAN, PT, TPAC INFORMATION MANAGEMENT CHAIR

**RE:** TPAC INFORMATION MANAGEMENT REPORT

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**I. Web Page Subcommittee, CAPT Karen Siegel, Chair**

-The following have been updated or added on the Therapist's Web Site:

Posted December vacancy list

Updated TPAC membership list

Updated coin order form

Posted call for volunteers and modified x3

Changed promotion preparation to subcommittee under career development

Changed IHS subcommittee contact info

Posted Dec field report

Posted COA '06 info

Posted assimilation info

Posted Dec TPAC minutes

Added new subcommittee under strategic planning

Updated contact info for transferring officer's long term training info

Posted Jan vacancy list

Added appt standards subcommittee to site map and added chair

Added Mckenzie C to course listing

Added readiness tips

Posted new category award criteria for 2006

TPAC field report for February

Updated category profile has been posted and placement has changed to the Strategic Growth Committee

As always, I would like to thank all the therapists who contributed material to the site and appreciate those who transferred and the committee chairs for remembering that contact info on the website also needed to be updated. The web page is only as good and as accurate as the information that I receive so thanks to all.

A sample thank you letter to COSTEP participants courtesy of the JOAG was posted under the COSTEP subcommittee of the Strategic Development Committee at the request LCDR Richardson.

I have done an initial check of my work and everything appears in order, but if those requesting changes could also double check to make sure everything is in order I would appreciate it.

The main site is at <http://www.cc.nih.gov/rm/pt/pathways.htm>

## **II. JOAG, LCDR Jeff Richardson, Chair**

The purpose of the Junior Officer Advisory Group (JOAG) is to provide advice and consultation to the Surgeon General, Chief Professional Officers (CPO), Professional Advisory Committees (PAC), and other Commissioned Corps groups on issues relating to professional practice and personnel activities affecting junior officers in the USPHS Commissioned Corps.

I would like to report on the highlights of recent JOAG efforts:

- 1) We have met twice since the last TPAC meeting, most notably, Friday Feb 10<sup>th</sup>, when JOAG met with the Surgeon General VADM Richard Carmona, Deputy Surgeon General RADM Kenneth Moritsugu, and OSG Chief of Staff RADM Robert Williams. We were able to meet for about an hour and discuss junior officer issues regarding Transformation, New Policies, and

Public Health Issues. It was a wonderful meeting and a great opportunity for junior officers to meet with senior OSG staff.

- 2) Officers interested in reducing costs for the 2006 Public Health Service Professional Conference in Denver by sharing a hotel room are invited to email LT Varsha B. Savalia at [vsavalia@ora.fda.gov](mailto:vsavalia@ora.fda.gov).
- 3) Also, consider applying for a Junior Officer Scholarship through the PHS COF. The scholarship will cover the full conference registration cost but does not cover related costs such as travel, housing, etc. To qualify an individual must have a rank of O-3 or below (Ensign, LTJG, LT) and must certify that he/she has requested funding from his/her agency and been turned down. Visit, <http://www.coausphsconference.org/registration.cfm> for additional information.
- 4) Officers from the therapist category that have been active recently in the JOAG are: LT Brian Elza, LT Jessica Feda, LT Joe Golding, LT Stephanie Maxfield and LCDR Laura Grogan.
- 5) I would like to call on all Junior Therapist Officers (Temporary O-4 and below), who are interested, to join one of JOAG's committees and become a Non-voting member and also to sign up for the JOAG listserv at <http://list.nih.gov/archives/joag.html> or by logging on the JOAG website a [www.joag.org](http://www.joag.org) and clicking on the link for the listserv. Meeting times are at 1300 EDT on the second Friday of every month. The next meeting will be on Friday, March 10<sup>th</sup>. Officers usually can meet in the conference room M on the 3rd floor of the Parklawn Building and in Atlanta can meet at ATSDR Conf Room 3A. The NEW Call-in info is: USA Toll Free Number: 1-866-772-5230, PASSCODE: 4413222

### **III. Historian, CDR Jessie Whithurst-Lief, Chair**

-If anyone has pictures/information (COA meetings, Deployments, Conferences) to include in TPAC history contact CDR Whithurst-Lief at email:[jlief@bop.gov](mailto:jlief@bop.gov).

-Planning to organize a historical time line for the category as well as doing a "who's who" in the therapist category. Will be calling on category PTs, OTs, and Speech and Language Pathologists/Audiologists to help fill in information from their respective disciplines.

### **IV. Retired Therapist Subcommittee, CAPT (ret.) Leo LaBranche and CDR (ret.) Selden Wasson**

-Nothing to Report

### **V. Inactive Reserve, LT Alicia Souvignier, Chair**

-There are Inactive Reservists interested in doing a short tour of duty if anybody needs to backfill in their clinics. Contact:

[Alicia.souvignier@ihs.gov](mailto:Alicia.souvignier@ihs.gov)

- Jenny Elton continues to serve TDY for Army in Hawaii and will be taking a new assignment in Germany with the Army in May. She received a non-competitive O4 promotion while on TDY. LCDR Andrea Woolridge ended her TDY with Shiprock.

## VI. TPAC Field Report, CDR Liza Figueroa, Coordinator

### I. POSITIONS OPEN/ANTICIPATED

- **IHS AZ**

Hopi:

PT position has been approved to be an O-3, O-4, O-5 billet- dependent upon the qualifications of the applicant- so this will increase the scope of recruitment efforts.

Tuba:

PT Manager, Staff PT. Contact **James Cowher**, PT 928 283-2659

- **IHS NM**

Gallup:

Chief of PT

Shiprock:

Staff Physical Therapist

- **IHS NW/AK**

Mt. Edgecumbe Hospital:

Contact: *Terry Cavanaugh* (907) 977-8312 Email: [terry.cavanaugh@searhc.org](mailto:terry.cavanaugh@searhc.org)

Crow Agency:

PT-not posted yet but at least 1 position is going to be open

Lamedeer:

1 staff PT. Contact: **Jennifer Allies** (406) 477-4422 email: [jenniferallies@mail.ihs.gov](mailto:jenniferallies@mail.ihs.gov)

## II. CONGRATULATIONS

- **IHS AZ**

PIMC:

- *CAPT Mark Dardis, CDR Liza Figueroa and CDR Ron West* have been awarded the **USPHS Outstanding Unit Citation** for the dedication and commitment toward treating patients with complex hand injuries for the IHS Phoenix Area.

- **MULTI-AGENCY**

FDA, Arizona:

- *LCDR Terry Boles* received the Air Force Outstanding Unit Award for his service while assigned to 355<sup>th</sup> Medical Operations Squadron, Davis-Monthan AFB, Arizona.

- **IHS NM**

Santa Fe:

- *CDR Martha Duganne* received the **USPHS Commendation Award**

## III. NEWS FROM THE FIELD

- **IHS AZ**

Parker:

- *LT Joe Golding* is attending the 2<sup>nd</sup> week of the Basic ENMG Course at Rocky Mountain University of Health Professions February 20-26. He will also be taking the OCS exam on March 10, 2006

PIMC:

- *CDR Lois Goode*, Chief PT Consultant for the IHS, visited the PT Department on February 1, 2006

- *CDR Ron West* attended the APTA, CSM conference in San Diego and served as Aide-de-Camp to ADM Agwunobi to the Arizona Governor's Flu Pandemic Conference.

- As the Phoenix Area Aide-de-Camp Coordinator for the OSG and ASH Phoenix visits, *CDR Liza Figueroa* coordinated and assisted with Aide-de-Camp services to DSG RADM Moritsugu, Chief Nurse RADM Romano and IHS Director RADM Grim while attending the 2006 National Combined Councils Meeting in Phoenix, AZ. She also coordinated services for ADM Agwunobi to the Arizona Governor's Flu Pandemic Conference.

Tuba:



- TCRHCC has started a Phase II Cardiac Rehab Program accepting the first patients in January. The program is staffed by nursing and PT with PT providing exercise prescriptions and general fitness recommendations. The program is housed with-in the PT department.

- ***LTJG Heidi Fisher*** transitioned from Corporate hire to Commissioned Corps. She attended BOTC and recently completed the online IOTC course.

- **BOP WEST**

USMCFP Springfield:

- ***CDR Scott Gaustad*** attended APTA, CSM in San Diego. While at CSM, as a Specialization Academy of Content Experts (SACE) II item writer, he and other item writers met and prepared questions for the geriatric and orthopedic ABPTS board specialist examinations.

FMC Rochester:

- ***LT Jessica Feda*** has attended the APTA CSM and a pre-conference course for the treatment of diabetic ulcers. She also serves as the lead officer for a newly developed multi-disciplinary program for patients with chronic pain, which will incorporate an 8-week exercise program.

- **MULTI-AGENCY**

FDA, Maryland:

- ***LT Ayanna Hill*** announces the birth of her daughter, Anani Xumya, on November 22nd at 3:41 p.m.

OSPHS, Colorado:

- ***LCDR Laura Grogan*** was elected as the President of the Rocky Mountain COA Chapter. She has also been certified in Hypnosis.

- **IHS NM**

Gallup:

- Beginning process of receiving reimbursement for Durable Medical Equipment.

- Wellness center, currently staffed by ***CAPT Dominick Aretino***, is likely to be expanded in the near future, with possibility of new staff being added (therapist).

ACL:

- Expanding their role in the diabetes clinic and now provide daily walk-in and outreach clinic diabetic foot checks. Hope to have a diabetic shoe fitting clinic up and running soon.

- PT Dept. has started seeing the majority of walk-in orthopedic patients from the outpatient department during regular working hours.

- The physical therapy component of the satellite clinic reopened in To'jajiilee and is staffed by one therapist one half day per week

Zuni:

- **LCDR Megan Horeis**, PT is working closely with the OB Dept. in the area of women's health.

- The PT dept. is part of a Pain Management Team that is in its planning stages.

Crownpoint:

- Facility is working on application for receiving reimbursement for DME

**ST Elizabeth's**

- Congratulations to **LCDR Maria Bacilio**, Chairperson and Mistress of Ceremony for the 4th Annual Employee Recognition Celebration for the Department of Mental Health at St. Elizabeth's Hospital, where over 200 employees were recognized. The Celebration was a complete successful. Job well done!

IV: WELCOME/FAREWELL

Welcome:

- **IHS AZ**

PIMC:

Has a new inpatient therapist, **LCDR Terry Boles**. He started working at PIMC Feb 1, 2006. Previous to PIMC he was with the FDA, Arizona, and prior to that he was an Air Force therapist

Tuba:

**Mr. Duane Roseman**, DPT, joined TCRHCC from Baltimore as a corporate hire

- **MULTI-AGENCY**

USDA, California:

**CDR Sue Newman** transferred to the United States Department of Agriculture/Food Safety Inspection Service/Field Operation on December 2, 2005 as an Enforcement Investigation Analysis Officer

- **IHS NM**

Zuni:

*LCDR Ernestine Higdon*, PT is the new Chief of PT. She previously worked at Zuni as a Staff Therapist for 7 ½ years before working at GIMC for 4 ½ years. She returned in January 2006.

Shiprock:

*LT Thomas Schroeder*, Staff PT

*LCDR Joseph Strunce*, PT, Chief of Rehab

Crownpoint:

*Michelle Barbone*, Health Tech. This position was previously an office clerk position.

Farewell:

- **IHS AZ**

Tuba:

*CDR Sue Newman*, DPT, transferred to USDA.

- **MULTI-AGENCY**

FDA, Arizona:

*LCDR Terry Boles* transferred from FDA Phoenix to Phoenix Indian Medical Center as of February 1, 2006

- **IHS NW/AK**

Billings Area:

*Charlie Lewis* left IHS

Blackfeet Service Unit:

*Tamara George* left IHS.

V. PRESENTATION

- **IHS AZ**

Tuba:

*LTJG Heidi Fisher* presented on Ergonomics to TCRHCC dental department

- **IHS NM**

ACL:

*LT Scott Mitchell* is giving a presentation on exercise to locals during a “Sweet Talk” diabetic group session.

*LT Stephen White* will be presenting radiology guidelines and general knee joint testing to the medical staff 2/23/06.

Shiprock:

*LCDR Strunce* presented “The Immediate Effects of Thoracic Spine Manipulation with a Primary Complaint of Shoulder Pain,” at APTA CSM Feb 2 in San Diego, CA.

Crownpoint:

*Lori Lee*, PT continues to present the exercise component at weekly “Lifestyle Balance” program. This has been the most successful group yet, as they have been having steady group participation.

VI. PUBLICATION:

None reported

VII. CURRENT RESEARCH

- **IHS NM**

Zuni:

Ongoing study involving osteoporosis screening. Data continuously being collected by the PT dept, to be compiled in the future. This would be a unique study, in that no previous studies on osteoporosis have been done involving Native Americans.

VIII. DEPLOYMENTS:

- **BOP WEST**

*CDR Eric Payne* has been deployed to New Orleans to serve as the ESF-8 LNO for St. Bernard Parish.

IX. FUTURE AGENDA ITEMS

1. What type of nomination process is utilized to elect TPAC chair, secretary, committee chairs as well as agency clinical consultants?
2. Consider the addition of working clinical uniforms of, perhaps, scrubs with printed logo. Consider navy with gold logo and maybe printed officer name and rank or discipline. Many of us do wound and foot care which results in soiled uniforms, particularly the salt and pepper variety. Working "uniform" scrubs would be more sanitary, etc. in the clinic.

**Commissioned Officers Association, CAPT Suzanne Pickering**

-2006 COA Meeting: Adams Mark Hotel, Denver, CO, May 1-4, 2006

**Discipline Liaison**

Members: CAPT Michelle Hooper – Audiologist

-Nothing to report

CAPT Rebecca Parks – OT

-Nothing to report

Ms. Beth Soloman – SLP

-Nothing to report

CDR Michael Smith – PT

The quarterly Quad service meeting is taking place on Thursday, 2/23 at 2:30 PM at National Naval Hospital....The next meeting will be hosted by NIH.

**ATTACHMENT D: STRATEGIC PLANNING and DEVELOPMENT COMMITTEE REPORT**

**MEMORANDUM**

To: LCDR Corey Dahl, TPAC Secretary  
 CDR Scott Gaustad, TPAC Chair

Date: 02/22/06

From: LCDR Terry Boles, Strategic Growth Chair

PHS Therapists category Vacancies

<b>IHS</b>	<b>Duty Location</b>	<b>POC</b>
STAFF PT	KOZEBUE, AK Manilaq Health Center	PAT SAMMARTINO ( HUMAN RESOURES) (907) 442-3321
STAFF PT	SITKA, AK Mt Edgecomb Hospital	CAPT TERRY CAVANAUGH (907) 966-8312 <a href="mailto:TCAVANAUGH@SEARC.ORG">TCAVANAUGH@SEARC.ORG</a>
PT DIRECTOR	BETHEL, AK Yukon Kuskokwim Hospital	DAVID FRIDAY 1-800 – 478-8905-EXT 3 <a href="mailto:DAVID_FRIDAY@YKHC.ORG">DAVID_FRIDAY@YKHC.ORG</a>
STAFF PT	ANCHORAGE, AK Alaska Native Med Center	DOUG MUNOZ (907) 729-1261 <a href="mailto:dmunoz@akanmc.ihs.gov">dmunoz@akanmc.ihs.gov</a>
Home Health PT	ANCHORAGE, AK Alaska Native Med Center	DOUG MUNOZ (907) 729-1261 <a href="mailto:dmunoz@akanmc.ihs.gov">dmunoz@akanmc.ihs.gov</a>
STAFF PT	ANCHORAGE, AK South Central Regional Office	LARISSA LUCA (907) 729-4999
STAFF PT	NOME, AK Norton Sound Health Corp.	DOROTHY PINKNEY (907) 443-3311 <a href="mailto:PINKNEYD@NSHCORP.ORG">PINKNEYD@NSHCORP.ORG</a>
CHIEF PT	CHINLE, AZ	LCDR ANDRA BATTACCHIO (928) 674-7223 <a href="mailto:Andra.battacchio@chinle.ihs.gov">Andra.battacchio@chinle.ihs.gov</a>

CHIEF PT	PINON, AZ	LCDR ANDRA BATTACCHIO (928) 674-7223 <a href="mailto:Andra.battacchio@chinle.ihs.gov">Andra.battacchio@chinle.ihs.gov</a>
STAFF PT	POLACCA, AZ HOPI HEALTHCARE MEDICAL CENTER	KATHLEEN MANRIQUE (928) 737-6131 <a href="mailto:Kathleen.Manrique@mail.ihs.gov">Kathleen.Manrique@mail.ihs.gov</a>
CHIEF PT and/or OT * Tribal Position	SANTA ROSA, AZ Archie Hendricks Skilled Nursing Facility	Ms CAROLE DENE GARCIA (520) 361-1800 <a href="mailto:Cgarcia@toltc.org">Cgarcia@toltc.org</a> or Mr. LEE LOITZKY (520) 444-4109 <a href="mailto:Lolitzky@toltc.org">Lolitzky@toltc.org</a>
STAFF OT	TUBA CITY, AZ	ANN O'CONNOR (928) 283-2594 <a href="mailto:ANN.O'CONNOR@TCIMC.IHS.GOV">ANN.O'CONNOR@TCIMC.IHS.GOV</a>
PT MANAGER	TUBA CITY, AZ Tuba City Indian Medical Center	JAMES COWHER (928) 283-2659 <a href="mailto:JAMES.COWER@TCIMC.IHS.GOV">JAMES.COWER@TCIMC.IHS.GOV</a>
STAFF PT	TUBA CITY, AZ Tuba City Indian Medical Center	JAMES COWHER (928) 283-2659 <a href="mailto:JAMES.COWER@TCIMC.IHS.GOV">JAMES.COWER@TCIMC.IHS.GOV</a>
STAFF SPEECH LANGUAGE PATHOLOGIST	TUBA CITY, AZ	ANN O'CONNOR (928) 283-2594 <a href="mailto:ANN.O'CONNOR@TCIMC.IHS.GOV">ANN.O'CONNOR@TCIMC.IHS.GOV</a>
STAFF PT	CROW AGENCY, MT PHS Indian Hospital	JACKIE BLACK (406) 247-7214 <a href="mailto:JACKBLACK@BIL.IHS.GOV">JACKBLACK@BIL.IHS.GOV</a>
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<b>BOP</b>	<b>Duty Location</b>	<b>POC</b>
Health Services Administrator	Federal Correctional Institution Sandstone, MN	DEB BURGESSON (320) 245-2262 #215
STAFF PT	BUTNER, NC BUTNER CORRECTIONAL FACILITY	HENRY MCMILLAN (919) 575-3900 #5229 <a href="mailto:HMCILLAN@BOP.GOV">HMCILLAN@BOP.GOV</a>
STAFF OT	BUTNER, NC BUTNER CORRECTIONAL FACILITY	HENRY MCMILLAN (919) 575-3900 #5229 <a href="mailto:HMCILLAN@BOP.GOV">HMCILLAN@BOP.GOV</a>
<b>MULTIAGENCY</b>	<b>Duty Location</b>	<b>POC</b>
DHS	DHS, DC DEPUTY DIVISION DIRECTOR, OPERATIONAL READINESS	CAPT JULIE SADOVICH (202) 254- 5652 Vacancy Announcement Number: DHSOST02091
DHS	DHS, DC EXERCISE PROGRAM MANAGER	CAPT JULIE SADOVICH (202) 254- 5652 Vacancy Announcement Number: DHSOST02094
HHS	HHS, DC Staff Coordinator	LT JASON JURKOWSKI (202) 619-7800 Vacancy Announcement Number: DCP-0127-001
USDA	WASHINGTON, DC Executive Associate for Public Health	PATTIE SCHULKE (202) 690-3463 Fax: (202) 690-1666 <a href="mailto:Pattie.Schulke@fsis.usda.gov">Pattie.Schulke@fsis.usda.gov</a> Vacancy Announcement Number: DCCA-USDA-2066-1030
HHS-OPHEP	WASHINGTON,	CAPT GERALYN JOHNSON



	DC Legislative Liaison	Geralyn.johnson@hhs.gov Vacancy Announcement Number: DCCA-OPHEP-2026-0944
HHS-OPHEP	WASHINGTON, DC Management Analyst Coordination	LT IDONG ESSIET-GIBSON Idongesit.gibson@hhs.gov Vacancy Announcement Number: DCCA-OPHEP-2026-0947
DHS	WASHINGTON, DC PROGRAM DIRECTOR, EXERCISES	CAPT JULIE SADOVICH (202) 254- 5652 Vacancy Announcement Number: DHSOST02092
DHS	WASHINGTON, DC PROGRAM DIRECTOR, READINESS TRAINING	CAPT JULIE SADOVICH (202) 254- 5652 Vacancy Announcement Number: DHSOST02093
<b>PHS OCCO</b>		<b>POC</b>
Details / Special Assignments		Detail Project Officer, DCCA, OCCO (240) 453-6006

Partial listing of web sites for vacancy announcements:

<https://jobs.quickhire.com/scripts/FSIS.exe/> (POC: CAPT Cindy Pond, USPHS, DVM, MS Phone: 202-720-7208)

[www.usphs.gov/html/other\\_federal\\_jobs.html](http://www.usphs.gov/html/other_federal_jobs.html)

[dcp.psc.gov/VATS/rept\\_select.htm](http://dcp.psc.gov/VATS/rept_select.htm)

[www.cdc.gov/ncipc/default.htm](http://www.cdc.gov/ncipc/default.htm)

[www.fda.gov/jobs/default.htm](http://www.fda.gov/jobs/default.htm)

[www.cms.hhs.gov](http://www.cms.hhs.gov)

[www.hrsa.gov](http://www.hrsa.gov)

Subcommittee Reports:

**Recruitment Subcommittee**

Chair: CDR Frank Weaver

Members: LT Alicia Souvignier

- There are 10 Therapists applicants in various stages of their application, of which two applicants are civil service conversions.

- Subcommittee to work with IHS Scholarship new graduates in filling therapist vacancies.

- Announcing one vacancy for the TPAC Associate Recruiter Lead.

**Strategic Growth Subcommittee**

Chair: CDR Gary Shelton

Members:

- New category demographics have been updated on the TPAC web site.
- Working on a staffing formula for therapists in IHS with the aim to reflect appropriate number of staff to population ratios.

### **Retention Subcommittee**

Chair: CDR Michelle Jordan

Members: LCDR Mark Melanson

- Continuing dialog with OCCO regarding information for retention survey to be developed and sent out to category.
- Nothing new to report.

### **COSTEP Subcommittee**

Chair: LCDR William Pearce

Members:

- Welcome new Chair for COSTEP Subcommittee.
- Applications for fall 2006 school year have been received and the selection board meets February 27 through March 2.
- Sample "Thank You" letter is posted on the TPAC website to recognize the COSTEP's service, completion of a detail or accomplishments.
- Has had student inquiries requesting COSTEP information and application procedures.

### **Long Term Training Subcommittee**

Chair: LT Ayanna Hill

Members: LT Teshara Bouie

- Nothing new to report.

### **IHS Scholarship Subcommittee**

Chair: LT Toni Donahoo

Members:

- Reported one 2004, and three 2005 new graduate physical therapists still pending assignment placements. There are five 2006 upcoming graduates expected to graduate in May.

### **Appointment Standards Subcommittee**

Chair: CDR Jessie Whitehurst-Lief

Members: CDR Rita Shapiro

CDR Mercedes Benitez-McCrary

CDR Frank Weaver

LTJG Teshara Bouie

- New Subcommittee has completed stand-up and ready to assume the charge of the subcommittee.

**ATTACHMENT E: READINESS COMMITTEE REPORT**

**TPAC READINESS COMMITTEE**

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Rita B. Shapiro, MA, PT  
CDR, USPHS  
Chair, TPAC Readiness Committee/OFRD Subcommittee  
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February, 24, 2006

From: CDR Rita B. Shapiro, Readiness Committee Chair  
To: CDR Scott Gaustad, TPAC Chair  
LCDR Corey Dahl, TPAC, Executive Secretary

The Mental Health Provider Task Force completed its work and submitted a report (Attached).

Rita B. Shapiro, MA, PT  
CDR, USPHS

**ATTACHMENT F: Mental Health Provider Task Force Report**  
**TPAC READINESS COMMITTEE**

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Rita B. Shapiro, MA, PT  
CDR, USPHS  
Chair, TPAC Readiness Committee/OFRD Subcommittee  
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TASK-FORCE REPORT

January 11, 2006

From: CDR Rita B. Shapiro, MA, PT  
To: CDR Scott P. Gaustad, TPAC Chair  
Subj: Evaluating the Educational Requirements of Therapists other than Occupational Therapists to deploy as Mental Health Providers

**Background**

In disaster situations like the Hurricanes, earthquakes, 9-11 etc. the Office of Force Readiness and Deployment traditionally utilized the services of clinical psychologists, psychiatrists, and mental health nurses etc. to deploy as mental health providers. However, after due consideration and provision of well researched documents and attestations, occupational therapists were determined to be an excellent addition to the pool of professionals to deploy as mental health providers in disaster situations. This was quite eloquently demonstrated by outstanding performances of our occupational therapists who deployed to support the victims of hurricanes both in 2004 and 2005. The TPAC was posed a question by a few physical therapists if they could also deploy as mental health providers.

**Assessment**

After a very careful review of the educational backgrounds including but not limited to the pre-requisites and the educational curriculum from various physical therapy, speech and language pathology and audiology, as well as obtaining the position of respective professional organizations, the task force determined that those respective professions within the Therapist Category of the United States Public Health Service do not have adequate educational background to select and deploy in the mental health provider role.

Most physical therapy programs do not give specialized training in counseling techniques to the physical therapists, but do educate them to identify common psychosocial issues and utilization of outside resources for further management. Audiologists are not properly trained to provide general mental health counseling. The type of counseling they are trained to do is limited to a limited scope of helping an individual cope with their (or their

family member's) hearing impairment. Speech and language pathologists are also similarly trained as it pertains to mental health counseling.

Subj: Evaluating the Educational Requirements of Therapists other than Occupational Therapists to deploy as Mental Health Providers

Occupational therapists however, do have many hours of education in psychology, mental health counseling as well as training by affiliations in a psych unit/hospital. Further, many of the continuing education courses for the occupational therapists are for providing post traumatic counseling and occupational rehab.

**Conclusion**

It is the determination of this task force that within the Therapist Category, only occupational therapists qualify to deploy in the mental health provider role and they must continue to comply with the OFRD requirements of continuing education and clinical practice. Audiologists, speech and language pathologists and physical therapists do not meet the education and training requirements to provide general mental health counseling to disaster victims without additional specialized education and training.

Respectfully Submitted

CDR Rita Shapiro (Chair)  
CDR Frank Weaver, LCDR Sue  
Newman, and LT Teshara Bouie  
(Members)

## **ATTACHMENT G: Civil Service Task Force Report**

CDR Sue Newman, Chair  
CDR Scott Gaustad  
CDR Rita Shapiro  
LCDR Jeffrey Richardson

### **METHODS:**

Civil Service (CS) Task Force members created a survey to gather information on Civil Service Therapists motivation to participation on TPAC activities. The August TPAC Roster was utilized to identify Civil Service Therapists. 49 therapists were identified as non-Commissioned Officers. The survey was distributed through e-mail. A 10% response rate was received by civil service therapists. CDR Gaustad suggested phone contact as another method to gather information. The Task Force decided to try the survey again using personal contact by phone. The October TPAC Roster was divided among Task Force Members to contact by phone and record their responses (Attachment B). Phone messages were left at the work place of a CS Therapists if not available. Attempts to contact CS Therapists were not pursued after leaving a message at their work site.

### **RESULTS:**

See Below

### **DISCUSSION/CONCLUSION:**

Majority of CS therapists are not interested in participating in TPAC activities. Two of the CS therapists were in the process of transferring from CS status to USPHS Officer. Some comments from the CS therapists included (1) Need to provide more information to younger CS therapists about deployments to get them involved, (2) Thought the TPAC letters were for physical therapists, (3) Not getting the e-mails, (4) Too busy seeing patients to participate, (5) Increase CS issue related topics, (6) Provide food for local meetings, (7) Include promotion, reimbursement efforts and autonomy, (8) Did not know Audiologists were included in TPAC, (9) Do not find it very relevant to me.

### **Recommendations:**

- 1) Based on the initial poor response rate, is it reasonable to expect Civil Service Therapists to want to participate in TPAC activities? What is the motivation for Civil Service Therapists to participate?
- 2) More specific information to Civil Service Therapists on the activities of TPAC.
- 3) Focused meetings on Civil Service Issues
- 4) Include Civil Service Therapists on clinically relevant issues.
- 5) Consider a Pilot Civil Service Subcommittee as a liaison to advocate on CS issues or projects.

## RESULTS

### Demographic Information:

Profession: 7 PT, 1 OT, 4 Aud, and 6 SLP (Note not all information was provided)  
Agency: IHS, NIH

1. Are you aware of the United States Public Health Service Therapists Professional Advisory Committee (TPAC)?

22 Yes    7 No

2. Are you aware that the Therapist Professional Advisory Committee (TPAC) is open to civil service physical and occupational therapists, audiologists, and Speech-Language Pathologists?

10 Yes    20 No

3. Do you have an interest in participating in TPAC Activities?

8 Yes    11 No    7 Not sure need more information

4. If you answered yes in question #3, would you be interested in becoming involved in the TPAC meetings as well as therapist category projects and tasks?

9 Yes    5 No    8 Not sure need more information

5. Is there anything TPAC can do to increase Civil Service Therapist's participation in meetings?

13 Yes    5 No    2 Not sure

If yes, please explain: e-mail, inform CS, newsletter, CS issue related information.

6. Will your supervisor support or allow you to attend TPAC meetings and participate in activities TPAC?

20 Yes    3 No    2 probably

If you checked no, why? Too busy