

Nursing Professional Advisory Committee

U.S. Public Health Service

July 20, 2007

I. Introduction of Members in Attendance

N-PAC Voting Membership					
Rank	Last Name	First Name	Agency	Term	Attending
LCDR	Davis	Wendy	BOP	Oct 06 – Sep 09	Present
LCDR	Strong	Donna	BOP	Oct 06 – Sep 09	Present
LT	West	Christine	CDC	Oct 06 – Sep 09	Present
CAPT	Rossi-Coajou	Mary	CMS	Oct 06 – Sep 09	Present
LT	Zorrilla	Delia	DIHS	Oct 06 – Sep 09	Absent
CDR	Berkhousen	Katherine	FDA	Oct 06 – Sep 09	Present
LCDR	Hunter-Thomas	Serina	HRSA	Oct 04 – Sep 07	Absent
CAPT	Stephens	Leslie	IHS	Oct 06 – Sep 09	Present
CDR	Lincoln	Carol	IHS	Oct 05 – Sep 08	Absent
CDR	Tsosie-Robledo	Theresa	IHS	Oct 04 – Sep 07	Present
LCDR	Peterson	Cheryl	IHS	Oct 05 – Sep 08	Present
CDR	McGuire	Moira	NIH	Oct 04 – Sep 07	Present
LCDR	Fuller	Barbara	NIH	Oct 04 – Sep 07	Excused
LCDR	Hunter	Lori	NIH	Oct 04 – Sep 07	Represented
CAPT	Kelly	David	OS	Oct 05 – Sep 08	Excused
CAPT	Hunter	Joan	PSC	Oct 06 – Sep 09	Present
CAPT	Rael	Melissa	SAMHSA	Oct 04 – Sep 07	Absent
LCDR	Blevins	Justin	USMS	Oct 06 – Sep 09	Absent
Ex-Officio Non-Voting Members					
RADM	Romano	Carol	OSG/NIH	Open	Excused
CDR	Broussard	Johnny	USDA	Oct 06 – Sep 09	Present
CAPT	Merced	Florentino	SAMSHA	Oct 06 – Sep 09	Absent
LCDR	Magnotta	David	OS	Oct 06 – Sep 09	Absent
CAPT	Bangs	Gary	EPA	Oct 06 – Sep 09	Absent
LCDR	Brown	Claudia	HRSA	Oct 05 – Sep 08	Absent
CDR	Poindexter	Michelle	USDA	Oct 06 – Sep 09	Present
LCDR	Doan	Jenny	DoD	Oct 06 – Sep 09	Absent
LCDR	Denis	Patrick	OS	Oct 06 – Sep 09	Excused
CDR	Wade	Theresa	DHS	Oct 04 – Sep 07	Absent

Attendance Roster			
Rank	Name	Rank	Name
AHRQ			

BOP			
CDR	Paula Bridges	LCDR	Anita Pollard
CDC/ATSDR/NIOSH			
CAPT	Amy Collins	LT	Christine West
CMS			
CAPT	Jeannine O'Malley	LCDR	Edward Poindexter
CAPT	Mary Rossi-Coajou	LT	Malini Krishnan
LCDR	Pauline Karikari-Martin		
DHS/USCG			
LCDR	Lisa Hieber		
DOD/TMA			
DIHS			
CDR	Johnny Broussard	LT	Tonya Walston
LCDR	William Rekward	LTJG	Matthew Guntero
LT	Gia Lawrence		
DOJ/USMS			
LCDR	Mike Pingen		
FDA			
CDR	Zenja Woodley	LCDR	Vada Perkins
LCDR	Philantha Bowen	LCDR	Edward Wolfgang
LCDR	Jason Humbert		
FOH			
CDR	Terry Porter		
HRSA			
CAPT	Karen Hensch	CAPT	Ana Maria Puente
CAPT	Nanette Pepper	CDR	Tracy Matthews
IHS			
CAPT	Leslie Stephens	LCDR	Lisa Palucci
CAPT	Bonnie Warner	LCDR	Cheryl Peterson
CDR	Wayne Keene	LT	Marjorie Delmar
CDR	Theresa Tsosie-Robledo	LTJG	Anne Stohr
LCDR	Tammy Gragg		
NIH			
CDR	Lisa Barnhart (Alternate for LCDR Lori Hunter)	CDR	Colleen Lee
CDR	Rose Clark		
NOAA			

OS/OPHS/OSG			
CAPT	Betty Chern-Hughes		
CAPT	Beverly Dandridge	LCDR	Mary Ann Robinson
CDR	Peter Martineau	LTJG	Stacey McBryde
PSC			
CDR	Kim Deffinbaugh		

SAMSHA			
CDR	Deanna Smith		

USDA			
CAPT	Michelle Poindexter		
GUESTS			

II. Acceptance of Minutes

June 2007 minutes were presented to the committee members for acceptance and approval. CAPT Ana Maria Puente made a motion to approve the minutes as written and a second was made by CAPT Leslie Stephens. The minutes were approved and will be sent to the webmaster for posting to the website.

III. Chief Nurse Officer Report - CDR Katherine Berkousen for RADM Carol Romano

TRANSFORMATION

It is with great sadness that we mourn the passing of RADM Robert Knouss after his lengthy battle with cancer. His leadership of the Transformation of the Commissioned Corps has been visionary. Our work in transformation is inspired by his passion and it will continue. We are grateful for his many years of outstanding public service.

READINESS

We continue to support the humanitarian assistance training deployment of USPHS officers aboard the USNS Comfort and the USS Pelleliu. The first teams completed their one month tour and transitioned to the next PHS teams. A status of the mission can be found at http://dcp.psc.gov/ccbulletin/articles/USNS_Comfort_070307.htm

The Division of Immigration Health Services is offering opportunities for officers to obtain their clinical hours to meet BASIC readiness standards. Immigration Health Services will pay authorized travel expenses associated with a two week Temporary Duty Assignment (TDY) to designated areas. If you are interested in this opportunity, refer any questions to LTJG Monique

Bailey at 202-732-0131. Your availability and time need to be coordinated and negotiated with your supervisor.

Our Rapid Deployment Force, Public Health and Mental Health teams will be participating in field training this month in San Antonio, Texas to address our commitment to a well prepared response force. Please check your own readiness status as several items need to be updated annually. The nursing category is not at 100% yet! Are you prepared?

POLICY UPDATE

A revised policy on assimilation was implemented and can be found at http://dcp.psc.gov/eCCIS/documents/POM_07_002.pdf

Many state boards of nursing are moving toward paperless licenses to improve the integrity of the licensing process. States who adopted this practice do not mail paper documents to nurses when they renew their license. Officers, if your license is now “paperless”, you will need to communicate your current license status for readiness by printing a copy of the on-line document, adding your PHS ID number and faxing it to Office of Commissioned Corps Operations at fax #240-453-6142.

NURSING LEADERSHIP AND OUTREACH

We continue our vigilance in this hurricane season. The Regional Emergency Coordinators (REC) met in Washington, DC for briefings and discussions. The REC is the lead person in each HHS Region responsible for preparedness and response and works with all State Health Department officials and emergency managers in the field. We have a total of 32 RECs assigned to the 10 different regions of the country. I was proud of our 13 nurses who serve in this role (including program lead and field supervisors) and was impressed by their commitment. We are grateful for their leadership in protecting our nation.

I had the opportunity to participate in the ANA Policy Conference and Expert Panel on Nursing Care in Life, Death and Disasters. This will result in a publication that offers guidance in the adaptation of standards of care during extreme circumstances. CAPTs Ann Knebel, Roberta Lavin, Lynn Slepiski, and Dr. Sally Phillips also played critical roles in this event affirming the leadership of USPHS in this area. I also had the opportunity to visit and tour New Orleans as part of a National Alliance Health Information Technology “Nursing Think Tank” initiative to address implementation of a medical home model infrastructure to support the healthcare delivery in that area. The significance of nursing to building future models of care was echoed and acknowledged. I also was able to speak with nursing informatics leaders and educators about the role of information technology in creating the future of public health at Rutger’s College of Nursing 25th Informatics Conference in San Francisco.

CAREER DEVELOPMENT

Junior Nurse Officers of the Public Health Service are being offered the opportunity to attend the Army's annual Colonel Charles J. Reddy Leadership Conference October 15-17, 2007 at the Hyatt at Washington's Key Bridge in Arlington, Virginia.

The conference is for leadership training and is open only to officers with the rank of O3 and below. There is no registration fee; however the agency is responsible for travel and per diem while the officer is in travel status. I have received 15 slots for PHS nurses. If your agency will support your attendance, your supervisor can nominate you and reserve a spot by sending an e-mail to CDR Moira McGuire at mcguirem@mail.nih.gov by July 30. The agenda is not available yet, however, PHS officers in the past have found this training very useful for their leadership development. All questions should be directed to CDR McGuire.

We plan to implement a category career counseling program as an opportunity to interact with officers to address career development in response to a referral from the Chief Professional Officer (CPO). I will select senior nurse officers, who have demonstrated superior skills in working with others and who will maintain confidentiality of information, to serve as senior counselors. A referral of an officer to a counselor may be prompted by:

- A probationary period review
- A ranking of "not-recommend" for promotion
- Scoring in the lowest 25% (quartile) and not-selected for promotion
- Scoring in the lowest 10% (decile) x 3 consecutive years for temporary promotion and not-selected for promotion; or by
- A recommendation from the Chief Nurse Officer

Senior counselors will be responsible for advising officers and facilitating action plans for career progression. The intent is to implement our commitment to career development. More information about this will be forth coming.

COMMENT

It continues to be a very busy time for us all and we push forward in our construction of the future. Take heart and hold fast to the importance of our mission. While the road seems long and bumpy, creating a healthier nation is worth the journey. Thank you for your dedicated service and perseverance on this journey

IV. Treasurer's Report- NO REPORT

V. N-PAC Chair Report- CDR Katherine Berkousen for CAPT David Kelly

NEW POLICIES

Regular Corps Assimilation Program

Personnel Operations Memorandum (POM) 07-002 dated 11 June 2007

http://dcp.psc.gov/eccis/documents/POM_07_002.pdf. The purpose of this memorandum is to describe the Regular Corps Assimilation Program standard operating procedures for active duty officers of the Commissioned Corps of the U.S. Public Health Service (Corps).

Reserve Corps officers must complete three consecutive years of continuous active duty by 1 March of the assimilation board year in which the officer is eligible for consideration.

Following the assimilation board evaluation, officers recommended for assimilation and sufficiently high on the rank-order list for the nomination list will be reviewed for the following administrative requirements:

- a. Disciplinary and administrative actions; and
- b. Basic force readiness [See Personnel Policy Memorandum (PPM) 07-001].

Potential nominees found non-compliant with post-board administrative requirements will be removed from the nominee list prior to it being forwarded to the President for nomination. Officers removed will be managed as if they were not sufficiently high on the rank-order list.

Uniform of the Day for Deployment on Naval Vessels

Personnel Operations Memorandum (POM) 07-001 dated 08 June 2007

http://dcp.psc.gov/eccis/documents/POM_07_001.pdf. This Personnel Operations Memorandum (POM) authorizes and designates the wear of the Navy Blue Coverall Uniform as prescribed for all Regular and Reserve Corps officers of the Commissioned Corps of the U.S. Public Health Service (Corps) who participate in the Latin American Initiative Mission aboard the USNS *Comfort*, and the Peleliu Pacific Partnership Mission aboard the USS *Peleliu*. These missions are scheduled to take place from June 2007 through October 2007.

The authorization for wear of the Navy Blue Coverall Uniform will be limited to the Corps officers participating in the above referenced missions and only for the duration of those missions. This operational guidance will serve as an operational pilot evaluation of the wear of the Navy Blue Coverall Uniform by Corps officers. At the conclusion of this evaluation period, the Office of Force Readiness and Deployment will present to the Office of the Surgeon General a written assessment of the efficacy and utility of wear of the Navy Blue Coverall Uniform as demonstrated during the pilot evaluation period.

The Navy Blue Coverall Uniform shall be worn in accordance with U.S. Navy Uniform Regulations with the following clarifications specific to wear by Corps officers:

- a. Service Tape – the USPHS service tape shall be embroidered gold thread on blue background and otherwise conform to Commissioned Corps Instruction.

- b. Collar Corps Device – the Collar Corps Device shall be embroidered gold thread on blue background and otherwise conform to Commissioned Corps Instruction (CCI).
- c. Field Medical Readiness Badge (FMRB) – the FMRB embroidered in gold thread on blue background is authorized for wear.

GENERAL UPDATES

Promotions

The temporary promotion list is available through the Commissioned Corps Management Information Web Site. Please review the list and the statistical information.

The Office of Commissioned Corps Operations (OCCO) reports that the list for permanent promotions is with the Assistant Secretary for Health for his concurrence and approval. An announcement is forthcoming.

NOTE INSERT: CDR Berkhausen reported latest update citing, “permanent promotion results have been released today; you may review the final results by clicking onto the Commissioned Corps Management Information System (CCMIS) website”.

Assimilations

The 2007 assimilations have progressed through the approval process and sit with the Secretary. Once approved, they will be sent to the White House and then the Senate. After the Senate approves the list, officers will be notified to complete the process and initiate an oath of officer for the Regular Corps.

Force Readiness

The Office of Force Readiness and Deployment (OFRD) submitted 149 Field Medical Readiness Badge requests through OCCO. Certificates have been processed and the awards have been entered in the officer’s record (eOPF).

The readiness status report for the period ending June 30, 2007 indicates the following:

Meet Readiness Standards	1014	(73 percent)
Not Meeting Standards	352	(27 percent)
Exempt by Policy	80	(not included in our official count)

OFRD will update readiness status once a quarter, please keep your status up to date. Nurse Officers are encouraged to review his or her status and use the Readiness Checklist located at the OFRD web site http://ccrf.hhs.gov/ccrf/Readiness/Checklist_050707.pdf to assist in maintaining their readiness status. The performance measure for the Commissioned Corps for this year is 80%. Please help the Nurse category reach our part of the performance measure by meeting and sustaining readiness and help a fellow Corps officer be ready.

TRANSFORMATION UPDATES

Recruitment – The OCCO will be adding recruitment staff to support the effort to increase the Commissioned Corps to 6600 officers. When fully staffed there will be nine individuals that will work in this section to facilitate recruitment and support the Associate Recruiter Program.

Billets – The beta-test of category specific billets is underway. This test will provide information to assist developers to fine tune the tool for use by officers. Officers should expect to participate in the review and completion of individual billets starting in September 2007. Nurse Officers in multi-disciplinary billets will have their opportunity to complete their review starting in October. Please note if a billet grade changes, a transition period will minimize any adverse effect. As more information becomes available, I will share it with the category.

Training and Career Development – The Division of Commissioned Corps Assignments is currently interviewing for Career and Assignment Managers (CAM). Once aboard, trained, and billet systems come on line, the CAMs will begin to interface with officers. This new (or rather resurrected role) will provide information, counseling, and guidance to officers. This role will augment the mentoring that senior officers, the category, and CPO offer. More information will be available in the coming months.

VI. Current Projects

Fund Raising – CDR Ron Keats

CDR Keats reported that he was not able to make meeting. There was no report this month.

N-PAC Survey – LT Christine West

Results from Nursing Professional Advisory Committee (N-PAC) survey

Verbal Report for N-PAC Meeting Minutes

Comprehensive Report forthcoming

Background:

- Objective: Conduct a survey designed to identify the value and responsiveness of the NPAC Committees. Identify strengths and weaknesses of the subcommittee and other aspects of the N-PAC, our hope paving the way for improvement, areas to focus on and what areas we are doing well at.
- Time Period: 3/13-5/13
- Available via PHS Nursing List Serve and PHS Nursing Website
- Online survey through Zoomerang
- 25 Questions; close and open-ended
- A comprehensive report will be prepared by the committee that will include an interpretation, lessons learned, conclusions, and recommendation section. Made available on the PHS nursing website and sent via list serve.

Results

Participation: 310/~2000=16% (Denominator includes those who subscribe to the list serve and who may access the website.)

- Question #1: Are the N-PAC meetings useful to you. This was fundamental to understanding whether USPHS Federal Nurses, other than PAC members, find the meetings to be of value. More than half (58%) of the respondents felt the meetings held some value. Approximately 1/5 (17%) felt it had no value. A quarter of the respondents had no opinion. Now we have a target (58%) to improve on. As in all research, answers often generate even more questions. An interesting question for further inquiry would be: what aspect of the meetings do you find most useful?
- Question #2: Do the following NPAC subcommittees meet your PHS nursing career needs? In all cases, more than half of the respondents felt it did meet their needs. The greatest need was met by the readiness committee with 70% of the respondents feeling it met a need – followed by communications at 60%, then career development by 57%, with all the rest very closely following. In the one case (research) where it was slightly less than half (46%), it could be attributed to the fact that many (24%) didn't know the committee existed. (However, the beginning of annual surveys, with results that are made public, may begin to change that).
- Question #3: How often do you visit the following N-PAC subcommittees web-pages? This question provides a target to improve on for future surveys. Readiness was visited most frequently with a third of the respondents visiting monthly. Career development had a third (33%) of the respondents visiting quarterly. One significant finding – in all cases the largest percentage of respondents, from a third to slightly over half, had never visited the websites of the individual committees.
- Question 4-8: Associate Recruiter (AR) Status: 33% became AR before 12/05
4% became AR after 4/1/06 (after new standard was implemented).
Question 5: PHS Associate Recruiter Activities: One-on-one discussion (47%), Career Fairs (29%), and Formal Presentations (25%) were primary recruitment activities. Accessibility and Ease of Contacting AR Category Lead (results are for the 34% category ARs only) 27% do not have difficulty making contact, 10% have difficulty making contact. Timely Receipt of Recruitment Supplies, 17% - Yes, 10% No. Sufficient Quantity Received of Recruitment Supplies 16% - Yes, 8% No
- Question 9 asked if the information on the NPAC Awards subcommittee webpage was adequate to answer questions about various awards and the nomination process. 72% responded yes and 28% of responded selected no.
- Question 11 asked the question, “What do you see as the purpose of the NPAC Communications subcommittee? 82% responded “To inform nurses of relevant and important issues in a timely fashion”; 64% responded, “To engage nurses in productive dialogue about the impact of new policies and changes”; 60% respondents selected, “To educate nurses about the NPAC, its role and purpose”
- Question 12 was directed to individuals who subscribe to the NPAC listserv. It asked respondents to describe why it was important. 75% of responded, “Notifies members of meetings and events”; 62% responded, “Nurse leaders communicate with other nurses

efficiently and economically”; 45% selected “Provides a forum to exchange ideas and discuss issues”

- Question 13 asked respondents who were aware of the NPAC Events Committee webpage how often they referred to the Calendar of Events. 44% responded never; 23% responded quarterly; 16% responded yearly
- Question 16 asked to rate the value of having a new nurse officer, especially as it relates to facilitating transition into the life and career of the CORPs, most (69%) responded that this had high value. Similarly, the largest percentage (57%) of respondents rated that having a mentor for any nurse officer was of high value.
- Question 18 explored why officers never met basic requirements, most reported this was not applicable (91%) but 7 (3%) of respondents reported the reason to be they were “newly commissioned in the USPHS”. 22(8%) reported in the other category; the major theme given was limited time and heavy job demands.
- Question 20 asked if respondents had ever deployed by OFRD. 200 (66%) of respondents said yes and 101 (34%) responded no.
- Question 21, Reason for not deployed, 31% reported “organization or supervisor did not approve”, 24% reported other, specify, main themes: not called by OFRD during rotation cycle
- Question 22, Last setting for deployment; Most frequent response: 38% Clinical field environment and Special needs shelter
- Question 23, Deployment role match your skill/competency level; Most frequent response: 42% all of the time
- Question 24, Deployed in a clinical role, most difficult clinical skill/issue; Most frequent response: 21% mental health counseling; other, specify: lack of communication/coordination between agencies and among the corps
- Question 25, Deployed in clinical role, cause for most difficult clinical issue: Most frequent response: 23% lack of staff or support.
- Question 26, If roles or duties changed during deployment, most (73% said they were able to adapt all of the time).
- Question 27, If roles changed, what was the cause for you not being able to change: outside scope of practice or lack of skill. Other, specify theme: poor communication and unfamiliar with clinical skills
- Question 28: Please rate the following topics from the NPAC Research subcommittee's webpage according to usefulness to you. The greatest percentage of respondents (46%)

found on-line training, and on-line journals (43%), to be the most useful topics on the research sub-committee's web-page.

VII. Quarterly Verbal Committee Reports

Career Development – CAPT Joan Hunter & CDR Amy Anderson

Sub-Committee activities:

- Continue to work on CD Sub-Committee webpage edits.
- Continuing Ed Project: Challenge is finding where resources are—Lead for this team will develop the information not readily available and a proposed email format for quarterly Listserv distribution.
- Potential project for NPAC discussion: Review and develop explicit information on career tracks to assist nurse officers with developing their own individual career plans; esp. for those in the field.
- Next Sub-Committee meeting scheduled for August 13th.

Communications - Co-leads: LCDR C. Peterson; LCDR M. Robinson

Goals

- Increase awareness of PHS, Civil Service, and Commissioned Corps Nurses on public health and nursing topics.
- Develop guidelines for website and nursing list serv.
- Revise/update NPAC website: www.phs-nurse.org
- Review/revise Nurse Resource Manual.

Summary of Activities and Accomplishments:

Communication Groups and Group leads are:

List Serv – LCDR Michelle Brown-Stephenson

This workgroup received the NIH list serv manual. Posted instructions on how to use the list serv and developed position descriptions for the list serv group members.

Web site – LCDR Gettie Butts

The Web site group is going through some internal changes. Webmaster resigned. The group is developing plans to address website workload among web groups. The group has already met with NPAC Chair, Chair-elect and Communication co-chairs in establishing plans for improvements to the website.

Nurse Resource Manual – CDR Lois Young

The Resource Manual work plan for the remainder of the year is to formulate a method to keep the manual updated and current.

Collaborative Group – LCDR Maryann Robinson

The group provided a poster presentation for the USPHS Scientific Symposium.

Recruitment and Retention - CDR Ron Keats & LCDR Wendy Davis

- New Members - None at the present time
- Activity updates - R & R 2007 Action Plan **Draft** pending review. Awaiting replies of availability of subcommittee members, in an effort to move forward setting up a meeting with Mentor Subcommittee Chair for the implementation of “Every Nurse is a Recruiter” initiative.

Publications – LCDR Donna Strong

- Attendance: 5 members
- Acceptance of Minutes

Report on July 6, 2007 NPAC Business Committee meeting by LCDR Strong:

CAPT Atkinson would like to know if and when the award will be ready for applications. She has someone who she would like to submit for this award. Apparently there will be more discussion on this at the next meeting. LCDR Creager questioned whether there was a decision as to whom the committee should direct questions and concerns regarding website updates and current issues.

Current projects/action items:

Lunch and Learn speakers:

- a. It was reported that CDR Kim Deffinbaugh, of the Program Support Center, will be presenting on "Federal Emergency Response" during the July Lunch and Learn.
- b. There will not be a Lunch and Learn session in August due to high number of personnel absent for vacations.
- c. CAPT Prince and LCDR Gordon will be presenting at the September Lunch and Learn.

Review/acceptance of PowerPoint protocol:

- a. It was decided that a vote to accept would be delayed until the next meeting.
- b. The draft protocol was circulated one more time for final review by members.
- c. Request for publishing assistance by CAPT Poindexter:
It was suggested that interested members would pick one or two popular nursing publications and learn the processes for submission of an article. This would give the subcommittee an insight into what types of articles publications typically look for and put us in a better position to assist officers in their publishing efforts. The subcommittee could then act more quickly and effectively on requests for publishing assistance.

Team reports

Public Speaking and Presentation Team (CAPT Atkinson):

CAPT Atkinson and LCDR Gordon were present for the last meeting. There was discussion around advertising the Speakers Bureau in popular publications. There was also discussion regarding the call for additional members.

Website Team (LCDR Creager):

No meeting was held. The website appears to be current. The membership list will be forwarded to everyone for edits.

Clinical narratives:

CAPT Rael submitted comments on email that she is interested in pursuing clinical narratives. The issue was discussed whether clinical narratives would remain on the next NPAC strategic plan or not.

New Business Item for August Meeting: Annual review of subcommittee Mission, Vision and Goals.

Monthly Written Committee Reports

AWARDS COMMITTEE – LCDR Serina Hunter-Thomas

- A reminder was mentioned regarding the AMSUS Awards (which after the meeting we discovered that nominations were closed as of the 13th of July with no extensions)
- Announcement made regarding LCDR Pauline Kari-Kari Martin's end of tenure and a need for another co-chair for the awards subcommittee. Mentioned that there are other subcommittees in need of co-chairs as well. A heartfelt "thank you" to LCDR Martin and CDR Cippel for continuing to guide this subcommittee with their experience and expertise.
- Reminder for Team Leaders to provide anonymous versions of awardee write-ups to place on website (as examples for future write-ups).
- LCDR Jenny Williams welcomed back from maternity leave. LCDR Williams would like to coordinate dates with Events subcommittee. (Note that both co-chairs tenure expire this September) LCDR Williams also wanted to extend a heartfelt "kudos" and "thank you" to LCDR Charles Chambers for leading the outreach team while LCDR Williams was on maternity leave - great job!!!
- Meeting came to a close after 24 minutes
- Next meeting is Tuesday, August 7, 2007.

EVENTS COMMITTEE– LCDR Barbara Fuller

NPAC Website

Current info needs to be deleted and updated. Add "Events" to left column of opening page. Under "Events" add Mission of Events Committee & names of committee members. Included NRD information: speaker power-points, copy of program, and pictures. The team would like to see separate link for NRD information and registration on home page. Archive of Lunch and Learn presentations. Links to events: COA, ROA, AMSA, workshops.

Committee Budget

The Events Committee spent approximately \$350.00 for food for NRD and poster boards/shipping for Nurses' Week Posters. This amount does not include support provided by Agencies: Color printing and stock paper for NRD Program, Nurses' week poster printing, and poster mounting, and donated blue award folders (provided by CAPT Kelly, CAPT Merced, and RADM Romano) for individual NRD awards. Committee members have also donated supplies as needed for NRD. The Committee estimates that a budget of \$500.00 should be established to meet the expenses of NRD, Nurses' Week, Hail and Farewell recognition, and NPAC Holiday Party.

NPAC Strategic Plan: Committee Accomplishments:

The committee established a set date for NRD to occur the Friday before the beginning of Nurses' Week on an annual basis. Lunch and Learn session transitioned to Speaking and Publications Committee. There were fifty-nine (59) attendees at 16th annual NRD. Of these participants there were thirty-nine (39) evaluations returned with positive feedback. Individual awards were provided to all recipients. Nurses' Week posters were distributed and displayed during May 6-12 at OPDIV. CEU's provided for NRD participants

Committee Recommendations for Improvement:

Solicit suggestions for improving attendance at NRD. Identified barriers are: location, time of day, topics of interest. Consider full day NRD program with speakers in the morning and breakout sessions in the afternoon. Sessions would include presentations on Career development, writing CV's, and other topics of interest. There should be improved collaboration with Awards Committee in planning NRD. Recommend that CEU's disclosure forms are included with award nominations forms. This would alert potential winners that there is an expectation that they would present their research at NRD. Schedule Keynote speaker for NRD at least 6 months in advanced. Solicit ideas to recognize PHS/Nurses during Nurses Week.

MENTORING – CDR Lori A Hunter

- Reported that there was no new business for the Mentoring Subcommittee
- The Mentoring Subcommittee is scheduled to meet again on August 6, 2007

READINESS AND RESPONSE

- Meeting July 3, 2007
- Website Development – CDR Hanton

Discussed upcoming changes to the overall NPAC web site, which will impact the readiness links. More to come regarding these issue, as info and direction comes from the PAC. Need to update listing of MOU/sites for clinical hours. Update requested from RADM Romano and pending her reply.

Tales from the Field Update – CDR Hanton

Second Tales from the Field article to be submitted soon.

Education – CAPT Collins

CAPT Collins sent the General Disaster Preparedness power point presentation to CAPT Rossi-Coajou which was sent on to the NPAC chair and will be posted on the NPAC website. The committee plans to continue work on power point presentations addressing other topics. CAPT Rossi-Coajou assigned new sub committee members to the education committee. They may be tasked to assist with developing future educational slides as determined by the Education group.

Exploring Nursing Roles – CAPT Collins

Topic deferred indefinitely until future guidance is obtained from transformation workgroups and OFRD plans.

Training for Nursing Readiness – CAPT Rossi-Coajou for LCDR Gentile

A training plan on basic skill sets aligned with core competencies has been proposed by this team (CAPT Slepski, CDR Orsega, CDR Rossi-Coajou, and LCDR Gentile). OFRD currently has training for Tier 1 and 2 teams and this may supplement other tiers. This training plan was distributed to R&R members for comment, then to CAPT Kelly. Sub group attended a basic disaster readiness course on July 11. Sub group will bring feedback to the committee.

Basic Readiness Update – CDR Hanton

The Readiness and Response Sub-Committee to the N-PAC was asked by the NPAC leadership to conduct an outreach campaign to USPHS Commissioned Corps Nurse officers who were listed as ‘Not Basic’ in regards to readiness as of March 2007. During this campaign, each sub-committee member was asked to contact approximately 13 nurse officers, who were noted to not meet basic readiness, according to data provided by OFRD. The majority of the contacts were made by e-mail and/or phone calls during April of 2007. The plan was to find out how many of those officers were currently basic ready and if not, would they make a commitment to become basic ready by June 30, 2007. The campaign also serves as an outreach exercise to find out why officers are not meeting basic readiness and to offer mentorship in terms of how to meet readiness. A summary of the campaign results are listed below:

- 1) The committee members made attempts to call 224 nurse officers.
 - 2) Seventy-nine (79) nurse officers who were contacted did not respond to repeated e-mails and/or phone calls regarding their readiness status and plans to meet basic readiness.
 - 3) Sixty-three (63) nurse officers claimed that they were basic ready at the time the contact was made or were listed as basic ready in April of 2007.
 - 4) Sixty-two (62) nurse officers who were contacted agreed to meet basic readiness
 - 5) 8 nurse officers who were contacted did not agree to meet basic readiness due to the following reasons:
 - 2 had recent surgery
 - 1 was ill with cancer
 - 2 were retiring
 - 1 claimed she was too busy at work
 - 1 officer who was contacted was not currently on active duty
 - 6) Frequency for not meeting basic readiness due to one problem area:
 - 78 missing immunizations only
 - 22 missing training modules only
 - 20 missing BLS only
 - 17 missing Fitness only
 - 10 missing Physical Exam only
 - 4 missing License only
- Updated OFRD list should be available after June 1, 2007.

- CDR Lori Hanton will be on extended leave from August through October. LCDR Nicole Chamberlain has volunteered to update the readiness tracking spread sheet.
- Readiness attendance list and committee assignments were distributed to group. Committee members were notified if they had missed more than 4 meetings and asked if they wanted to remain on the committee. Reminder: committee members can only miss no more than 50% of readiness monthly meetings and must demonstrate active participation.
- Next committee meeting will be August 7, at 1330 via conference call.

RESEARCH

Meetings

Committee members continue to teleconference monthly. We've had a formal committee meeting on June 26th 2007. A few members have met informally in June to make the adjustments to the 2007 Nursing Professional Advisory Committee (PAC) survey analysis and discuss the committee's strategic plan NPAC submission in July.

Membership

Our sub-committee membership remains firm at eight members.

PAC Survey:

Since the last PAC report, our sub-committee has begun to summarize the findings and raw data have been obtained and distributed to each of the committee members. A verbal report of the findings of the survey is due at the next N-PAC meeting; LT West will communicate with PAC leadership to determine the deadline for the written report. The survey will be divided amongst the committee members (4/member); each will provide a summary of the findings on a PowerPoint slide in a bulleted format with a detailed section written below the slide (in the note section). A total of 309 surveys were completed; a participation rate will be calculated when we can determine the denominator; this can be obtained from the number of nurses who had the opportunity to participate through the PHS Nurse listserv and website. Some of the questions have narratives which will require more time to summarize these findings. (For the narrative questions, surveyors will have to go back to the raw data).

Participation w/ Tri-service Benner Study:

- Our PAC liaison (champion), CDR Debisette, with the Tri-service group continues to maintain working relationship with the Tri-service Research Group.
- The Benner Study (in which PHS Nurse Officers were participants and survey reviewers in the study) is in the analysis phase.

Participation w/ NPAC Lunch and Learn:

For the "Lunch-and-Learn" can do lessons learned, study survey basics, what are the strategic plan, mission of the PAC and strategic goals and this is what the survey should be formulated . The next available slot for a Lunch and Learn session will be the September 21st N-PAC meeting.

The Research Committees' Strategic Plan: The change our committee made was to move Activity 2.8 from the communication section to the research section under objective #4 to read:

Objective 4	Conduct nursing research to support the mission and vision of PHS nursing, and to support the PHS Nurse Category Strategic Plan.		
Activity 4.1	Conduct a survey designed to identify the value and responsiveness of the NPAC Committees	Research	Ongoing

Research Sub-Committee's budget proposal: (a "wish-list") the one item the committee determined we need is leasing or purchasing "survey analysis software." Our committee Chair, LT West is inquiring into this for the PAC submission.

Our Next Meeting Time – July 31, 2007

JOAG – No Report this month.

NURSE APPLICANT COMMITTEE REPORT

Nurse Applicant Committee FY 08			
JULY			
Nurse Applicants			
Current total number of applicants in NAC packet	108	Total calls to active duty (CADs) by month and agency	14
Current # of conversions	34	HRSA	4
Current # of new applicants	6	I.H.S.	5
		BOP	2
OCCO		USDA	0
Total Applications on hand	233	NIH	1
General Duty	213	SAMHSA	0
IRC	3	CMS	0
JR Costep (Apps)	10	OS	1
Sr Costep (Apps)	7	FDA	1
Total Separations per month and by type	11	Current Status - Total Strength of Nurse Category	1368
Retirements	3		
Inactivations	3	Nurse Category Top Four Agencies	
Terminations	5	I.H.S.	503
IRR Terminations	0	BOP	228
		HRSA	218
		NIH	112

VIII. New Business – CDR Katherine Berkhausen for CAPT David Kelly

1. Elections

Elections for seven N-PAC voting position vacancies

N-PAC Bylaws, Section 5

- 11-20 representatives
- 1 representative for OPDIV/non-HHS organization with 5 or more members
- At-Large possible for 1 to 5 PHS nurses
- 1 representative for 5-100 PHS nurses with no more than 3 representatives per OPDIV/non-HHS organization

Status:

- Six terms will expire at the end of this fiscal year [HRSA (1), IHS (1), NIH (3), and SAMHSA (1)]
- Not all OPDIV/non-HHS organization have a representative; and
- Distribution of representatives are inconsistent with the N-PAC Bylaws [IHS (1) and NIH (1) have more than the allotted representatives; BOP (1), DHS (1), and HRSA (1) have less representatives than allotted in the Bylaws; and ACF, AHRQ, DOD, EPA, and USDA lack representation based on the number of PHS nurses assigned]

Recommendation:

- Approve the establishment of an At-Large seat to cover the OPDIV/non-HHS organization with less than 5 members;
- Correct the distribution of representatives by number of PHS nurses per OPDIV/non-HHS organization; and
- Six terms will expire; announce eight vacancies [BOP (1), DHS (1), HRSA (2), NIH (2), SAMHSA (1), and At-Large (1)].

***NOTE INSERT:** CDR Berkhausen reported feedback on the “At Large Voting Tally”. She reported the N-PAC had indeed reached an affirmative quorum on both Issue 1 and Issue 2. The next step would be to initiate nominations to fulfill the membership vacancies. The nomination process with instructions is forthcoming.

2. N-PAC Website

The N-PAC web site will suspend operation in August to allow for its updating in preparation for the integration to the Commissioned Corps environment. Each committee will need to insure their content is up to date and accurate. Submit changes to the Communications Committee subgroup on Website Development.

3. N-PAC Budget

In order to plan for fund raising events for next fiscal year, it will be necessary for N-PAC Committees to identify financial needs for the year. Please submit Committee budget requirements for FY 2008 by C.O.B. August 1, 2007 to CAPT David Kelly via e-mail at david.kelly@hhs.gov.

VIII. Round Table – No Report