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The Nursing Professional Advisory Committee (N-PAC) Charter

(I) MISSION

The Nursing Professional Advisory Committee (N-PAC) provides advice and consultation to the Surgeon General on issues relating to the professional practice and personnel activities of nursing category members who are either civil service employees (CS) or PHS Commissioned Corps (CC) officers. The N-PAC provides similar advisory assistance to the Chief Professional Officer (CPO) and, upon request, to the Operating (OPDIV) and Staff (STAFFDIV) Divisions and non-HHS organizations that routinely use nursing personnel.

(II) RELATIONSHIP OF THE N-PAC TO THE UNITED STATES PUBLIC HEALTH SERVICE (USPHS)

In carrying out its responsibilities, the N-PAC operates in a staff capacity. It does not substitute for line management or in any way exercises the prerogatives of the respective operating programs. While N-PAC members are chosen from the respective OPDIV/STAFFDIV and non-HHS organizations, they neither represent Agency management nor speak for the Agency. They are knowledgeable professionals who represent a cross section of the interests, concerns, and responsibilities of the professionals in OPDIV/STAFFDIV and non-HHS organizations staffed by nursing personnel.

(III) OBJECTIVES

The N-PAC serves in a resource and advisory capacity to assist in the development, coordination, and evaluation of nursing activities in order to achieve the following objectives:

1. To identify and facilitate the resolution of issues related to the nursing category and other related civil service professional disciplines;

2. To identify OPDIV and STAFFDIV and non-HHS organization personnel needs and to assist in meeting these needs through activities such as recruitment, training, utilization, and proper recognition of nursing category members and related civil service professional disciplines;

3. To develop position papers, statistical reports, and/or guidelines where appropriate, in order to advise and comment on both personnel and professional practice issues involving the nursing category and/or related civil service professional disciplines;
4. To promote the development and utilization of nurses by HHS and other health-related programs (e.g. other federal/state agencies, international organizations);

5. To promote cooperation and communication among nursing personnel and other health professionals;

6. To promote all aspects of the nursing category and related civil service professionals throughout the OPDIV/STAFFDIV and non-HHS organizations, and

7. To liaison with professional disciplines within and among HHS components, and provide advice and consultation to the OPDIV/STAFFDIV/non-HHS organizations upon request.

(IV) FUNCTIONS

In carrying out its broad mission and objectives, the N-PAC shall perform the following functions, including, but not limited to:

1. Providing general professional advice and recommendations by:
   
   a. Reviewing and commenting on issues referred to the N-PAC by the Surgeon General, Chief Professional Officer, OPDIV/STAFFDIV/non-HHS organizations;
   
   b. Analyzing issues, developing findings, and presenting recommendations to the Surgeon General and/or Chief Professional Officer;
   
   c. Providing advice on the professional aspects of the nursing category (i.e., new technologies, regulations, curricula, roles, etc.);
   
   d. Providing advice on ethical and professional standards issues;
   
   e. Reviewing and providing recommendations concerning proposed or needed changes to appointment standards and professional requirements (e.g., licensure required to maintain high quality staff).
2. Acting as the primary resource for career development by:
   a. Providing advice and recommendations on career development issues for both CC and CS nursing personnel;
   b. Providing advice and recommendations on operating practices concerning the appropriate/optimum use of personnel designed to best meet HHS needs and the needs of the individual;
   c. Providing advice and recommendations on issues related to PHS promotion practices and, for commissioned officers, assimilation into the Regular Corps for the nursing category;
   d. Formulating criteria for the selection of candidates for training and/or other career development options;
   e. Identifying educational needs for the nursing category (e.g. continuing, long-term, intramural, extramural) and recommending training and/or experience opportunities designed to meet these needs;
   f. Reviewing applications for long-term training, assessing the appropriateness of requested training in terms of the individual's and the Service's need, and providing recommendations for the approval/disapproval of such requests.

3. Providing advice and assistance on staffing issues by:
   a. Assessing and projecting the need for nurse staffing levels, both CC and CS personnel, throughout the HHS and elsewhere;
   b. Providing advice on the goals, objectives, and procedures designed to meet the HHS staffing needs;
   c. Providing guidance for recruitment to the short-term student affiliation programs (COSTEP, summer students, etc.);
   d. Developing, and/or reviewing and analyzing nursing category-specific the PHS recruitment materials, procedures, and programs;
e. Helping to establish networks of current, as well as former, HHS professionals, who can assist and facilitate recruitment activities;

f. Providing guidance to approved HHS recruiters concerning the recruitment of qualified candidates to the nursing category and related civil service professional disciplines; and

g. Assisting in the development of orientation materials for newly-hired nursing category professionals and providing advice/recommendations concerning orientation programs.

4. Communicating and encouraging appropriate use of awards/recognition systems by:

a. Identifying, establishing, and helping to administer special professional, category specific awards; and

b. Maintaining cognizance of the existing CS and CC award programs and opportunities.

5. Serving as a communication link and information resource for the nursing category by:

a. Communicating to CC/CS nurses important information concerning professional, ethical, and technical issues;

b. Encouraging individual membership in, and involvement with, professional organizations and societies in order to promote open communication with nurse colleagues;

c. Ensuring the distribution of minutes and/or other N-PAC-developed materials to appropriate CC/CS personnel to the extent possible; and

d. Ensuring the availability of N-PAC minutes to other PACs and the Office of the Surgeon General through the N-PAC website or listserv.

(V) MEMBERSHIP

1. Basic Eligibility Requirements: Members must be full-time CC or CS personnel, and at the time they are nominated and appointed to the N-PAC, meet the eligibility requirements for initial appointment as a nurse to
the commissioned corps or civil service personnel systems.

2. Size of the PAC: The N-PAC shall have no fewer than 7 and no more than 20 voting members.

3. Organizational Representation: In order to provide the range of experiences and perspectives necessary for addressing issues before the N-PAC, every effort must be made to have the broadest representation possible among all agencies that are routinely staffed by Commissioned Corps Officers of the nursing category.

4. Geographic Considerations: The N-PAC will have, as voting members, at least two individuals whose regular duty station is geographically removed by a distance of 75 or more miles from the Washington Metropolitan Area.

5. Gender and Minority Representation: Every effort will be made to assure that the N-PAC does not consist (1) entirely of men or entirely of women or (2) entirely of one race, as long as no selection is made to the N-PAC on the basis of gender or race.

6. Personnel System: The N-PAC will not consist entirely of CC or entirely of CS personnel.

7. Professional Seniority: The N-PAC will have as a voting member a minimum of one individual who at the time of appointment to the N-PAC has less than 5 years of professional experience.

8. Ex Officio Members (non-voting): The Chief Professional Officer is an ex officio member of the N-PAC [see IX (1)]. The former chair may serve 1 additional year as an ex officio member of the N-PAC [see VIII (3)]. The N-PAC may identify other individuals and request that they serve as ex officio members.

9. Liaison Members (non-voting): The N-PAC may identify individuals to serve in a liaison capacity to provide information or assist with activities.

(VI) NOMINATION PROCESS

1. Annually, the N-PAC will solicit, through newsletters and other appropriate means, nominations for vacancies on the N-PAC from all individuals in the nursing category and represented civil service professional disciplines. Self-nominations will be solicited. The names will be transmitted by the
CPO to the nominee’s respective OPDIV/STAFFDIV/non-HHS organization who may endorse the nominee(s) or provide alternate or additional nominations meeting the general representation requirements. The OPDIV/STAFFDIV/non-HHS organization’s response will be reviewed by the N-PAC and CPO who will identify, by name, those highly qualified to fill anticipated vacancies. A final list of nominees will be sent by the CPO to the Surgeon General for selection and approval.

2. This nomination process shall be conducted so that the final nomination package is available for the Surgeon General’s consideration no less than 60 calendar days prior to the expiration of the regular term of the member.

3. Should the need arise to fill an unexpired term, the same process used for regular term appointments will be followed, except that the nomination package will be conveyed to the Surgeon General as soon as possible for action.

(VII) TERM OF APPOINTMENT

1. Terms will be staggered so that approximately one-third of the members’ terms will expire annually. The N-PAC shall determine and report to the Surgeon General the day and month chosen as the beginning of its operational year.

2. Once a member has accumulated a lifetime total of 6 years of service on the N-PAC, they are not eligible for reappointment. Terms of office may be served consecutively at the discretion of the N-PAC.

3. Alternates: Cognizant of the demands of the member’s primary work responsibilities and the N-PAC’s need to conduct business, the N-PAC has the option of establishing procedures to allow each voting member to appoint, and inform the Chairperson of, a single individual who can serve as his/her alternate. Such alternates shall have voting privileges when serving in the place of the primary member. It is the responsibility of the primary N-PAC member to keep the alternate fully informed and knowledgeable of the N-PAC’s activities. Any OPDIV/STAFFDIV/non-HHS organization clearance or approval requirements for travel/per diem will have to be handled within the OPDIV/STAFFDIV/non-HHS organization by the primary N-PAC member.

4. Attendance: Any member of the N-PAC who frequently misses meetings without just cause can, at the discretion of the N-PAC, be asked to voluntarily resign from the N-PAC, or the N-PAC can initiate a request to the Surgeon General to terminate said membership and so inform the
(VIII) CHAIRPERSON
1. The Chairperson will be elected by the voting membership of the N-PAC.

2. Term of the Chairperson: The Chairperson will serve a 1-year term and may be re-elected for 1 additional year. The N-PAC may choose to elect the Chairperson for a 2-year term with no opportunity for re-election to that post. To promote leadership succession, the N-PAC may also elect a Chair-elect who will serve a 2-year term. During the first year the Chair-elect will orient to the role of Chair and in the absence of the Chairperson will act as the Chair for meetings and other functions as deemed appropriate. They will assume the full role and responsibilities of Chairperson during the second year.

3. Appointment and N-PAC membership: If the term of Chairperson coincides with the expiration of that individual’s membership on the N-PAC, the former Chair may serve one additional year as an ex officio member of the N-PAC provided the Agency Head is informed and concurs with the extension, unless reappointed as a regular member per the provisions of Section (VI).

4. Relationship with other committees: The N-PAC Chairperson represents nurse category concerns and collaborates with other PAC category chairs and with the Surgeon General’s Policy Advisory Council Meeting & Chief Professional Officers/PAC Chair Meeting.

(IX) CHIEF PROFESSIONAL OFFICER (CPO)
1. N-PAC Membership: The Chief Professional Officer shall be a non-voting ex officio member of the N-PAC.

2. Relationship with the N-PAC: All output of the N-PAC, whether it is correspondence, reports, minutes of its proceedings, or other, must be transmitted through the CPO who, as he/she may deem appropriate, may provide concurring or non-concurring comments but may not stop or unduly delay such transmittals.

(X). OPERATIONS AND PROCEDURES
1. The N-PAC shall develop its own internal operations and procedures (e.g., bylaws). These shall include, at the minimum, provisions covering the following:
a. Operational year: The N-PAC shall begin its operational year on the first day of October.

b. Frequency of meeting: Meetings will be held once per quarter at a minimum.

c. Agenda: A meeting agenda and appropriate background material is to be made available to the members.

2. Records and Reporting:

a. Minutes of each N-PAC meeting will be developed and approved by the N-PAC members.

b. Minutes and reports of the N-PAC will be distributed in accord with Item IV (5) (c) FUNCTIONS.

c. The N-PAC must establish a system to maintain a permanent file of the official minutes and reports of the N-PAC.

3. Executive Secretary: The Executive Secretary must be a member of the category but is not required to be a voting N-PAC member.

4. Quorum: A quorum consists of at least 50 percent of the N-PAC voting membership. An alternate attending in lieu of the member shall be counted in determining the quorum requirement.

5. Voting: Where voting is required or appropriate (i.e., election of the Chair), action will be determined by the simple majority of those voting members present.

6. Committees: Where the N-PAC elects to establish standing or ad hoc committees, said membership may include non-N-PAC members provided that the chairperson of the committee is a voting member of the N-PAC.

7. Charter Update and Approval:

a. The N-PAC is required to develop a formal written charter that is in compliance with the Office of the Surgeon General’s Model Charter.

b. The N-PAC’s charter must be reviewed and approved by the Surgeon General.
c. The N-PAC charter is to be reviewed and, if necessary, revised no less than every three years. Any changes to the N-PAC Charter must be forwarded to the Office of the Surgeon General for approval.

Approved:

__________________________________
RADM Steven K. Galson
Acting Surgeon General U.S. Public Health Service

Date