

Therapist Professional Advisory Committee Celebrates the 2021 Virtual Category Day



Colonel Bradley Boetig, MD, MPH, Medical Corps, USAF, a professor for the Uniformed Services University of the Health Sciences, shared educational opportunities for Global Health Engagement with USPHS Therapists.

by CDR Katie Jacques, PT, DPT, OCS, CAHA; LCDR Carla Chase, CCC/SLP.D.; LCDR Kevin Healy, DPT, OCS, WCC

On August 25, the Therapist Professional Advisory Committee (TPAC) proudly hosted the second virtual Category Day. LCDR Carla Chase and LCDR Kevin Healy, along with the Task Force Secretary LT Courtney Jones, diligently coordinated the Category Day twenty-nine-member Task Force. The group had special advisement from two previous Category Day organizers LCDR Lars Krusholm and CDR Charles Rainey. LCDR Chase established committees who collaborated over the last six months to coordinate

speakers, awards, photo slide shows, continuing education credits, and other logistics.

The TPAC's Chief Professional Officer, CAPT Jeffrey Richardson, PT, DPT, OCS, ATC, CPH, eloquently shared the State of the Therapist Category. CAPT Richardson reviewed historical deployment and promotion data, acknowledged the morale amongst the Commissioned Corps, and encouraged all officers to remember our mission...to protect, promote, and advance the health and safety of our Nation. He honored the efforts, noble work, and officership amongst TPAC

see **THERAPIST** continued on page 12

from the
Executive
Director



Jacqueline Rychnovsky, PhD, FAANP, CAE
Captain (ret.), Nurse Corps, US Navy

COA Comes Through Again

For the second year in a row, exhausted and worked to the bone Commissioned Corps officers faced the threat of losing their hard earned leave, and COA came to the rescue. Due to reasons long forgotten, it is written into federal law that officers in the U.S. Public Health Service are only allowed to carry 60 days of leave into the next fiscal year. This is typically not a big deal since busy Commissioned Corps officers could usually find time to take their well-deserved time off. But, since the beginning of the COVID-19 pandemic in February 2020, everything changed. Most officers were put on a high alert and unable to take leave. COA first sprang into action in the summer of 2020, and after many meetings with the House and Senate, we were successful in having language inserted into Public Law 116-159 which allowed for more than 60 days of leave carryover from 2020. Unfortunately, this was just a temporary fix.

see **EXECUTIVE DIRECTOR** on page 18

COA Member Benefits

Capitol Hill Representation

Efforts on Capitol Hill continually support all Commissioned Corps officers – active, former, and retired

Local Representation

COA Local Branches provide venues for meeting fellow officers and a forum for the discussion of issues within the Commissioned Corps

Newsletter

Newsletter reports on monthly activities and items of interest about the Corps and COA

Ribbon

Authorized to be worn on the PHS uniform by members in good standing when attending COA functions

Insurance Programs

Low-cost insurance programs that may continue as long as your membership in COA remains current

USF Online Programs

Discounted degree and certificate programs like PhD, DrPH, MPH, MSPH, MHA

NYMC Online MPH

50 percent discount for the online MPH and certificate programs

Scholarship Program

College scholarships for children and spouses of COA members

The Ohio State University

In-state tuition for graduate nursing and certification programs



Legislative Update A Congressional Oversight

by Michael Clark, MPA

Oversight. The word has several meanings attached to it. Ask a friend, colleague, or spouse what the word means and answers will vary wildly. Look at the word for too long, and its meaning will dissolve or appear like a vocabulary term on a high school German language exam.

Our nation's legislative branch defines the term a certain way:

"Oversight is one of the most important responsibilities of the United States Congress. Congressional oversight refers to the review, monitoring, and supervision of federal agencies, programs and policy implementation, and it provides the legislative branch with an opportunity to inspect, examine, review and check the executive branch and its agencies. The authority of Congress to do oversight is derived from its implied powers in the U.S. Constitution, various laws, and House rules."

Yet if you ran into someone named Oxford, Cambridge, or Merriam Webster at a dinner party, their first thought would be much different like, "an unintentional failure to notice or do something."

This duality shines brightly in the context of recently passed House legislation: the Alexander Lofgren Veterans in Parks Act (H.R. 4300). The bill "makes America

the Beautiful-National Parks Federal Recreational Lands Pass available, without charge, to members of the Armed Forces, veterans and Gold Star Families. The pass covers the entrance fee and standard amenity recreation fee for all federal recreational lands and waters."

This bill unanimously passed the House of Representatives with bipartisan support on July 29, 2021. At first glance, the bill serves as a wonderful use of Congressional oversight, giving veterans free lifetime access to national parks and public federal lands, while giving active-duty military free annual passes. Access will potentially be granted to over 2,000 federal recreation areas, including national parks, national forests, and wildlife refuges. Those with this pass will be granted lifetime access to the treasures tucked amidst our landscapes, from Redwood National Forest to Acadia National Park.

The bill, in its current iteration, also contains a major oversight: by using "Armed Forces" instead of "Uniformed Services" terminology, this legislation leaves behind veterans and servicemembers of USPHS entirely. The oversight becomes even more pronounced when considering that the Commissioned Corps have a

see **LEGISLATIVE** continued on page 19

The Value of a Borough Disaster Preparedness Coalition in Bridging Gaps

by Sharmila Rao Thakkar, MPH, MPA,
and Frank Blanceró, Staten Island Not for
Profit Association/Staten Island COAD

The Staten Island Community Organizations Active in Disaster (SI COAD) and its Medical Ecosystem (MES), a coalition managed by the Staten Island Not for Profit Association (SINFPA), has been active in COVID-19 pandemic response since March 2020 when operations completely shifted to meet the public health needs of communities throughout the Island. Staten Island has been one of the New York City boroughs with among the highest COVID-19 rates, the least vaccination hubs, only two hospitals and no public hospital, and the least accessible transportation options for communities hardest hit by COVID-19.

Barclay-Giel Seed Grant support has helped the organization quickly respond to community needs, coordinate resources, and facilitate collaboration to strengthen local response. In partnership with the Office of the Staten Island Borough President (SIBP), healthcare and social service providers and response agencies, they launched a virtual Emergency Operations Center. An Incident Command System team, with representatives from both Island hospitals, primary care physicians, skilled nursing facilities, community organizations, and the SIBP, began meeting daily to discuss challenges and advocate to the city/state for resources. For more than 18 months, the coalition has addressed needs around supplies, staffing, patient flow and care protocols, testing and vaccinations, providing communications and training, and sharing guidance on mandates, funding, and relief opportunities. The SI COAD-MES Steering Committee, with leadership from healthcare and nonprofit organizations and the SI Long Term Recovery Organization, meets weekly to brainstorm action plans and partner on assessment, outreach, and response.



Volunteers staff a COVID-19 vaccination clinic on Staten Island, NY.

Notable accomplishments through the pandemic include:

- **Consistent, Reliable Communications:** Targeted emails to sector partners, social media channels, and the EverBridge Alert System share the latest guidance, resources, and funding opportunities.
- **Establishing a Community Ambassador Network:** Over 70 key contacts from human services, medical, public safety, and city agencies, were recruited to serve as trusted voices to amplify messages. They are the “eyes and ears” on the ground through which vital information and resources travel quickly in both ways.
- **Hosting Community Town Halls:** Over 400 participants have been reached by partnering with healthcare, community, and faith-based organizations to address vaccine access and hesitancy.
- **Issuing Borough-wide Needs Assessments & PPE Distribution:** Determining level of urgency and

organizational needs for PPE and other resources was an immediate priority.

In partnership with the SIBP, the group secured donations of supplies and raised \$30,000 to purchase supplies. More than 240,000 units of KN95, 3-ply and cloth masks, gloves, face shields, and hand sanitizer have been distributed to community groups, healthcare organizations, and first responders.

- **Implementing Staten Island: Stay Strong, Stay Safe Public Messaging Campaign (#SISayStrongStaySafe):** The campaign provides sample text and graphics to adapt and share, video PSAs, and social media posts about the Core 4, getting tested and vaccinated.
- **Broadening Vaccine Education and Access:** Coalition partners are working with group homes and the developmentally disabled population, adult care and skilled nursing facilities and congregate care settings to

see **PREPAREDNESS** continued on page 13



PHS COMMISSIONED OFFICERS FOUNDATION *for the* Advancement Of Public Health

Examining Crisis Standards

by Rear Admiral Steve Solomon, MD,
FACP, FIDSA, USPHS (ret.)

In the aftermath of COVID-19, there will be numerous investigations, after-action reports, congressional inquiries, and expert panel analyses from the National Academies and other sources. These reviews will address a long list of issues as they examine the way our nation and the world responded to the pandemic. One of the questions to be addressed should be whether there is a place for crisis standards of action in the public health system as well as in the health care delivery system. Another will be whether we in public health have consistently adhered to the rules of crisis communication during the pandemic.

The National Academy of Sciences defines [crisis standards of care](#) as “a substantial change in usual healthcare operations and the level of care it is possible to deliver, which is made necessary by a pervasive or catastrophic disaster.” These standards specifically address a system of triage which rations health care services and forces health care providers to decide which patients will and will not receive interventions that are in too short supply. Healthcare professionals want to provide the optimum care to every patient in every encounter. But a crisis necessitates such difficult and troubling decision-making.

The Centers for Disease Control and Prevention describes crisis communication as “the process of providing facts to the public about an unexpected emergency, beyond an

organization’s control, that involves the organization and requires an immediate response” (emergency.cdc.gov/cerc/manual/). CDC advises that there are five crucial pitfalls to avoid in crisis communication. These are: (1) mixed messages from multiple experts, (2) information released late, (3) paternalistic attitudes, (4) not countering rumors and myths in real-time, and (5) public power struggles and confusion. The hallmarks of crisis communication are timeliness, honesty, and transparency, these being particularly important to build and maintain the trust of the public, whose cooperation and adherence to public health measures will always be the most important factor in the success of those measures.

I believe that throughout the COVID-19 crisis, we have largely relied upon our existing structures and processes. We have worked within the established constructs of the always uncomfortable mix of politics and science that is inherent to public health. We have used our departments, agencies, and bureaus in their often-siloed ways and with the always negotiated and never frictionless interaction between local, state, and federal authorities. We were not able to overcome conflicts about information sharing, data ownership and access to health records. We have in too many instances, failed to avoid the communication pitfalls that CDC warned us against.

In the evaluations and examinations to come, there will be debates about whether the speed with which vaccines were authorized and approved matched

the extraordinary speed with which they were developed. There will be debates about how information was shared with the public, who shared it, when it was shared and whether it was clear, timely, coordinated, and engendered trust. There will be dissections of how decisions were made, who made them and how they were carried out. There will be discussions—hopefully driven by scientific evidence—about contentious issues such as vaccine mandates and school closings. There will be attempts, once again, to address the long-standing problems that impede real-time health data collection, use and dissemination.

Many other questions will be asked, and the resulting documents will be voluminous, both in length and number. One question we urgently need to resolve is whether crisis standards of action—deviations from the normal processes, procedures, and bureaucracy of public health—should have been implemented to a greater degree than was considered. Alternatively, we may conclude that implementing crisis standards wouldn’t have been enough and that the foundational system of public health in the United States, described by the National Academy of Science in 1988 as being in “disarray” (www.nap.edu/read/1091/chapter/3), should be completely restructured at all levels. All those questions need to be answered and acted upon before the next national public health crisis.

CDR Valente Selected as Rhode Island Pharmacist of the Year

by CDR Mary McGarry, BS, PharmD, BCSCP, USPHS

Kelley Sanzen, PharmD, RI Pharmacists Association

CDR Stephen Smith, PA-C, USPHS

On September 16, the Rhode Island Pharmacists Association awarded our COA Board Chair, Commander Kelly Valente, the Guido Pettinicchio Award as the 2021 Rhode Island Pharmacist of the Year. This award was established in honor of the former Rhode Island Chief of Pharmacy in the Division of Drug Control and pays tribute to the contributions he made to the profession of pharmacy in Rhode Island during his relatively short life span. Award recipients must be active members of the Rhode Island Pharmacists Association, licensed in the State of Rhode Island, and have made significant contributions to the profession. CDR Valente has been an active member of Rhode Island Pharmacists Association for many years and has served on multiple committees, including Fundraising Co-Chair and a member of the Council of Administration. CDR Valente was recognized for her outstanding contributions in response to the COVID-19 pandemic.

During her deployment, the State of Rhode Island had critical staffing issues at their state-run veteran homes and group homes. She routinely met with state political appointees and state senior leadership to assist with temporary placement of staff. She also provided federal assistance with Rhode Island Department of Emergency Management's issues with personal protection equipment, testing equipment managing issues with field hospitals.

When the FEMA Region I Federal Coordinating Officer and the Assistant Secretary for Preparedness and Response (ASPR) Region I Federal Health Coordinating Officer established a task force to address the devastating impact of COVID-19 for residents of long-term care facilities (LTCs), CDR Valente was asked to serve as the Task Force Leader. She brought to bear 14 years of experience working at the Centers for Medicare & Medicaid Services, her deployment experience with Region I ASPR, and her known leadership skills. Composed of subject matter experts, this group was tasked with developing recommendations to combat the spread of COVID-19 and mitigating its impacts on over 91,000 residents in 832 LTCs across New England, and to ensure a unified regional governmental message. The Task Force addressed topics such as adequacy of personal protective equipment, testing, infection control, staffing, vaccine development, communication challenges, regulatory issues, and how the public health emergency amplified these issues in LTCs across New England. COA congratulates CDR Kelly Valente on her award.



CDR Kelly Valente, PharmD, MS, BCACP



Board of Directors

Membership Matters

by CDR Kelly Valente, PharmD, MS,
BCACP

As I write this, we are 90 days into the COA fiscal year. It is crunch time to ensure we retain our members. But why are we members of COA? Here are some thoughts on why I think membership matters.

Advocacy: Through our amazing Legislative Affairs Committee and lobbyists at Taylor Strategies, COA was successful in advocating for a DD214. Together, we finalized language that got placed in H.R.5305 - Extending Government Funding and Delivering Emergency Assistance Act, (i.e., Continuing Resolution for Fiscal Year 2022) to ensure the USPHS Commissioned Corps officers could carry over their "use or lose" leave accrued in excess due to increase deployments. We have much more work to do. Our Legislative Affairs Committee priorities are

listed at coausphs.org/page/Priorities, and they have just gotten started.

Fellowship: There are many of us who leave family and/or friends for the service of health. Some of us go to rural areas while some are stationed in cities. The general population commonly does not know who we are, what we do, and why we exist. We are a small service, often perceived as hidden or unknown. Our work may seem demanding to an outsider and our lifestyle may appear strange to a civilian. Through the COA Local Branches, an officer can lean on their COA family to speak candidly about their careers.

Passion: What makes me a life member of COA is the 100% dedication and passion to our members, active duty, ready reserve, and retired alike. I cannot tell you the amount of behind the scenes work our members, Board of Directors, and staff have done to support the USPHS Commissioned Corps. Sometimes it is a

simple phone call to listen to a member's concerns. Other times it a letter of support for an officer's goals. COA is passionate about the Corp and its future.

We aim to ensure COA can assist with as much as our bandwidth allows. COA has many people monitoring social media to track issues bubbling to the surface. The extensive services COA provides can only occur if you a member. Without you, we cannot succeed. Please renew every year and recruit a colleague to join.

Longtime members should consider life membership. Becoming a life member of an organization shows a high level of commitment and respect to both the organization and your profession. Others take notice. Becoming a life member may open new opportunities.

Thank you for your faith in COA. With passion I say there is more advocacy success and fellowship to come.

By Par a Great Golf Tournament

by CDR David Schwab

The PHS Commissioned Officers Foundation for the Advancement of Public Health (COF) held its 15th annual golf tournament on September 20 at Maryland National Golf Club in Frederick. All signs point to this being one of the most successful to date. We had over 90 golfers participate, three new corporate sponsors, and several invited veteran guests. The morning began with a catered breakfast from Chick-fil-A and a live performance of the Star-Spangled Banner by retired Master Sargent Caleb Green. After the groups finished their round, they retreated to the clubhouse for a wonderful Cajun themed lunch buffet. During the lunch, numerous awards and raffle prizes were given out including cash prizes to the top three teams.

COF thanks all of those involved. We thank sponsors, local businesses who donated raffle prizes, all participants, and the many volunteers who helped to make the golf tournament possible.

If you or someone you know may be interested in sponsoring the annual golf tournament, then please share this website with them: www.phscof.org/golf-tournament.



Maryland National Golf Club in Frederick, MD.



Golfer tees off and seeks the fairway.



Golfers enjoy the COF golf tournament.



Foursome after finishing their putts at Maryland National Golf Club.

Commissary in Tucson Displays USPHS Flag

by RADM (Ret.) Rich Rubendall

Does your commissary display the USPHS flag? Ours does! Approximately 20 years ago, the commissary at the Davis-Monthan (DM) Air Force Base in Tucson, Arizona, hung the flags of the Air Force, Army, Navy, Marine Corps, and the Coast Guard above its registers. Being regular patrons of the commissary, numerous USPHS officers of the Tucson COA Branch and assigned to the IHS and the local BOP decided that the USPHS flag also needed to be displayed. A couple of Branch officers met with the directorship of the DM commissary. After indicating that they didn't know the USPHS Commissioned Corps even existed, we provided a brief background and history of who we are to them. The director agreed, provided we gave him a flag. The Tucson COA Branch approved purchasing an outdoor USPHS flag to match the others. To this day, the USPHS flag is proudly displayed at the commissary. Speak with your commissary about doing the same.



USPHS flag displayed in the Davis-Monthan AFB Commissary in Tucson, AZ.

My **practice** is limiting exposure to hazardous materials and disease.

My **passion** is saving lives.

Join me and earn a **PhD, DrPH, MPH, MSPH, MHA, BSPH** or graduate certificate in an **online, on-campus or blended** format.

Reduced rate tuition for eligible online courses.

preadmissions@health.usf.edu
bit.ly/StudyatUSFCOPH
813-974-6505

#1 public 4-year university in the nation for veterans MilitaryTimes, 2018

USF HEALTH
COLLEGE OF PUBLIC HEALTH
our practice is our passion.



Keep Up The Rates

by Jacqueline Rychnovsky, PhD, CAE
Executive Director

COVID-19 has impacted our health and well-being beyond the damage caused by the virus, with profound implications across the healthcare system. During the pandemic, routine vaccination rates have declined significantly across all populations, with rates plummeting as much as 95 percent for some vaccines. We know that vaccines are one of the most important and effective public health prevention tools available, and low vaccination rates can lead to outbreaks of deadly diseases, placing vulnerable individuals at a time when capacity at health care facilities is already strained.

This is why COA is pleased to join the National Foundation for Infectious Diseases and more than 140 partner organizations on the Keep Up The Rates campaign (KUTR), an effort to encourage everyone to receive recommended vaccines that they may have delayed during the pandemic. Since the campaign launch in August of 2020, KUTR has engaged national experts and leading public health organizations to reach populations most at risk of delaying vaccinations or experiencing complications from vaccine-preventable diseases.



KUTR collaborates with its partners to disseminate information about the importance of routine vaccinations through a variety of channels including webinars, partner Q&As, infographics and public service announcements in English and Spanish, and events such as satellite media tour with NFID experts that reached over 4 million viewers and listeners nationwide.

As the pandemic continues to evolve, protecting and promoting public health is more important than ever. We are excited to be a part of this important public education effort. For more information about the Keep Up The Rates campaign, visit www.nfid.com/KeepUpTheRates.

Service Before Self: A past reflection during a current crisis

by LCDR Mouhamed “Mo” Halwani, MPH, MS, MB (ASCP)CM
President, Greater New York Commissioned Officers Association

All of us have that reason that inspired us to serve. For me, it was hearing about the United States Public Health Service (USPHS) Commissioned Corps’ efforts during the 2014-2016 Ebola outbreak. I was working as a microbiologist in a counter terrorism laboratory at the time, and I recall being naively in awe of the opportunity to be on the front lines. As a result, I embarked on a journey to graduate school to obtain my qualifying degree to earn my USPHS commission.

I was reminded of this after reading the book *Service Before Self: Responding to the 2014-2016 Ebola Crisis*. I recall feeling envious about the efforts of those deployed and captivated by what these officers did. I found myself remembering how I wished I could participate in a similar mission.

It is a little ironic that, when I received my copy of the book, the COVID-19 pandemic was just starting to impact our way of life. Being asked to serve multiple times during made me realize the significance of how officers responded to the Ebola outbreak. Being asked to put your life in harm’s way and leave your loved ones behind to aid others wasn’t really something I accounted

for when pursuing to be an officer. I never factored in all the intangibles that go into a mission of this nature. Being called to serve during the pandemic has afforded me great perspective when it comes to the demands on my colleagues who deploy and their selflessness. This perspective has kept me grounded and motivated to support the mission of the USPHS.

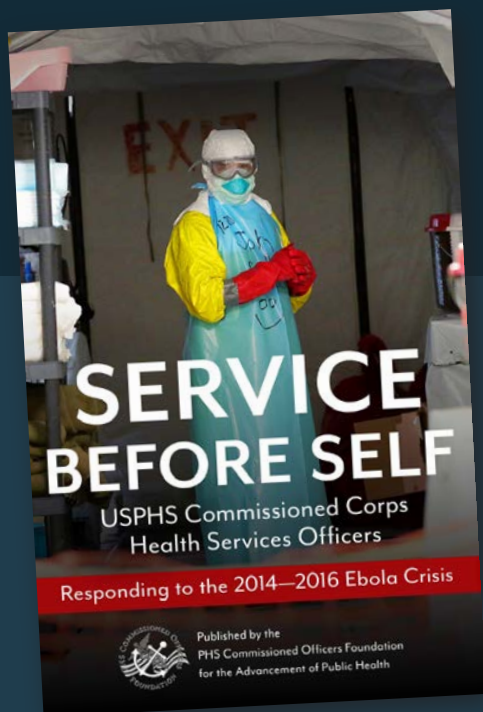
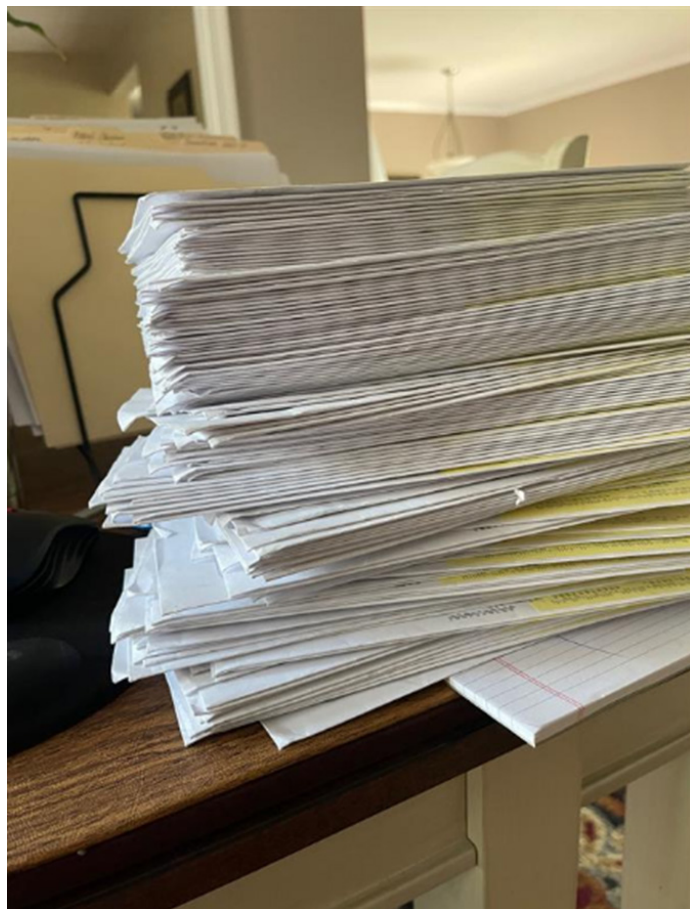
The book *Service Before Self* documents the worst Ebola outbreak in documented history. It allows for the reader to get a sense of the leadership for the mission and provides insights from RADM Scott Giberson, who helped to coordinate the deployment of USPHS officers. The book is told through the eyes of officers in the Health Services category, which has over 1,100 active-duty officers representing 53 specific disciplines and is the most diverse category in the Commissioned Corps. *Service Before Self* is a demonstration of how our uniformed service was able to offer hope and healing during that time of crisis and what it meant to be “In the Service of Health.”

For all of us who are serving, this history is a reminder of our willingness to put our lives on the line to protect the values we hold most dear. For those who served during that time, it’s a chance to recall a highlight of their careers in uniform. *Service Before Self* can be ordered at <https://tinyurl.com/servicebeforeself>

Have you Moved in the Past 5 Years?

During our annual dues renewal cycle, we heard from many members that they still prefer receiving a paper invoice. On August 18, our printing vendor mailed over 1,300 paper invoices to many long-time COA members. To ensure they would be delivered quickly, COA paid the extra fee to have the addresses verified against the U.S. Postal Service™ database, to include a “Move Update” address correction. Imagine our surprise when we received this stack of returned invoices last week, 213 undeliverable pieces of mail. Move Update is a means of reducing the number of pieces in a mailing that require forwarding or return by the periodic matching of a mailer’s address records with change-of-address orders received and maintained by the Postal Service™.

If you were expecting a paper invoice and didn’t receive one, log in your COA profile to check your mailing address. Otherwise, please send an email to coamembership@coausphs.org or call Donna at (301) 731-9080. It’s important to us that you don’t miss important communications from COA.



SERVICE BEFORE SELF

- *Now available for purchase!*
- *Order direct and save!*
- **Cost \$39.99**

Proceeds from your purchase will be donated to the Koop Living Legacy Fund which provides USPHS Scientific & Training scholarships to junior officers.

Order link <https://tinyurl.com/servicebeforeself>

“Service Before Self’ documents one of the USPHS emergency responses to a public health emergency and is a must read for anyone interested in the history and capabilities of our Corps.”

- RADM (ret.) Sven Rodenbeck



West Point Sports Medicine

by CDR Alexei Desatoff, PT, DPT, OCS
IHS - Santa Fe Service Unit
Santa Fe, NM

In June 2021, CDR Alexei Desatoff was selected to attend the 2021 Colonel Douglas A. Kersey Advanced Clinical & Operational Practice Course for Physical Therapists (COL Kersey Course) at the U.S. Military Academy, West Point, NY. The COL Kersey Course, under the U.S. Army Medical Center of Excellence, is an annual intensive 5-day course on advanced clinical practice in neuromuscular physical therapy for Physical Therapists serving the military community.

COL Douglas Kersey was a pioneer in Army Physical Therapy. Today's Army PT is a respected member of the health care team and serves as a neuromuscular physician extender and as a unit fitness/wellness consultant. This status is a direct result of COL Kersey's passion for preventive health and dedication to advancing the professional role of the Army PT. COL Kersey founded the "Neuromuscular Evaluation Post-professional Short Course" in 1979. The course was named after him upon his passing in 1988, as a tribute to his incredible leadership, clinical expertise, and unparalleled impact on the field of military physical therapy.

What made the COL Kersey Course unique in 2021 was the location. For the first time since its inception the course was hosted by the West Point Sports Medicine Physical Therapy Clinic in the historic Arvin Cadet Physical Development Center, U.S. Military Academy – West Point, New York. The clinic's primary mission is to provide care for the Military Academy Cadets as student athletes and warriors. The clinic is also home to the highly respected academic faculty and Fellows of the Army Baylor Sports Medicine Fellowship Program at West Point. Attendees of the



CDR Alexei Desatoff attending the Colonel Kersey Course for Physical Therapists at the U.S. Military Academy.

course included active duty Army, Navy and Air Force physical therapists with CDR Desatoff being the only USPHS physical therapist in attendance.

Course content focuses on interactive patient case scenarios and extensive laboratory experience in areas of radiology, manual physical therapy techniques, strength & conditioning, acute sports injury management and return to duty/sports testing. Lectures and practical lab instructions were provided by the academic faculty and graduates of the Army Baylor Sports Medicine Fellowship Program and the Army Baylor Orthopedic Manual Therapy Fellowship at Brooke Army Medical Center. Hands on skills were assessed and competencies were completed for gaining continuing education units.

Spending a week on the campus of the US Military Academy, which is also a historic landmark, serves as a testament to the diverse opportunities presented to USPHS officers. Cadets are unique in that they are a combination of student, required to be a student-athlete, and officers-in-training to commission into the US Army. These demands place a high operational tempo on the health care team treating the cadets for return to duty. By hosting the COL Kersey Course in a clinical setting versus the previous academic settings, we focused on a treatment driven approach to the course with the end goal of return to duty for the patients. Overall, the course was extremely valuable for the clinical setting and CDR Desatoff considered it an honor to attend.

THERAPIST from page 1

officers and inspired us to not lose sight of the reason we joined the USPHS Commissioned Corps during these unprecedented times. CAPT Richardson's address was reinvigorating for officers to recall the important work that is performed by officers and the valuable impact it has on the United States Public Health Service (USPHS) mission.

The event continued with a robust speaker panel including RADM Stephen Spaulding, OTR/L, Warden USP Lewisburg on Non-traditional Billets and Leadership. The guest speaker and field expert, Col (USAF) Bradley Boetig, MD, MPH, Medical Corps, a professor for the Uniformed Services University of the Health Sciences, shared educational opportunities for Global Health Engagement with USPHS Therapists. This continuing education prospect peaked a lot of engagement from the audience, as we all acknowledge the value of learning in this ever-changing environment. The remainder of the presentations included:

- Commanding a USPHS Deployment Augmentation Team by CAPT Mercedes Benitez McCrary, DrHS, MA, CCC-SLP, MPHc
- A Little Elbow Room Please! Giving the Elbow the Attention it Deserves by CDR Stanley Bennett, MS, OTR/L, CHT, CCCHP
- Lessons Learned in Conducting a Systematic Review by CDR Steven

Spoonemore, PT, DPT, and Dr. Stephanie Pascoe, PT, DPT, MPH

- Rehabilitation and the Aging Brain by CDR Artesiah Rogers, PT, DPT, GCS
- Thrift Savings Plan and Other Topics for Basic Financial Literacy by LCDR Lars Krusholm, PT, DPT, OCS
- A Comparison of Speech-Language Pathology Services During Covid 19 Within Two Department of Defense ICS's by LCDR Courtney Wood, Med., CCC-SLP and LT Gernise Dixon, M.H.S., CCC-SLP
- Promotion Panel Discussion: Eligibility, Benchmarks, and FAQs from Officers Recently Promoted by CAPT Tracy Gualandi, PT, DPT, GCS; CAPT Douglas Henry, PT, MPT; CDR Katie Jacques, PT, DPT, OCS, CAHA; CDR Selena Bobula, PT, DPT, NCS, OCS; CDR Marsophia Power, PT, DPT; and LCDR Tyle Sharp, PT, DPT

The day ended with recognizing the 2020 TPAC Awardees, and one Retiree:

- William Fromherz awarded to CAPT Jean Bradley
- Senior Therapist of the Year awarded to CDR Alexei Desatoff
- Junior Therapist of the Year awarded to LCDR Michael Krok
- Josef Hoog Research Award presented to CAPT Alicia Souvignier, CDR Selena Bobula, and CDR Charles Rainey



- Therapist Responder of the Year awarded to LCDR Jamie Kamon-Brancazio

CDR Andrea Wray Woolridge, IHS Whiteriver, said, "This was a great day of learning and distinguishing those who have won recognition for the work they do every day." The Commissioned Officers Foundation is excited to host the USPHS Scientific & Training Symposium live at the Renaissance Phoenix Glendale Hotel on May 23-27, 2022. We hope to see you there!

PREPAREDNESS from page 3

get vaccines to seniors and those homebound.

- Convening the Staten Island COVID-19 Vaccine Taskforce: The taskforce has promoted borough-wide communication, coordination, cooperation, and collaboration to increase vaccination rates. Two working groups, comprising staff from medical/healthcare and human services organizations, elected officials, and community leaders, have focused on Pop-ups and Creative Partnerships and Vaccine Trust and Messaging.
- Organizing School & Community Vaccination Pop-up Clinics: By coordinating partnerships between schools, community centers, pantries and pharmacies, youth and families have been able to access vaccines

at a trusted site and via mobile health vans. Education webinars for parents prior to pop-ups have helped alleviate concerns.

- Leadership in City-wide Committees: Advocacy and collaboration with partners such as NYC Department of Health, NYC Emergency Management, NYC Voluntary Organizations Active in

Disaster, Nonprofit New York, and NYC COVID-19 T2/Vax (Test/Trace/Vaccine) Community Advisory Board, have been invaluable to local response and recovery efforts.

For more information about the SINFPA and its Staten Island Community Organizations Active in Disaster-Medical Ecosystem coalition, visit www.sinfpa.org.



The CFC is a great way for USPHS Commissioned Officers to support causes near and dear to our hearts. We can donate to the CFC, via the CFC Giving webpage, (<https://cfcgiving.opm.gov/welcome>) through January 15, 2022.

Using CFC code 42884, please pledge a donation to the PHS Commissioned Officers Foundation for the Advancement of Public Health.

Why? Because the PHS Commissioned Officers Foundation has stepped up our programs to “advance public health for a healthier nation.” Our PHS Commissioned Officers Foundation (COF) is committed to the advancement of public health & the development of public health Leaders. Our PHS COF supports:

- **BARCLAYS-GIEL SEED GRANTS:** We provide over \$100,000 each year to fund public health grants in communities around the country.
- **USPHS SCIENTIFIC & TRAINING SYMPOSIUM:** The annual conference continues to offer free continuing education credits and many opportunities to network with fellow PHS officers while learning about advances in the field of public health.
- **JOAG/COF KOOP SPEAKER SERIES:** We work closely with JOAG officers to host a series of talks with researchers and community-based organizations regarding a range of public health topics.
- **MABLE MAY WAGNER NURSING GRANT:** Alongside the Wagner Foundation, we support scholarships for nurses in the Corps.



- **RADM MISHOE ‘BELIEVE’ DIVERSITY SCHOLARSHIPS:** COF provides grants to high school seniors pursuing health sciences and public health collegiate studies.
- **COA FAMILY MEMBER SCHOLARSHIPS:** Scholarships for dependents of COA members.
- **RADM MICHAEL FELLOWSHIP:** Scholarships for junior officers serving in the USPHS Commissioned Corps.
- **PHS & COA LOCAL BRANCH REQUESTS:** COF provides grants for a range of Local Branch programs like golf tournament or run/walk fundraisers to health education events.

Please remember CFC code 42884 on the CFC Webpage: <https://cfcgiving.opm.gov/welcome>

Include 42884 in your pledges. Your generous donation will support COF to advance public health for a healthier nation.

*Dreaming, discovering and delivering a healthier world
through whatever program you choose*



Doctor of Nursing Practice (online)
(a *U.S. News & World Report* top-ranked program)

PhD in Nursing

Master of Healthcare Innovation (online)



**Online certificates, including Health and Wellness Coaching,
RNs in Primary Care, Nurse Educator and more**

Continuing education, including online offerings in community health worker — mental health and substance use, leading primary care through preceptorship and the KySS mental health fellowship



THE OHIO STATE UNIVERSITY
COLLEGE OF NURSING

Learn more and join us:
nursing.osu.edu

Spiritual Wellness

by LCDR Katrina Redman, MT, SPOC, MDiv, Chaplain(BGCT)

The Difference Between Faith and Optimism

As I write this article, media interviews show exhausted medical personnel in tears or angry that the relief that they have longed for has now slipped away. No doubt, many of our officers may be experiencing the same emotions. While I cannot fix this problem, I have discovered a ray of light that may help us as we continue to walk through the darkness.

Optimism is defined by J. D. Walt as positive thinking that “anchors itself in self-confidence. It makes bold declarations and promises as though projecting the outcome will make it so.” Optimism is very useful to us. It helps us with our resilience by taking our own experiences and knowledge and trusting that this alone is sufficient to make things turn out okay.

For most belief systems, faith is the foundational component of their beliefs. Faith, while it often produces optimism, is different. It has a different source, and it requires two things from us. The source is something or someone who is greater than us, and the two requirements are trust and actions. Dr. Martin Luther King Jr. believed that “Faith is taking the first step, even when you don’t see the whole staircase.”

In the Christian belief system, faith is considered a gift from God. However, this gift is dynamic, because it also requires them to respond in agreement and trust directed back at the same source. It is a cycle, not a one-way street. Faith, without the corresponding elements of trust and actions, is incomplete and not cyclical. Incomplete faith can cause us to be disobedient, rely only on our own limited perspectives, and cause our emotions to fluctuate. Unexpected life events, like the pandemic resurgence, also damage our faith cycle.

Why does it matter if you have optimism or faith? It matters because optimism is solely dependent on our self-confidence. It is not anchored to a source that won’t run out or become overwhelmed. Faith will sustain us when our self-confidence waivers, by requiring us to produce actions that demonstrate and validate our positive thinking to others. When we demonstrate that we trust our anchor without knowing the outcome, even in our darkest times, we can stabilize our emotions and finish the task at hand.

Biblical teachings state that faith can move mountains. May we all find ourselves facing level ground soon.

Education: Gallup poll

According to the latest Negative Experience Index taken in 115 countries, the year 2020 was the most stressful year recorded for people around the globe with an increase of 5% from the year 2019.

Spiritual Exercises

1. Consider difficult times when you chose either optimism or faith. What was the outcome?
2. Visit www.yourtewksburytoday.com/2016/04/10/107454/10-strength-training-exercises-of-faith
3. Research what the requirements and outcomes of faith are in another belief system.
4. Ask a friend to explain to you what helps them to get through their challenges. Encourage them.



Questions or comments? Contact me at kredman@bop.gov.

OBITUARY

Captain (ret.) Edwin A. Knecht

Captain (retired) Edwin A. Knecht, 74, of Fort Thomas, Kentucky passed away on September 2, 2021. Edwin was born April 11, 1947, in Covington, Kentucky to Earl and Pearl Tyson Knecht. He earned his Bachelor of Science in Chemistry from the University of Cincinnati and served for 30 years as a U.S. Public Health Service Health Service Officer with the National Institute for Occupational Safety & Health (NIOSH) in the Division of Biomedical and Behavioral Science (DBBS) and Division of Applied Research and Technology (DART). During his career, Ed advanced the health and safety of workers, and their families, by developing research methods and applying those methods to characterize the health effects of respiratory, immunological, and reproductive hazards. During the first half of his career at NIOSH, Ed conducted and published seminal research in laboratory animal models to understand how extreme temperatures and stress impact on the reproductive and intestinal systems, cardiac function, fetal development, lactation, and glucose metabolism. When programmatic changes brought about NIOSH's reorganization, Ed shifted his talents to assess the reproductive health of women workers.

Ed also led an international team in developing analytical methods to measure the principal reproductive hormones in urine and published research demonstrating hormonal indices of reduced fertility in women with overtly normal ovulatory cycles. He collaborated to demonstrate that one of these crucial reproductive hormonal indices was reduced by 33 percent in US Air Force personnel who were exposed to jet fuels and experienced elevated breath levels of aliphatic hydrocarbons. The quality of his research and prolificacy of his publishing lifted the NIOSH Reproductive Endocrinology Laboratory to a level of prominence and high respect internationally.

A dedicated model railroader and family man, he is survived by his wife of 46 years, Marilyn, three daughters, nine grandchildren, and his dog Rufus. He was laid to rest in in Evergreen Cemetery, Southgate, Kentucky. Memorials are suggested to St. Thomas Church, 26 East Villa Place, Fort Thomas, Kentucky 41075.



Shannon James, Esq

Law Offices of David P. Sheldon, PLLC

Worldwide Representation **202-546-9575**

**DEFENDING THOSE AT
THE FOREFRONT OF
PUBLIC HEALTH**

**Administrative
COER Rebuttals and Appeals
EEO Claims
Grievances
PEBs
Separation Boards**

ADDRESSING THE UNIQUE NEEDS OF COMMISSIONED CORPS OFFICERS

Earn an Advanced Certificate in Emergency Management Online and Prepare for Medical and Public Health Emergencies

New York Medical College's (NYMC) School of Health Sciences and Practice (SHSP) gives you the opportunity to learn from leaders in public health whose tried-and-true experience will give you a unique edge in your public health career.

Learn from the experts

With more than 30 years as a health care professional and established educator, Professor George W. Contreras, M.P.H., M.S., M.E.P., CEM, FACEM, continues to play a fundamental role in public health. He serves as assistant professor at the SHSP, assistant director of the advanced certificate in emergency management and assistant director for the Center for Disaster Medicine at NYMC.

Professor Contreras' experience ranges from emergency medical services and disaster management to international disaster response and health services administration. Working on the frontlines during the COVID-19 pandemic, he understands the importance of implementing preventative measures during public health emergencies. His experience as an educator and paramedic prompted him to develop and implement the first college-based paramedic program in Brooklyn, New York, which received national accreditation.

Experience a Hands-On Public Health Program

Learn from experts like Professor Contreras and benefit from the strong working relationship between NYMC and 11 commissioners of health and public health directors on the SHSP faculty in the Master of Public Health (M.P.H.) program at NYMC. Accredited by the Council on Education for Public Health (CEPH), the M.P.H. program offers important opportunities for students to engage in public health challenges through applied practice experiences and capstone projects, encouraging them to support change, as well as analyze, develop and execute policies to improve health care outcomes. This approach helps forge students into health care professionals with the experience and confidence to hit the ground running in their careers. Nearly all of SHSP's programs transcend traditional molds by extending the classroom into the community and using relevant and relatable situations to teach, so that students can experience the real-life applications of their education.

Earn an Advanced Certificate or Degree in Public Health

SHSP offers M.P.H. degrees in health behavior and community health, epidemiology, environmental health science and health policy and management, as well as advanced certificates in health administration, global health, emergency management, environmental health, public health and more.

Highlights

- Benefit From NYMC's Connection to USPHS
- 50 percent tuition discount for active duty service members including USPHS Commissioned Corps officers and HHS employees
- Programs offered both online and on-campus
- Accredited by the Council on Education for Public Health (CEPH)

Ready to apply? Apply now at www.sophas.org. For more information about the academic programs or tuition discounts, visit www.nymc.edu/usphs, or contact the SHSP Office of Admissions at shsp_admissions@nymc.edu or (914) 594-4510.



EXECUTIVE DIRECTOR from page 1

Fast-forward to July 2021 when we were made aware that no permanent fix to this problem was initiated through the Secretary of Health and Human Services. Once again, exhausted officers were faced with the devastating news that they were going to lose their accrued leave on September 30, 2021. COA moved in and rapidly scheduled meetings with the House and Senate. This gave me the opportunity to tell your story to policymakers on Capitol Hill, sharing your passion for serving as America's Health Responders. I described the more than 20,000 deployments that Commissioned Corps officers have completed since January 2020 and spoke about your dedication to improving the health of our nation which led to many long days and long nights, time away from your family, oftentimes putting your own health at risk. It's what you signed up for and you are doing the job proudly, but while doing so many of you were unable to take your earned leave. I explained that unlike the Armed Services covered by Title 10, your leave couldn't be extended through a simple memorandum because Title 42, Section 210, states that only 60 days can be carried over at the end of the fiscal year.

On September 21, 2021, we received the good news that COA's request to have language inserted into the Continuing Resolution made it into the bill. By a vote of 220 to 211, H.R. 5305, was passed. Following this, on September 30, 2021, the Senate passed the bill by a vote of 65 to 35. President Biden signed the bill, now known as Public Law 117-43, before midnight to ensure funding of the government through December 8, 2021. A section in the bill once again temporarily authorizes commissioned officers of the Public Health Service to carry over more than 60 days of annual leave.

I want to thank every COA member who is reading this for remaining a loyal member of COA. Your membership adds to the power of your voice. The more dues-paying members we have, the louder that voice is because Congress and Corps leadership know that we are truly speaking for all officers. Without your dues we can't do hard things like advocacy, or simple things like pay our rent and utilities. No other organization is dedicated solely to representing the interests of active duty and retired PHS officers. No other organization directly reaches out regularly to Commissioned Corps leadership to speak on your behalf. We are here for you.

I ask each of you to commit to remaining a member of COA. If you're a member, please recruit a colleague. If your COA membership has lapsed, I hope you will renew. And if you're a retired officer and think membership in COA is no longer relevant, please reconsider. Retired officers are needed for so many things, from mentorship to supporting COA and Foundation activities in your communities and to advocate for public health when the Public Health Service and the Commissioned Corps are threatened. And COA fights as hard on Capitol Hill to preserve and defend retiree benefits as we do for active duty officers.

It was my pleasure to work on this initiative which was so important to Commissioned Corps officers. Rest assured, we have already begun discussions on Capitol Hill for a permanent fix, and I hope the final column I write on this subject will be good news that COA has taken care of this problem permanently.

UNITED STATES POSTAL SERVICE® (All Periodicals Publications Except Requester Publications)

Statement of Ownership, Management, and Circulation

1. Publication Title: Commissioned Officers Association of the USPHS
 2. Publication Number: 1093-7161
 3. Filing Date: 10/01/2021
 4. Issue Frequency: 10 issues per year
 5. Number of Issues Published Annually: 10
 6. Annual Subscription Price: included in annual dues
 7. Complete Mailing Address of Known Office of Publication (Not printer) (Street, city, county, state, and ZIP+4®): Commissioned Officers Association of the US Public Health Service PO Box 189, Cheltenham, MD 20623
 Contact Person: Teresa Foley
 Telephone (include area code): (301) 731-9080
 8. Complete Mailing Address of Headquarters or General Business Office of Publisher (Not printer) same as above
 9. Full Names and Complete Mailing Addresses of Publisher, Editor, and Managing Editor (Do not leave blank)
 Publisher (Name and complete mailing address): Commissioned Officers Association of the US Public Health Service PO Box 189, Cheltenham, MD 20623
 Editor (Name and complete mailing address): Jacqueline Rychkovsky and John McElligott PO Box 189, Cheltenham, MD 20623
 Managing Editor (Name and complete mailing address): none
 10. Owner (Do not leave blank. If the publication is owned by a corporation, give the name and address of the corporation immediately followed by the names and addresses of all stockholders owning or holding 1 percent or more of the total amount of stock. If not owned by a corporation, give the name and address of the individual owners. If owned by a partnership or other unincorporated firm, give its name and address as well as those of each individual owner. If the publication is published by a nonprofit organization, give its name and address.)
 Full Name: Commissioned Officers Association of the US Public Health Service
 Complete Mailing Address: PO Box 189, Cheltenham, MD 20623
 11. Known Bondholders, Mortgagees, and Other Security Holders Owning or Holding 1 Percent or More of Total Amount of Bonds, Mortgages, or Other Securities. If none, check box None
 Full Name: Complete Mailing Address:
 12. Tax Status (For completion by nonprofit organizations authorized to mail at nonprofit rates) (Check one)
 The purpose, function, and nonprofit status of this organization and the exempt status for federal income tax purposes:
 Has Not Changed During Preceding 12 Months
 Has Changed During Preceding 12 Months (Publisher must submit explanation of change with this statement)
 PS Form 3526, July 2014 (Page 1 of 4) (see instructions page 4) PSN: 7530-01-000-9931 PRIVACY NOTICE: See our privacy policy on www.usps.com

13. Publication Title: Frontline
 14. Issue Date for Circulation Data Below: 10/07/2021

15. Extent and Nature of Circulation		Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
a. Total Number of Copies (Net press run)			
(1)	Mailed Outside-County Paid Subscriptions Stated on PS Form 3541 (include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	1146	1379
b. Paid Circulation (By Mail and Outside the Mail)			
(2)	Mailed In-County Paid Subscriptions Stated on PS Form 3541 (include paid distribution above nominal rate, advertiser's proof copies, and exchange copies)	24	33
(3)	Paid Distribution Outside the Mails Including Sales Through Dealers and Carriers, Street Vendors, Counter Sales, and Other Paid Distribution Outside USPS®	0	0
(4)	Paid Distribution by Other Classes of Mail Through the USPS (e.g., First-Class Mail®)	0	0
c. Total Paid Distribution (Sum of 15b (1), (2), (3), and (4))		1170	1412
d. Free or Nominal Rate Distribution (By Mail and Outside the Mail)			
(1)	Free or Nominal Rate Outside-County Copies Included on PS Form 3541	0	0
(2)	Free or Nominal Rate In-County Copies Included on PS Form 3541	0	0
(3)	Free or Nominal Rate Copies Mailed at Other Classes Through the USPS (e.g., First-Class Mail)	0	0
(4)	Free or Nominal Rate Distribution Outside the Mail (Carriers or other means)	0	0
e. Total Free or Nominal Rate Distribution (Sum of 15d (1), (2), (3), and (4))		0	0
f. Total Distribution (Sum of 15c and 15e)		1170	1373
g. Copies not Distributed (See Instructions to Publishers #4 (page #3))		12	9
h. Total (Sum of 15f and g)		1182	1382
i. Percent Paid (15c divided by 15f times 100)		100	100

* If you are claiming electronic copies, go to line 16 on page 3. If you are not claiming electronic copies, skip to line 17 on page 3.

UNITED STATES POSTAL SERVICE® (All Periodicals Publications Except Requester Publications)

Statement of Ownership, Management, and Circulation

16. Electronic Copy Circulation

	Average No. Copies Each Issue During Preceding 12 Months	No. Copies of Single Issue Published Nearest to Filing Date
a. Paid Electronic Copies	0	0
b. Total Paid Print Copies (Line 15c) + Paid Electronic Copies (Line 16a)	1170	0
c. Total Paid Distribution (Line 15f) + Paid Electronic Copies (Line 16a)	1170	1373
d. Percent Paid (Both Print & Electronic Copies) (16b divided by 16c x 100)	100	100

I certify that 50% of all my distributed copies (electronic and print) are paid above a nominal price.

17. Publication of Statement of Ownership:
 If the publication is a general publication, publication of this statement is required. Will be printed in the 10/07/21 issue of this publication. Publication not required.

18. Signature and Title of Editor, Publisher, Business Manager, or Owner: *Jm Rychkovsky* Date: 10/07/2021

I certify that all information furnished on this form is true and complete. I understand that anyone who furnishes false or misleading information on this form or who omits material or information requested on the form may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including civil penalties).

PHS Commissioned Officers Foundation

Donations Received, September 1, 2021 to September 30, 2021

Gold (\$500)

RADM Douglas Kamerow

Silver (\$250)

CAPT Mehran Massoudi ^

Friends (Under \$100)

CAPT Mark Anderson
 CAPT Maria Benke ^
 Mrs. Carol Dellapenna

Bronze (\$100)

LCDR Tonya Johnican

^ C. Everett Koop Living Legacy
 All other donations were made to the COF General Fund

We Welcome New Members of COA, Spetember 1- 30, 2021

LT AdeSubomi Adeyemo
 LCDR Carla Burch
 LT Erica Bussey-Jones
 Dr. Lyle Canida
 LCDR Amy Chanlongbutra
 LCDR Donovan Darwin
 CAPT David Engelstad
 LT Danielle Eustace
 LT David Flynn
 LCDR Rose Gaikowski

LT Jennifer Gossett
 CAPT Roberta Holder-Mosley
 LCDR Maviann Krause
 LCDR David Lam
 LT Kristin Marks
 Dr. Ronald McFarland
 LTJG Kiwanda McLemore
 LT Kiara McNamara
 LT Kaitlin Moriarty
 CAPT Michael Murry
 LT Kyle Nguyen

LT Casie Parker
 LCDR Y. Veronica Pei
 LT Josh Renzo Ramilo
 LT Joseph Sarisky
 LT Aminda Skan
 Dr Luke Stringham
 LT Claire Tipton
 LTJG Michael Whitman
 LCDR Rahel Woyessa
 LTJG Dorcas Yoder

COA Donations

Commissioned Officers Association of the USPHS Donations Received, September 1-30, 2021

CAPT Richard Bull
 CAPT Isabella Danel
 CAPT J. Paul Davignon

CAPT George Hoskin
 RADM Newton Kendig
 CAPT Charles Larson

CAPT William Millar
 CAPT Carl Miller
 CAPT Kathy Slawson

LEGISLATIVE from page 2

long-standing history of assignment to the National Park Service (NPS) and a decades-long track record of ensuring the health and safety of visitors and NPS staff alike.

COA is fighting tirelessly to correct this oversight in the Senate version of the bill. Through amplified lobbying efforts, meetings, and outreach to Senate offices, COA is pulling multiple policy levers to replace “Armed Forces” with “Uniformed Services.” As mentioned in previous issues of Frontline, changing bill language after it passes committee or chamber can prove difficult, but hope is not yet lost.

This is not the first oversight related to USPHS, and it will not be the last. As we amplify our collective voice in the fight for parity with other Uniformed Services, we also fight for a more equitable and inclusive form of Congressional oversight.

The COA (ISSN 10937161) is published monthly except a combined issue January/February and June/July by the Commissioned Officers Association of the United States Public Health Service, 8201 Corporate Drive, Suite 615, Landover, MD 20785, (301) 731-9080; Fax: (301) 731-9084; Periodicals Postage Paid at Hyattsville, MD and additional mailing offices. POSTMASTER: Send address changes to PO Box 189, Cheltenham, MD 20623. A report of timely information concerning activities of the Commissioned Corps of the U.S. Public Health Service. Distributed exclusively to Association Members.



COA

PO Box 189

Cheltenham, MD 20623

Executive Director

Jacqueline Rychnovsky,
PhD, FAANP, CAE
Captain (ret.), Nurse Corps,
US Navy
jrychnovsky@coausphs.org

Grants Manager

Lynn Abrahamsam
labrahamsont@coausphs.org

Contractor

John McElligott
jmcelligott@coausphs.org

Chief Financial Officer

Teresa Hayden Foley
thayden@coausphs.org

Producer

Curveball Media, Victor Perea

Membership Coordinator

Donna Sparrow
dsparrow@coausphs.org

Leading Edge Conferences

Tim O'Neill
symposium@phscof.org

Director of Administration

Erica Robinson
erobinson@coausphs.org

Group Insurance - AGIA

(888) 633-6459

www.coausphs.org

www.facebook.com/coausphs

www.twitter.com/coausphs

www.instagram.com/coausphs