

## Physician Benchmarks

Upon recommendation of the Promotion Task Force, the Chief Professional Officers (CPO) and Professional Advisory Committee (PAC) Chairs in consultation with their constituent category members, developed benchmarks for the first four promotion precepts with the Commissioned Corps Readiness Force (CCRF) developing the benchmarks for the fifth precept. After reviewing the proposed benchmarks, the Acting Assistant Secretary for Health (ASH) in consultation with the Surgeon General approved their use and the dissemination of this information. The Acting ASH also approved the annual review and update of the benchmarks in order to assure that they reflect, to the extent possible, the evolving demands on the Commissioned Corps.

The Benchmarks are the guideposts used by promotion boards as they review the service records of each officer under consideration for promotion. Historically, this type of information was developed at the convening of the Board and by the board members present, prior to the actual review of records. As a result, officers were unaware of the specifics of how their respective category assessed each of the precepts used by the board. It is our desire to make this process transparent to officers and their managers.

PLEASE NOTE that the Promotion Board members are asked to exercise their professional judgment and discretion in the review and rating of each record. *The benchmarks serve as a guide to the board members in their deliberations and are not criteria required for promotion.*

**Any comments or suggestions that you may have on updating your category's benchmarks must be submitted to your CPO or PAC (see “About Us” on DCP's web site for a listing of CPOs and PAC Chairs).**

## Physician Benchmarks

1. Performance	O-4	O-5	O-6
<b>COERs and COER attachments (past 3 years)</b>	The primary focus in reviewing the COER should be on the accompanying narrative. Narrative indicates progression of responsibility, achievement and contributions to the agency mission. A secondary assessment of the COER will include a review of the COER score, in the context of looking at performance trends. The officer should be in a billet at or above their grade.	The primary focus in reviewing the COER should be on the accompanying narrative. Narrative indicates progression of responsibility, achievement and contributions to the agency mission. A secondary assessment of the COER will include a review of the COER score, in the context of looking at performance trends. The officer should be in a billet at or above their grade.	The primary focus in reviewing the COER should be on the accompanying narrative. Narrative indicates progression of responsibility, achievement and contributions to the agency mission. A secondary assessment of the COER will include a review of the COER score, in the context of looking at performance trends. The officer should be in a billet at or above their grade.
<ul style="list-style-type: none"> <li>• <b>Award History --</b></li> <li>o <b>CC Honor Awards</b></li> </ul>	A continuum of awards at the Achievement Medal or below.	A continuum of awards at the Commendation Medal or below. There should be a progression of awards across the career of the officer.	A continuum of awards at the OSM or below. There should be a progression of awards across the career of the officer.
o <b>Non-Corps Awards</b>	Yes, Value added	Yes, Value added	Yes, Value added
<ul style="list-style-type: none"> <li>• <b>Reviewing Official's Assessment</b></li> <li>o <b>Promotion Readiness (Y/N)</b></li> </ul>	Yes	Yes	Yes
o <b>Leadership Attributes (i.e., influencing, operating, and improving the mission of the PHS)</b>	Contributes as a member of a formal task force or similar group at the Branch, division, agency, or CC level. Identifies leadership role	Volunteers for and demonstrates leadership as a contributing member of a formal task force or similar group at the division, agency or CC level.	Volunteers for and serves in a leadership role (e.g., Chair, vice-chair) of a formal task force or similar group at the agency, CC, or PHS level.
o <b>Integrity/Duty</b>	Unquestioned No outstanding disciplinary or behavioral issues	Unquestioned No outstanding disciplinary or behavioral issues	Unquestioned No outstanding disciplinary or behavioral issues
o <b>Mission Contribution</b>	As assigned by the supervisor	Actively seeks outside activities that also contribute to the mission	Clear evidence that career (duties and outside activities) has and will continue to contribute significantly to PHS (impact evident)

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2. Education, Training, & Professional Development	O-4	O-5	O-6
<ul style="list-style-type: none"> <li>Degrees</li> </ul>	MD or DO required	MD or DO required	MD or DO required
<ul style="list-style-type: none"> <li>Certifications/Credentialing</li> </ul>	<ul style="list-style-type: none"> <li>Board Eligible</li> </ul>	<ul style="list-style-type: none"> <li>Board eligible or Board Certified</li> </ul>	<ul style="list-style-type: none"> <li>Board Certified</li> </ul>
<ul style="list-style-type: none"> <li>Licensure</li> </ul>	Compliant	Compliant	Complaint
<ul style="list-style-type: none"> <li>Continuing Education</li> </ul>	Minimum of 50 hours or more per licensing interval, if required by State Licensure Board	Minimum of 50 hours or more per licensing interval, if required by State Licensure Board	Minimum of 50 hours or more per licensing interval, if required by Licensure Board
<ul style="list-style-type: none"> <li>Public Health Training/Experience</li> </ul>	Evidence of additional coursework in public health and emergency preparedness training; CCRF modules; other training related to agency mission (i.e. bioethics; research and epidemiology training; public health policy courses;etc.)	<ul style="list-style-type: none"> <li>Completion of CCRF modules</li> <li>Work experience and/or work on a leading public health initiative ( i.e. Healthy People 2010; Steps to Healthier US; Surgeon General Reports; major public policy documents supporting mission of the Agency and/or DHHS)</li> </ul>	<ul style="list-style-type: none"> <li>Completion of CCRF modules</li> <li>Leadership role and work experience and/or work on a leading public health initiative (i.e. Healthy People 2010; Steps to Healthier US; Surgeon General Reports; major public policy documents supporting the mission of the Agency and/or DHHS)</li> </ul>

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3. Career Progression & Potential	O-4	O-5	O-6
<ul style="list-style-type: none"> <li>• Billet(s)</li> </ul>	Officer should be in a billet equivalent to his/her rank or higher ( i.e. O-3 or above)	Officer should be in a billet equivalent to his/her rank or higher ( i.e. O-4 or above)	Officer should be in a billet equivalent to his/her rank or higher (i.e. O-5 or above)
<ul style="list-style-type: none"> <li>• Assignments</li> </ul>	Reflect some of potential for increasing levels of independence and responsibility; emerging leadership potential	Reflect an increasing level of independence, responsibility, and accountability	Reflect full level of independence; responsibility; accountability; and leadership
<ul style="list-style-type: none"> <li>• Mobility – Geographic and/or Programmatic</li> </ul>	1 Geographic or programmatic moves	At least 2 Geographic or programmatic moves	At least 3 Geographic or programmatic moves May consider fewer moves for a specialist compared to a generalist as long as moves reflect increasing responsibility and leadership.
<ul style="list-style-type: none"> <li>• Assimilation</li> </ul>	May not be eligible yet	Use only as value added (+)	Use only as value added (+)
<ul style="list-style-type: none"> <li>• Collateral Duties</li> </ul>	Agency mission related duties not included in the officer's billet. Involvement is local, expected, and officer serves as team member.	Agency mission related duties not included in the officer's billet. Involvement is regional/national, required and officer serves as a team leader or manager.	Agency mission related duties not included in the officer's billet. Involvement is national leadership, required and the officer serves as the creator of the activity..
<ul style="list-style-type: none"> <li>• Award History -- Performance Based: <ul style="list-style-type: none"> <li><input type="checkbox"/> CC Honor Awards</li> <li><input type="checkbox"/> Non-Corps Awards</li> </ul> </li> </ul>	Recommend that this benchmark be present in only Precept #1 and used in conjunction with the COER Narrative. Awards should be qualitative and not quantitative to help account for differences across agencies.	Recommend that this benchmark be present in only Precept #1 and used in conjunction with the COER Narrative. Awards should be qualitative and not quantitative to help account for differences across agencies.	Recommend that this benchmark be present in only Precept #1 and used in conjunction with the COER Narrative. Awards should be qualitative and not quantitative to help account for differences across agencies.

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4. Characteristics of Career Officer and Service to the Corps.	O-4	O-5	O-6
• <b>Membership/Involvement in PAC/Advisory Groups</b>	Volunteer or elected member including field reps/Subcommittee members, etc.	Elected Member, Assume level of responsibility by Chairing a Task Force / Subcommittee	Elected Member, Serves in Chair or Vice-Chair / leadership roles
• <b>Associate Recruiter</b>	Member	Member	Member
• <b>Mentoring</b>	Value added	Leadership. Recognition.	Leadership. Recognition.
• <b>BOTC/IOTC</b>	Yes, BOTC	Yes with Ribbon	Yes with Ribbon
• <b>Professional Organizations</b>	Active Member	Serves as a contributing member of a Committee or subcommittee	Serves as Chair, Vice-Chair or in other significant leadership roles in Committees or as a member of the Board
• <b>Service Awards-</b> o Special Assignment Award o Isolated Hardship Award o Hazardous Duty o NEPA/CRSA o Foreign Duty	≥ 1	≥ 2	≥ 3
• <b>Daily wearing of uniform</b>	Daily	Daily	Daily
• <b>Other Official Commissioned Corps/PHS Activities (i.e., Honor Guard, Color Guard, PHS Ensemble, Aide-de-Camp)</b>	Yes Demonstrated Participation	Yes Demonstrated Participation	Yes Demonstrated Participation

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5. Readiness	0-4	0-5	0-6
	<p>For PY 2004, officers can meet this standard in one of two ways: (1) by meeting <u>all</u> of the requirements for the “CCRF Deployable” standard that was in place until Sept, 2003, or (2) by meeting <u>all</u> of the requirements of the “CCRF Basic Level” of deployability that are now in place for the CCRF program as referenced in the Manual Circular, “PHS Readiness Standards”.</p> <p><b>Application of Benchmark Standard:</b></p> <p>Officers who satisfy <u>all</u> the requirements for PY 2004 will be given the maximum number of points under the Readiness Precept.</p> <p>Officers who do not satisfy <u>all</u> the requirements for PY 2004 will receive zero points under the Readiness Precept.</p>	<p>For PY 2004, officers can meet this standard in one of two ways: (1) by meeting <u>all</u> of the requirements for the “CCRF Deployable” standard that was in place until Sept, 2003, or (2) by meeting <u>all</u> of the requirements of the “CCRF Basic Level” of deployability that are now in place for the CCRF program as referenced in the Manual Circular, “PHS Readiness Standards”.</p> <p><b>Application of Benchmark Standard:</b></p> <p>Officers who satisfy <u>all</u> the requirements for PY 2004 will be given the maximum number of points under the Readiness Precept.</p> <p>Officers who do not satisfy <u>all</u> the requirements for PY 2004 will receive zero points under the Readiness Precept.</p>	<p>For PY 2004, officers can meet this standard in one of two ways: (1) by meeting <u>all</u> of the requirements for the “CCRF Deployable” standard that was in place until Sept, 2003, or (2) by meeting <u>all</u> of the requirements of the “CCRF Basic Level” of deployability that are now in place for the CCRF program as referenced in the Manual Circular, “PHS Readiness Standards”.</p> <p><b>Application of Benchmark Standard:</b></p> <p>Officers who satisfy <u>all</u> the requirements for PY 2004 will be given the maximum number of points under the Readiness Precept.</p> <p>Officers who do not satisfy <u>all</u> the requirements for PY 2004 will receive zero points under the Readiness Precept.</p>

Note: (1) Officers may submit a request for a temporary medical waiver to the Medical Affairs Branch for medical issues related to vaccinations or the Annual Physical Fitness Test.

(2) Officers must meet all of the requirements for the CCRF Deployable standard OR all the requirements for the CCRF Basic Level. It is not acceptable to pick one requirement from one column and another requirement from the other column.