

The Rapid Pulse

August 2002

Faces and Places

WELCOME

Buffalo, NY:

Debra Pope, LPN
Deborah Coles-Fritz, RN
Margaret Sowinski, MRT
LTJG Tammy Germonto, RN

El Centro, CA:

CDR David Douglas, DDS
Argelia Nunez, LVN
LT Paul Wetherill, PA

Port Isabel, TX:

LT Karen Dorse, NP

San Diego, CA:

LT JoAnn Galano, RN
LTJG Stacy Little, PA
LTJG James Ruddy, NP

San Pedro, CA:

Kimberly Hambrick, LPN
LT Matthew Febbo, RPh
LTJG Maria Morel, RN
LT Joel Johnson, NP

FAREWELL

El Centro, CA:

LTJG Glenn Archambault
CDR Adolfo Zorrilla

El Paso, TX:

David Kolberson, RN

Elizabeth, NJ:

CDR Hai Troung

New York, NY:

LTJG Keesha Williams

Queens, NY:

LT Donna Smith

San Pedro, CA:

CDR Kenneth Sowinski

Tampa, FL:

CDR Jack Bethune

Washington, DC:

CAPT Ada Rivera, MD
LTJG Melissa Gerstner

The Director's Perspective

By Dr. Eugene Migliaccio

During the last all-hands conference call, I mentioned the need for DIHS to operate as "one Division." Our offices and staff are strategically located throughout the United States, but in the final analysis, we are one organization: the Division of Immigration Health Services. This concept is based on the vision Secretary Tommy G. Thompson has articulated that the Department of Health and Human Services, with its vast number of agencies, bureaus, and divisions, operate as "One Department."

In that vein, I want to talk about the importance of operating as "one Division" in the area of policies and procedures. DIHS operates on established national policies and procedures. They are important because they: provide guidance and direction to employees, ensure consistency in the quality of care we provide, and decrease the risk of legal liability by assuring adherence to legal and regulatory guidelines.

Policies and procedures provide the foundation of our organization by defining the framework for the way that we do business. This framework is essential in ensuring smooth and effi-

cient operation of the organization. They were developed based on community health care standards, federal and state regulations (i.e. OSHA), as well as standards set by accrediting bodies such as JCAHO, NCCCHC, and ACA.

Recently many of you have seen changes to various policies and procedures. At the Headquarters level, we are in the process of enhancing the way we communicate and distribute these changes. As you are aware, many of you frequently have to make modifications at your site to accommodate national policy and procedure requirements. While I do not wish to discourage creativity, it is increasingly important that you do not deviate from national policies and procedures when developing or revising Local Operating Procedures at your site. SOP 1.4 (Part

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Our Spirit

We add dignity to a necessary process of alien detention, serving without fanfare at the forefront of public health protection for the American populace.

Escorts Offer Unique Opportunity

By CAPT Carol Lindsey

WANTED! Adventure seekers and travel lovers looking for the opportunity of a lifetime!

If you fit this description, the DIHS medical escort program may be for you!

The medical escort program is very active these days. Escorts have been made domestically and internationally to places like South Carolina, Hawaii, the Republic of Georgia, Argentina, Cambodia, Philippines and many other exciting destinations.

Medical escorts are usually assigned to RNs, NPs, PAs and occasionally physicians and psychiatrists. The escort assists at least two INS officers in accompanying a detainee back to their country of origin. Normally, the detainee has medical or psychological problems, and it has been deemed necessary to send a medical provider with them to monitor their behavior and possibly administer medications en route. New officers will not be asked to conduct medical escorts until they have been with the Division for six months.

These escorts provide quality care in a transient situation that

is usually challenging and rewarding. Medical escorts also sometimes get the opportunity to explore other countries or cities. If staffing permits and the supervisory grants leave, an escort can spend some extra time discovering new places. HSAs and other staff at the SPCs (as well as the MCCs) are appreciated for their cooperation in letting a staff member go on an escort while they cover shifts.

If you are interested in the medical escort program, don't delay! Please contact Carol Lindsey at 305-616-1035, or email: Carol.L.Lindsey@usdoj.gov.

Perspective – from Front Page

III., Section D) states that all LOPs require approval by the local governing body. In order to assure minimal deviation from national guidelines, a new SOP is being developed which will require review of all new LOPs at the Headquarters level. This is a necessary course of action. When national policies and procedures are not adhered to, there may be severe ramifications for your site and the Division as a whole.

However, I do want to emphasize that I encourage new and innovative ways of thinking. If you feel that a national policy or procedure interferes with the effective operation of your SPC, please go through the chain of command to have the issue brought before the Executive Council for review.

Thank you for your attention to this matter.

PHS Seeks Mentors/Mentees

By CAPT Carol Lindsey

Visit the website phs-nurse.org to learn more about the PHS Nursing PAC mentoring program.

Mentors are wanted! Mentor candidates are PHS nurses (commissioned corps and civil servant) with pertinent areas of experience that are willing to volunteer to provide knowledge and expertise to other PHS nurses. Mentors can provide information and guidance about topics such as: the agency they serve, or have served, uniform etiquette, military courtesy, licensure, billet structure, details/other assignments and other areas. Mentors are listed under their specialty areas on the PHS Nurse Mentoring Resource Directory.

The PHS Nurse Mentoring Resource Directory has been developed to facilitate mentoring of PHS nurses and to assist them in their career development. This directory consists of volunteer PHS nurses, both civil service and commissioned officers, who are willing to share their knowledge and expertise with other PHS nurses. This directory can be found on the PHS nursing website PHS-NURSE.ORG and then link to the Mentoring Program.

Mentees are wanted! PHS nurses (commissioned corps and civil servants) with questions

about PHS, nursing, or related topics are encouraged to find a Mentor Resource on the PHS Nurse Mentoring Directory which can be found on the PHS nursing website PHS-NURSE.ORG and then link to the Mentoring Program. Nurses are listed according to their specialty area of expertise and contact information is listed. Mentees can contact them directly. If a subject matter they have a question about is not listed on the Directory, they can contact the Nurse Mentoring committee by email at: Phsngmentor@hotmail.com and Phsngmentor@aol.com.

Why Mentor?

- ? It is an opportunity to *share* valuable knowledge and expertise with another PHS nurse
- ? Being a mentor can bring *satisfaction* in helping a mentee define and achieve their career and professional goals and objectives.
- ? *A sense of pride* can be gained from observing mentee development.
- ? Being a mentor is an opportunity to *improve* interpersonal communication, motivation, coaching, counseling and leadership.
- ? Pleasure in *contributing to the future* of PHS.

If you would like to be a mentor, complete the application on the above website. You can also contact CAPT Carol Lindsey, Chair Nurse Mentoring Committee via email: Carlindsey@aol.com.

The 2002 PHS Promotion Ceremony—In Pictures



CAPT Richard Lawson watches as Dr. Migliaccio and CAPT Lawson's wife pin on his new boards.

CAPT Ellie Qualls is congratulated by RADM Michael Davidson as Drs. Duke (HRSA Administrator), Johnson and Migliaccio look on.



LCDR Diana Schneider smiles as her husband David (left) and Dr. Migliaccio pin on her new boards.

News You Can Use!

DIHS extends its warmest welcome to the new leadership at the BPHC:

RADM Sam Shekar, M.D., MPH (Assistant Surgeon General/ Associate Administrator for Primary Healthcare) and **Caroline Lewis** (Acting Deputy Associate Administrator for Primary Healthcare)

Congratulations to **CDR Phil Jarres** on his appointment as Chief, Field Operations Branch.

Congratulations to **CAPT Neal Collins, M.D.** on his appointment as the Medical Director/Chief, Clinical Services Branch.