



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
7700 ARLINGTON BOULEVARD
FALLS CHURCH, VA 22042

Canc: May 2017
IN REPLY REFER TO
BUMEDNOTE 1412
BUMED-M09
19 May 2016

BUMED NOTICE 1412

From: Chief, Bureau of Medicine and Surgery

Subj: COMMANDING OFFICER AND EXECUTIVE OFFICER POSITIONS –
APPLICATION PROCEDURES FISCAL YEAR 2017

Ref: (a) OPNAVINST 1412.14
(b) BUMEDINST 1412.1A
(c) MILPERSMAN 1301-811
(d) DoD Instruction 1010.16 of 10 October 2012

Encl: (1) Letter of Recommendation for Commanding Officer/Executive Officer Screening
(2) Endorsement for Commanding Officer/Executive Officer Screening

1. Purpose. To identify executive medicine qualities and experience required to succeed in leadership positions, to provide application procedures for fiscal year (FY) 2017 Navy Medicine commanding officer (CO) and executive officer (XO) positions per references (a) through (d), to provide templates at enclosures (1) and (2) for the letter of recommendation from the CO and endorsement by the region or immediate superior in command (ISIC) (flag officer), and to provide the application deadline of 1 July 2016.

2. Scope. This notice applies to all Navy Medicine activities and Navy Medicine personnel that desire to be considered for assignment as a CO or XO.

3. Background. CO and XO positions are leadership positions defined by Commander, Navy Personnel Command (NAVPERSCOM) (PERS-4415) and the Bureau of Medicine and Surgery (BUMED) Council of Corps Chiefs. These positions require special expertise, experience, and a documented career progression that prepares an officer for these responsibilities.

4. Executive Medicine Required Qualities/Criteria

a. Experience

(1) Documented track record of success in leadership and non-leadership positions.

(2) A pattern of successful progression of experience within a medical treatment facility (MTF) and/or non-MTF (e.g., Headquarters staff at BUMED, Bureau of Naval Personnel (BUPERS), research and development, or other support functions) and/or operational tours with increasing scope of accountability and responsibility.

b. Knowledge/Skills/Attributes

- (1) Solid knowledge and understanding of the Navy Medicine enterprise in relationship to the operational mission.
- (2) Joint Operations/Experience (highly desired, but not required).
- (3) Firm foundation and understanding of business principles and practices.
- (4) Knowledge and understanding of clinical privileging, quality improvement, and patient safety principles and practices.
- (5) Ability to function in a complex matrix organization.
- (6) Ability to communicate effectively in public and private forums. Understanding of strategic and risk communications.
- (7) Ability to provide timely and constructive feedback utilizing established civilian and military personnel evaluation systems.
- (8) Critical and strategic thinking and problem solving skills.
- (9) Joint Medical Executive Skills Program Additional Qualification Designator 67A-Executive Medicine (recommended, but not required).
- (10) Joint Professional Military Education Phase I (Command and Staff College or War College (resident/non-resident)) (highly desired, but not required).
- (11) Role model in Navy core values, military bearing, and physical fitness.
- (12) Strategic planner and thinker.
- (13) Visionary.
- (14) Develops subordinates; values diversity.
- (15) Understands and supports broader organizational goals.

c. Additional requirements. Expectation is that selectees will:

- (1) Be universally assignable and able to meet permanent change of stations (PCS) parameters. Rare exceptions may be considered. Officers that are unsure if they meet PCS parameters for an FY 2017 CO/XO assignment should discuss with their Deputy Corps Chief and/or Detailer prior to submitting an application.

(2) Meet body composition assessment and physical fitness assessment standards. No failures in either category within the last four cycles.

(3) CO positions: Must be able to complete a full CO tour before reaching statutory age of 62 or mandatory retirement.

(4) XO positions: Must have at least 5 years remaining on Active Duty before statutory age of 62 or mandatory (statutory) retirement to facilitate potential assignment to full XO and CO tours.

5. Criteria for Selection to MTF and Hospital Ship (T-AH) CO/XO Positions

a. CO MTF/T-AH Positions

(1) Officer must be in the grade of captain (O-6).

(2) Successful completion of at least 1 year of an XO/Deputy Commander tour.

(3) Operational experience desired; global health background is also desired as CO serves as a health diplomat during humanitarian missions.

b. XO MTF/T-AH Positions (Credited as an MTF XO assignment)

(1) With rare exception, officer must be in the grade of captain (O-6).

(2) Successful demonstration of MTF middle- or senior-level management (operational experience desired, but not required).

6. Criteria for Selection to Research/Support CO/XO Positions

a. CO Research/Support Activities

(1) Officer must be in the grade of captain (O-6).

(2) Successful completion of at least 1 year of an XO tour.

(3) Experience in the business aspects of research and/or support activities with knowledge or experience in fiscal management, grants administration and program management, personnel management, contracting, etc.

(4) Experience and understanding of principals of human research protections, protocol approvals, and the Institutional Review Board processes.

b. XO Research/Support Activities

(1) With rare exception, officer must be in the grade of captain (O-6). In the event that a commander (O-5) best meets the required skill set, the officer cannot be failed of selection to captain (O-6).

(2) Experience in the business aspects of research and/or support activities with knowledge or experience in fiscal management, grants administration and program management, personnel management, contracting, etc.

7. Criteria for Selection to Operational CO/XO Positions (Medical Battalions, Dental Battalions, Field Medical Training Battalions)

a. CO Operational Activities

(1) Officer must be at minimum, in the grade of commander (O-5). The officer cannot be failed of selection to captain (O-6).

(2) Dental Battalion CO billets are coded with the 2200 designator, require a grade of captain (O-6), and successful Marine Corps experience; Fleet Marine Force Warfare Officer (FMFWO) qualified officer preferred. Officers of other designators with requisite skills and experience may be considered on a case-by-case basis. The best qualified officer will be selected, regardless of designator.

(3) Medical Battalion/Field Medical Training Battalion CO billets are coded 2300 designator and require successful Marine Corps experience; FMFWO qualified officer preferred. Officers of all designators with requisite skills and experience may be considered on a case-by-case basis. The best qualified officer will be selected, regardless of designator.

b. XO Operational Activities

(1) Officer must be, at minimum, the grade of lieutenant commander (O-4). Officers cannot be failed of selection to commander (O-5).

(2) Dental Battalion XO billets are coded 2200 designator, must be at minimum in the grade of commander (O-5) and require successful Marine Corps experience; FMFWO qualified officer preferred. Officers cannot be failed of selection to captain (O-6). Officers of other designators with requisite skills and experience may be considered on a case-by-case basis. The best qualified officer will be selected, regardless of designator.

(3) Medical Battalion/Field Medical Training Battalion XO billets are coded 2300 designator and require successful Marine Corps leadership experience; FMFWO qualified officer preferred. Officers of all designators with requisite skills and experience may be considered on a case-by-case basis. The best qualified officer will be selected, regardless of designator.

8. Criteria for Selection to CO of Navy Drug Screening Laboratories

a. Officer must be the grade of commander (O-5). Officers cannot be failed of selection to captain. In the event that a lieutenant commander (O-4) best meets the required skill set, the officer cannot be failed of selection to commander (O-5).

b. Per reference (d), officer must have, at a minimum, a doctor of philosophy degree in toxicology, biochemistry, or the physical or biological sciences from an accredited university, and at least 3 years of experience in one of the Department of Defense Drug Screening Laboratories.

9. Criteria for Selection as CO/XO of Naval Ophthalmic Support and Training Activity

a. Officer must be, at minimum, the grade of commander (O-5). Officers cannot be failed of selection to captain (O-6).

b. Officer must be a Medical Service Corps Officer with the optometry primary subspecialty code (1880).

10. Criteria for Selection as CO of Naval Safety and Environmental Training Center

a. Officer must be, at minimum, the grade of commander (O-5). Officers cannot be failed of selection to captain (O-6).

b. As the subject matter expert and program manager for the Navy's Industrial Hygiene Training Program, officer must have in depth knowledge and experience in solving complex problems in industrial and maintenance operations, research, development, and testing/evaluation. Documented experience in managing industrial hygiene and occupational safety and health programs in ashore and afloat/operational environments. Expert in the anticipation, recognition, evaluation, and control of workplace hazards including expertise in workplace monitoring practices and procedures.

c. Officer should have diverse assignment history that includes MTF, fleet, staff, overseas assignments and at minimum of one operational tour. Officer with certified industrial hygienist or certified safety professional certification preferred, but not required.

d. Officer must be a Medical Service Corps Officer with the industrial hygiene primary subspecialty code (1861).

11. Application Process

a. Officers desiring to be screened for FY 2017 must submit an application before the deadline. Incomplete and/or late applications will not be considered by the board. Application packages must be received at NAVPERSCOM (PERS-4415) no later than 1 July 2016 and must contain the following documents:

(1) NAVMED 1412/1, Commanding Officer/Executive Officer Screening Application, fully completed.

(2) Letter of recommendation from CO for all applicants.

(3) Endorsement from the Navy Medicine regional commander or immediate superior in command (flag officer) for all applicants.

(4) Fitness Report – copy of most recent fitness report unless it is already contained in officer's official military record (Official military records can be viewed on BUPERS Online at: <https://www.bol.navy.mil/>). Officers must ensure that all personally identifiable information (PII) (i.e., social security number) is redacted.

(5) Curriculum vitae and biography.

(6) Official military photo.

b. Only applicants that submit a screening package prior to the submission deadline will be eligible for screening.

c. The preferred method for submitting an application is by e-mail with scanned copies of signed documents attached. E-mail should be sent encrypted to protect PII. Applications will also be accepted via mail or fax (signed copies only) when another more secure means is not possible. The appropriate address and fax number can be found on NAVMED 1412/1.

12. Oral Board Process

a. Officers desiring to screen must complete an oral board conducted to assess the officer's understanding of and readiness for the responsibilities of command. Per reference (b), an oral board is a one-time requirement.

b. NAVPERSCOM (PERS-4415) reviews applications for completeness and eligibility for Medical Department CO/XO screening. Following review, NAVPERSCOM (PERS-4415) will submit a list of those eligible applicants requiring an oral board to the Deputy Chief, BUMED and Senior Deputy Corps Chief by 8 July 2016.

c. Deputy Chief, BUMED, must select oral board membership and direct that oral board(s) be convened, per reference (b) and BUMED guidance. Deputy Chief, BUMED will notify the board President(s) of eligible applicants that require an oral screening board no later than 13 July 2016. Board members will use NAVMED 1412/2, Navy Medicine Oral Board Assessment, for their assessment of the applicant. Oral Boards will be held from 18–29 July 2016.

d. The senior member of the oral board must report their findings to NAVPERSCOM (PERS-4415) and Deputy Chief, BUMED in writing as instructed by reference (b) no later than 10 August 2016.

e. Deputy Chief, BUMED will provide the findings of the oral board(s) to the Corps Chiefs. Corps Chiefs will notify individual officers of their oral board assessment results not later than 12 August 2016.

f. Per reference (b), officers not recommended by the oral board will not be considered by the Command Screening Board.

13. Medical Department CO/XO Screening Board

a. NAVPERSCOM (PERS-4415) serves as the Medical Department CO/XO Screening Board sponsor.

b. Applicants who successfully screen are considered eligible for assignment to any senior executive medicine position within Navy Medicine (MTF, research activity, support activity, or major operational command), and if slated, will be assigned based on the “Needs of the Navy.” Officers who apply for senior executive medicine screening should do so with this in mind, and be willing to accept a leadership position for which they are slated.

c. The limit for the number of CO and XO screened personnel will be two times the anticipated number of CO and XO opportunities available in FY 2017.

d. Screening for CO/XO positions is valid for 1 year only. Applicants who do not successfully screen, or who screen but are not assigned to a CO/XO position in a particular cycle, may reapply in subsequent years if they meet screening criteria. Those officers who do not successfully screen are encouraged to contact the Deputy Chief of their Corps for counseling and guidance.

14. Records. Records created as a result of this instruction, regardless of media and format, must be managed per SECNAV M-5210.1 of January 2012.

15. Reports. The reports required in this instruction, are exempt from reports control per references (b) and (c).

16. Forms

a. NAVMED 1412/1 (5-2016), Bureau of Medicine Commanding Officer/Executive Officer Screening Application is available at:

<http://www.med.navy.mil/directives/Pages/NAVMEDForms.aspx>.

b. NAVMED 1412/2 (5-2014), Navy Medicine, Oral Board Assessment is available at:

<http://www.med.navy.mil/directives/Pages/NAVMEDForms.aspx>.



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Distribution is electronic only via the Navy Medicine Web site at:

<http://www.med.navy.mil/directives/Pages/BUMEDNotes.aspx>

BUMEDNOTE 1412
19 May 2016

LETTER OF RECOMMENDATION
FOR COMMANDING OFFICER/EXECUTIVE OFFICER SCREENING

1412
Ser 00/
Date

From: Commanding Officer, (insert command name)
To: President, Fiscal Year 2017 Medical Department Commanding Officer/Executive Officer
Screening Board
Via: Commander NAVMED Region or ISIC
Subj: LETTER OF RECOMMENDATION FOR COMMANDING OFFICER/EXECUTIVE
OFFICER SCREENING IN CASE OF CAPT JOHN DOE, MSC, USN

1. **Commanding officer's certification.** This officer served as _____. I personally observed his/her performance in this capacity.
2. **Commanding officer's justification.** Briefly describe the officer's performance while in your command and potential for leadership in command positions.
3. **Commanding officer's endorsement.** I give my _____ recommendation that CAPT _____ be selected for assignment as a commanding officer/executive officer in Navy Medicine.

Commanding Officer's signature

Copy to:
Member, CAPT John Doe
(The member must provide all documents to the President of the Screening Board)

Enclosure (1)

BUMEDNOTE 1412
19 May 2016

ENDORSEMENT
FOR COMMANDING OFFICER/EXECUTIVE OFFICER SCREENING

1412
Ser 00/
Date

First Endorsement on (insert command name) ltr 1412 Ser (00/XXXXXX) of (Date)

From: Commander, Navy Medicine (East or West) or ISIC

To: President, Fiscal Year 2017 Medical Department Commanding Officer/Executive Officer
Screening Board

Via: Member, CAPT John Doe, MSC, USN

Subj: LETTER OF RECOMMENDATION FOR COMMANDING OFFICER/EXECUTIVE
OFFICER SCREENING IN CASE OF CAPT JOHN DOE, MSC, USN

1. Forwarded, recommending _____.
2. Regional commander's justification. Briefly describe the officer's performance and potential for success in command positions.
3. The member must provide all documents to the President of the Screening Board.

Regional Commander/Immediate supervisor in
command's signature

Copy to:
(Insert originating command)
CAPT Doe

Enclosure (2)