BUMED INSTRUCTION 5420.13D

From: Chief, Bureau of Medicine and Surgery

Subj: ENLISTED TECHNICAL LEADER PROGRAM

Encl: (1) Bureau of Medicine and Surgery Mission and Functions of Medical Department
       Enlisted Technical Leaders
(2) Enlisted Technical Leader Selection Criteria and Processes
(3) Sample Quarterly Report
(4) Sample Curriculum Vitae

1. **Purpose.** To provide guidelines for the mission, function, responsibilities, and selection criteria for the Navy Medicine Enlisted Technical Leader (ETL) Program. This is a complete revision and must be read in its entirety.

2. **Cancellation.** BUMEDINST 5420.13C.

3. **Scope.** This instruction applies to Budget Submitting Office 18 activities and all ships and stations having Navy medical department personnel assigned. Within statutory, regulatory, and policy constraints, the Chief, Bureau of Medicine and Surgery (BUMED) through the Director, Hospital Corps (BUMED-M00C5) delegates the necessary authority to the ETLs to accomplish their mission. This authority is limited to providing advice and recommendations on enlisted technical, career, and training matters within their respective Navy enlisted classification (NEC) to decision-making entities within the Navy. Such decision-making entities include, but are not limited to, BUMED; Navy Personnel Command; Headquarters, U.S. Marine Corps; Interservice Training Review Organization; the Defense Medical Standardization Board; ad hoc policy formulation or execution work groups; and other higher echelon commands as necessary and related to function. Relative to this authority is access to information and direct liaison with commands and offices involved.

4. **Background.** Experienced enlisted personnel often assist upper echelon management with their technical expertise. Experts in each NEC play a vital role in strategic planning and provide deck plate information required for resolving issues and implementing appropriate policy. To harness this pool of talent, and to ensure that the enlisted perspective is represented, BUMED has developed and implemented the ETL Program. The ETL is an advisory position only and is not intended to dilute primary, legal, or regulatory responsibilities of the Navy’s command structure. ETLs receive direction from and report to the Chief, BUMED via the Director, Hospital Corps (BUMED-M00C5). They must also work in concert with the specialty leaders representing corresponding officer medical specialties. The ETLs are highly encouraged to deal directly with
Service members in their NEC and any other authority outside their normal chain of command on issues pertaining to their field; however, ETLs must keep their commanding officers apprised of their activities.

5. **Responsibilities**

a. **Chief, Bureau of Medicine and Surgery** will designate and appoint, in writing, an ETL for each NEC within Navy Medicine.

b. **Director, Hospital Corps, BUMED-M00C5** must:

   (1) Screen candidates for selection as ETL.

   (2) Provide direction, monitor, and periodically update the ETL mission and function as required.

   (3) Inform the appropriate commanding officer of an ETL’s exceptional performance for personal award and performance evaluation considerations.

   (4) Maintain and publish a quarterly ETL directory.

c. **Commanding Officers and Officers in Charge** must:

   (1) Provide command endorsement on ETL nomination packages. Endorsement should include a statement on the member’s potential as an ETL, ability to communicate in both oral and written form, and compliance with Navy physical readiness standards.

   (2) Provide necessary travel funds to ETLs assigned to their commands. Travel requirements may involve participation in working groups, attendance at conferences, and site visits to training facilities and constituent areas of concentration.

   (3) Provide administrative support to the ETL. This support includes access to commercial, long-distance, and Defense Switched Network telephone, copier, voicemail, printing and postage capabilities, a personal computer, and other administrative requirements as needed.

   (4) Notify the Director, Hospital Corps if an ETL appointment warrants termination or if support is withdrawn for reasons deemed detrimental to the program or the command.

d. **ETLs** must:

   (1) Accomplish the mission and functions outlined in enclosure (1) and maintain the qualification criteria shown in enclosure (2).
(2) Submit quarterly summary reports of activities to the Director, Hospital Corps following the format in enclosure (3) as prescribed by the Hospital Corps planners. Provide a copy of the summary report to the commanding officer, appropriate specialty leader, and the Hospital Corpsman enlisted community manager. Submit all reports via e-mail; however, if e-mail is not available, then traditional mail or facsimile is appropriate.

(3) Maintain current curriculum vitae per enclosure (4).

(4) Maintain an updated list of subject matter experts (SME) within the NEC.

(5) Ensure SMEs provide adequate and timely support for assigned projects and workgroups.

(6) Keep the Director, Hospital Corps fully informed of important activities within each technical field. In most cases, communication will be made through the Hospital Corps planners; however, in emergent cases where the planners or the Deputy Director, Hospital Corps are unavailable, direct liaison with the Director, Hospital Corps is authorized.

(7) Maintain all related files for record keeping purposes. Each ETL must maintain a turnover binder with standard operating procedures for the succeeding ETL. This is to ensure continuity and health of the program.

(8) Establish and maintain the Navy Knowledge Online Web page for the community. This Web page will be utilized to disseminate information pertaining to the community of practice. This role may be delegated to a SME; however, ultimate responsibility for the content on the Web page will remain with the ETL.

e. SMEs must:

(1) Be seasoned personnel who hold the NEC that can be called upon for additional advice and perspective when needed. SMEs are not appointed by the Director, Hospital Corps and will be used only as needed. Any funding requirements for personnel designated as a SME will be provided by the organization who is requesting SME input.

(2) Maintain regular contact with the current ETL and provide a written summary within 5 working days after attending any NEC work group.

6. Records Management. Records created as a result of this instruction, regardless of media and format, must be managed per SECNAV Manual 5210.1 of January 2012.

7. Review and Effective Date. Per OPNAVINST 5215.17A, this instruction will be reviewed annually on the anniversary of its effective date to ensure applicability, currency, and consistency with Federal, DoD, Secretary of the Navy, and Navy policy and statutory authority using OPNAV
5215/40 Review of Instruction. This instruction will automatically expire 5 years after effective date unless reissued or canceled prior to the 5-year anniversary date, or an extension has been granted.

8. Information Collection Management. The quarterly summary reports required by paragraph 5c(2) are assigned report control symbol OPNAV 5420-12. This reporting requirement is approved for 3 years from the date of this instruction.

Releasability and distribution:
This instruction is cleared for public release and is available electronically only via the Navy Medicine Web site: http://www.med.navy.mil/directives/Pages/BUMEDInstructions.aspx.
1. **Mission.** The mission of the ETL program is to provide technical advice to Chief, Bureau of Medicine and Surgery via the Director, Hospital Corps (BUMED-M00C5), on matters relating to particular medical and dental NEC codes.

2. **Functions.** The ETL, under the direction of BUMED must:
   
   a. Act as the focal point and advocate for constituents within the NEC represented.
   
   b. Provide representation for the NEC in professional forums.
   
   c. Provide advice regarding NEC specific proposals, projects, and programs.
   
   d. Provide advice regarding education and training issues.
   
   e. Act as the primary liaison between the SME and BUMED as well as other agency inquiries.
   
   f. Maintain a forum for sending and exchanging information within the community they represent.
   
   g. Act as a conduit for communications between the community and BUMED.
   
   h. Coordinate with the appropriate specialty leaders in handling issues and projects that affect policy or the administration of the NEC.
   
   i. Recommend changes for consideration to the billet file, Catalog of Navy Training Courses, and NEC manual as required.
1. **General.** One ETL must be appointed for each NEC. In the case of an advanced and basic field for the same NEC, the ETL must be selected from the advanced NEC unless waived in writing by the Director, Hospital Corps.

2. **Criteria.** ETLs must:
   a. Be in paygrades E-5 through E-8 with broad experience in their respective NEC.
   b. Be assigned primary duties requiring active practice in their assigned NEC.
   c. Possess current certification or license, if required, for the NEC.
   d. Be assigned within the continental 48 States. Shore duty is preferred; however, a written waiver may be obtained if the situation is warranted. All waivers must be approved and signed by the Director, Hospital Corps.
   e. Have no record of non-judicial punishment, courts-martial, or civilian convictions for the past 6 years.
   f. Maintain physical readiness standards per OPNAVINST 6110.1J.

3. **Length of Term.** ETLs are generally appointed for a 3-year term or until their projected rotation date, end of obligated service, or they are deployed and are unable to serve in the capacity of ETL. A 1-year extension may be granted if requested by the individual and endorsed by the Service member’s commanding officer to whom assigned during the extended period.

4. **Termination of Appointment.** An appointment may be terminated before term expiration for the following reasons:
   a. Failure to maintain any of the above stated selection criteria.
   b. Receipt of permanent change of station (PCS) orders to a ship, mobile unit, or facility, currently outside the continental United States.
   c. Reassignment to a billet requiring performance of primary duties outside the NEC or technical field.
   d. Change in appointment 6 months before discharge, PCS, transfer to the Fleet Reserve, or promotion to E-9.

Enclosure (2)
e. Reasons that detract from the incumbent’s satisfactory performance of ETL duties, such as a lack of active interest, personal difficulties, additional duties, protracted absences due to temporary additional duty, training, hospitalization, etc., or withdrawal of command support.

f. Reasons for voluntary or involuntary termination of duty must be validated by the member’s commanding officer or the hospital corps planner before the Director, Hospital Corps (BUMED-M00C5) makes a final recommendation to Chief, BUMED.

5. **Application Package.** Submit an application letter to the Director, Hospital Corps (BUMED-M00C5) via the local commanding officer. A copy of the application letter should be sent to the specialty leader for the corresponding community if applicable. A curriculum vitae based on information in enclosure (4), copies of performance evaluations for the past 3 years, and Physical Readiness Information Management System (PRIMS) data must be enclosed with the application package. If the applicant is applying for a currently filled position, forward a copy of the application packages to the incumbent for endorsement.

6. **Successors.** At least 6 months prior to the expiration of the incumbents’ term, ETLs must submit no more than three qualified successor application packages to the Director, Hospital Corps (BUMED-M00C5) via the appropriate specialty leader(s).

7. **Selection.** The Chief, BUMED will make the selection and issue the appropriate appointment letters. Copies of the appointment letter must be forwarded to the ETL’s commanding officer and the appropriate specialty leader.
SAMPLE QUARTERLY REPORT

From: Enlisted Technical Leader (NEC XXXX) Command Information, Command Address
To: Chief, Bureau of Medicine and Surgery (BUMED-M00C5), 7700 Arlington Blvd, Suite 5134, Falls Church, VA 22042-5134

Subj: SUMMARY REPORT OF ACTIVITIES FOR JANUARY TO MARCH 2017

Ref: (a) BUMEDINST 5420.13D

1. Per reference (a), I submit the following:

   a. Issues:

      (1) Issue 1

         (a) Discussion

         (b) Recommendation

      (2) Issue 2

         (a) Discussion

         (b) Recommendation

      (3) Issue 3

         (a) Discussion

         (b) Recommendation

      (4) Current pipeline inventory for the Community: 33 in pipeline.

      (5) HM XXXX:

         Number Billets Authorized: 46
         Inventory: 29
         Manning Percent: 63
         Distributable Inventory Percentage: 70

      HM XXXX:

         Number Billets Authorized: 118
         Inventory: 52
         Manning Percent: 44
         Distributable Inventory Percentage: 70

Enclosure (3)
Subj: SUMMARY REPORT OF ACTIVITIES FOR JANUARY TO MARCH 2017

b. Contacts made:
   (1) DD Mon YY – Contact
   (2) DD Mon YY – Contact

c. Seminars, conferences, and meetings:
   (1) Seminars
   (2) Conferences
   (3) Meetings

2. Future plans and pending actions to be taken by the ETL or the knowledge managers. This area should also include who the action officer is for a particular issue. If there is an instruction or proposal which has been sent up the chain of command, please include which command it is currently with and who the point of contact is at that command.

   I. M. ROBOCHIEF

Copy to:
CO, unit assigned
Specialty Leader
BUPERS-325
NMETLC
CONTACT INFORMATION
HMC(SW/FMF/AW/SS/DV/PJ) Eye M. Robochief

U.S. NAVY EMPLOYMENT HISTORY
Present. Senior Enlisted Leader (SEL) Nursing Services, Walter Reed National Military Medical Center, Bethesda, Maryland
October 2013 – October 2016. SEL, Nursing Services, Naval Hospital Rota, Spain
September 2012 – September 2013. Deployed to Afghanistan as an individual augmentee
March 2012 – September 2012. SEL, U.S. Forces Iraq
February 2009 – February 2012. Physical Therapy Technician, USS NEVERDOCK
December 1999 – November 2002. General Duty Corpsman, Naval Hospital Camp Pendleton

PROFESSIONAL QUALIFICATIONS
May 2015. Executive Medical Department Enlisted Course, Bethesda, Maryland
December 2012. Earned Enlisted Aviation Warfare Specialist Insignia
December 2012. Command Training Team course
July 2003. Earned Enlisted Surface Warfare Specialist Insignia
June 1999 – December 1999. Hospital Corpsman “A” School, NSHS San Diego, CA

NECs
October 2012 – 90N1 IA GWOT
June 2007 – (8466) Physical Therapy Technician
October 1999 – (0000) Hospital Corpsman “A” School
AWARDS
Navy Cross (1)
Bronze Star (1)
Joint Service Commendation Medal (2)
Combat Action Ribbon
Good Conduct Medal (4)
Southwest Asia Service Medal
GWOT Expeditionary Medal
GWOT Service Medal
NATO Medal
Afghanistan Campaign Medal

SIGNIFICANT CONTRIBUTIONS TO THE TECHNICAL COMMUNITY

Please include only achievements which have directly impacted the community. Achievements must be verifiable.