BUMED NOTICE 1412

From: Chief, Bureau of Medicine and Surgery

Subj: FISCAL YEAR 2023 RESERVE COMPONENT NAVY MEDICINE COMMAND SCREENING BOARD

Ref: (a) OPNAVINST 1412.14
(b) COMNAVRESFORNOTE 5400 of 1 May 21 (Canc: May 22)

1. **Purpose.** To provide guidance concerning procedures for the Navy Medicine (NAVMED) Reserve Component (RC) Command Screening Board per references (a) and (b), and establishment of the application deadline of 1 July 2022 for fiscal year 2023, unless designated otherwise by the Bureau of Medicine and Surgery (BUMED) Deputy Chief, Reserve Policy and Integration (BUMED-M10) or designee.

2. **Scope and Applicability.** This notice applies to all RC NAVMED activities and Navy Reserve Medicine personnel desiring consideration for assignment as a commanding officer (CO) or executive officer (XO) of a major command.

3. **Background.** Per reference (a), Chief, BUMED is responsible for establishing a written command qualification program to set minimum standards for command and establish a process to formally screen officers for executive medicine command positions. These positions require specific expertise, experience, and appropriate sequential career progression. Board assessment will include both the review of the application packet and the applicant’s response to interview questions.

4. **Navy Reserve Medicine Professional Qualification Standards.** Standards for major command qualification for RC Navy and Marine Corps medical units:

   a. **Experience.** Officers must meet the criteria for major command screening eligibility:

      (1) Eligible officers desiring to screen for major command must have a documented track record of success in leadership and non-leadership positions, and a pattern of successful completion of operational and non-operational tours or exercises with increasing scope of accountability and responsibility.

      (2) Applicants who apply for the major command 2D1 additional qualification designation (AQD) must have the 2N1 AQD prior to application. Information on the 2N1 process can be found:

(b) Naval Education and Training Command 43035-A (Personnel Qualification Standards for Navy Reserve Augment Unit Commanding Officer/Officer in Charge).

(c) ALNAVRESFOR 010-22 (5-year leadership course requirement).


(e) For 2D1 AQD screening, be in the grade of captain (O-6) or selected to the rank of captain (O-6).

b. Knowledge, Skills, and Abilities

(1) Demonstrated understanding of the NAVMED enterprise and its role in planning and executing health services support to the Navy and Marine Corps during peacetime and combat operations.

(2) Deployment and operational experience is highly desired, but not required.

(3) A firm foundation and understanding of business principles and practices as evidenced by increasing scope of responsibilities.

(4) An ability to provide timely and constructive feedback utilizing BUPERSINST 1610.10F, Navy Performance Evaluation System.

(5) Critical and strategic thinking, and problem-solving skills.

(6) The Joint Medical Executive Skills Program AQD 67A - executive medicine is highly desired, but not required.

(7) Joint Professional Military Education Phase I, Command and Staff College or War College (resident or non-resident) is highly desired, but not required. Demonstrated Professional Military Education throughout military career.

(8) An advanced knowledge and understanding of RC administrative and operational processes.

c. Leadership

(1) Role model in Navy core values, military bearing, and physical fitness.
21 Apr 2022

(2) Develops subordinates, values diversity.

(3) Understands and supports broader organizational goals.

d. Additional Requirements

(1) Must successfully meet physical fitness assessment (PFA) standards. No failures in either category within the last six PFA cycles.

(2) Must be deployment ready and worldwide deployable.

e. Criteria for Selection to Executive Medicine Positions in Navy Reserve Medicine Major Commands within Budget Submitting Office 18

(1) CO must

(a) Be in the grade of captain (O-6).

(b) Successfully screen and award of 2D1 AQD (major command CO or XO screen).

(c) To apply for CO, have Navy Officer Billet Code 9436 executive officer, shore activity, and either have completed, or be in the second year of, a major command XO tour or otherwise have written approval from Deputy Chief, Reserve Policy and Integration or designee to be granted the Navy Officer Billet Code.

(2) XO must

(a) Be in the grade of captain (O-6) or selected to the rank of captain (O-6).

(b) Successfully screen and award of 2D1 AQD (major command CO or XO screen).

(c) Successfully demonstrated increasing levels of operational or non-operational leadership management and responsibilities.

5. Navy Reserve Medicine Command Screening Board Application Process

a. Officers desiring to be screened for the 2D1 AQD Command Screening Board must submit an application to BUMED-M10 by 1 July 2022, unless otherwise noted. Commanders considered for promotion to captain (O-6) on the fiscal year 2023 selection board may apply, however, applications will not be reviewed until selection board results are released. Only those members who successfully select will have their 2D1 applications reviewed. Delays in selection board results may prohibit review for this 2D1 Command Screening cycle.
Applications will contain the listed documents scanned as a single portable document format (PDF) file and e-mailed to BUMED-M10. An e-mail will be provided. The e-mail must be encrypted or sent through Department of Defense Safe (https://safe.apps.mil) to protect personally identifiable information. The Deputy Chief, Reserve Policy and Integration or designee may adjust application package requirements. Unless otherwise noted, the packet will include:

1. Candidate letter of intent (1 page maximum);
2. Last three observed regular fitness reports;
3. Officer Summary Record;
4. Military biography (submitted in standard U.S. Navy format without photo); and Physical Readiness Information Management System (PRIMS) summary print out of the last six PFA cycles.
5. Previously screened officers that hold the 2D1 AQD should not submit an application. Members only need to screen once.
6. Incomplete or late applications may not be considered by the board.
7. Command Screening Board for the 2D1 AQD. An oral screening board referred to as “Screening Board,” is required for awarding of the 2D1 AQD. An officer who is recommended by the board will receive the 2D1 AQD and may be considered for eligible billets at the Navy Reserve National Command and Senior Officer (O-5 and O-6) Non-Command Billet Screening and Assignment Board (APPLY board). Candidates who have received the 2D1 AQD do not need to screen again. However, an officer who is not recommended by the Screening Board for command may reapply for command screening in a subsequent year.

b. Membership. Screening board panels will be comprised of at least three Navy Reserve Medicine captains (O-6) or above, who are currently a major command CO, or who have completed a major command assignment.

c. Scheduling. Deputy Chief, Reserve Policy and Integration or designee will determine the schedule for the screening board and any pre- and post-board meetings if held. BUMED-M10 will disseminate information on the timing, location, and procedures for eligible officers screening board.

d. Board Content. Deputy Chief, Reserve Policy and Integration will publish the precepts of the board. Questions for the board are approved by the Chief, BUMED or designee. The senior member will guide the questions of the board and should focus on questions designed to
evaluate the candidate’s maturity, character, temperament, judgment, motivation for command, and familiarity with the Navy Medical Department programs and policies. The findings of the screening board will be determined by majority vote. Specific guidance on evaluation and grading procedures and other relevant items will be provided in the command screening board precept.

e. **Report.** Within 15 days of completing its deliberations, the screening board must report its findings to Navy Personnel Command. All members who participated will be individually notified if they will or will not be awarded the 2D1 AQD.

6. **Records Management**

a. Records created as a result of this notice, regardless of format or media, must be maintained and dispositioned per the records disposition schedules located on the Department of the Navy Directorate for Administration, Logistics, and Operations, Directives and Records Management Division portal page at https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-Information-Management/Approved%20Record%20Schedules/Forms/AllItems.aspx.

b. For questions concerning the management of records related to this notice or the records disposition schedules, please contact the local records manager or the Department of the Navy Directorate for Administration, Logistics, and Operations, Directives and Records Management Division Program Office.

7. **Information Management Control.** The reports required in paragraphs 6b1(b), and 8a(1), are exempt from reports control per SECNAV M-5214.1 of December 2005, part IV, paragraph 7l.

Releasability and distribution:
This instruction is cleared for public release and is available electronically only via the Navy Medicine Web site, at https://www.med.navy.mil/Directives/