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The Chronicle

Excellence in action

Joint Collaboration In Action: Leading to Improve the Work Climate and Culture

By Dr. Kristine M. Diaz, Program Manager, Workplace Violence Prevention Program



With dedicated resources at the military treatment facility, Walter Reed National Military Medical Center (WRNMMC) has demonstrated improvements in communication and organizational change with an engaged Directorate leadership and all employees. COL Catherine Kimball-Eayrs, Chief Experience Officer for WRNMMC, has led the MTF to improve in organizational climate survey data and the promotion of cross-collaboration, shared information/resources to enhance the patient and staff experience.

We are currently undergoing a historical transition as an organization. What do you recommend for other MTFs and clinics when addressing culture and climate issues in the workplace?

First, it is imperative that we share as much information about the ongoing changes as possible. It is perfectly okay for leaders to be honest about what they do and don't know, and what the current open questions are. Not sharing information because we don't have all the details is detrimental to our team members. In the absence of information, information will be "created" and rumors started. The more we can get ahead of the information curve as leaders the better our staff will do with the ongoing changes. This means finding a variety of different ways to share information. A single town hall with a few different attendance times is not enough. The talking points need to be redundantly shared in a variety of different situations. If we ever get to the point that our staff tell us that they have heard the information "too much", we have done well. In addition, working hard to hear the particular concerns our staff are expressing (which often end up being different from leadership's expected concerns) can help shape the information we need to be collecting and sharing. The more we involve our front line leaders in the process of disseminating information, the farther out it will get into the organization.

Tell us about the Experience Office at WRNMMC.

The Experience Office at WRNMMC was established in July 2017. The idea was to have a single office responsible for focusing on both Staff and Patient Experience. Prior to its founding, a variety of different areas and projects were focused on improving staff and patient experience, but no one leader was responsible for improving them. Our Office of Experience has worked hard over the last two years to create a sustainable structure to help support ongoing projects

designed to better support Staff and Patient Experience. We selected metrics to better measure where we are currently and to help us determine if we are heading in the right direction. We also have partnered with other national organizations working on Experience to evaluate and learn how we can implement different projects and policies to better support our staff and our patients.

What improvements have occurred at WRNMMC as a result of the joint collaboration of the Experience Office, Command Leadership, Military and Civilian Personnel?

It has truly been a joint effort and the Office of Experience has been excited to be a part of all that has happened. For the staff, we have worked hard to better communicate and respond to all the areas our team members told us we could improve. We continued with our monthly Town Hall meetings, but shaped the information to answer the questions that we were hearing through various forums. We created monthly videos based on that information that the staff can access through our intranet portal, along with all the slides shown at the Town Halls. A weekly construction newsletter was created and maintained to ensure our patients and our staff are aware of the current impacts created by our ongoing construction projects. Our "Be the Change" working group was created and divided into focus teams to directly address the issues that were voiced during our DEOCS and FEVS surveys. One of the products of that working group was a staff resource portal with resources divided by Service and also for our civilian colleagues that support both their professional and personal development. Many other initiatives have occurred to better support and train our personnel so they can continue to do the hard and caring work that they do every day to support our beneficiaries.

For our patients, we felt there were several areas in which we could better support our patients. First was ensuring that our waiting spaces were a calming and educational area. The Office of Experience worked with our partners in IT, Command Communications, and the Assistant Chief of Staff to create WRBTV; a single closed circuit channel that provides content to our patients around experience and health education. We continue to expand the content to improve the viewing experience for our patients. We've also worked hard to increase the patient voice in our decision making. Working with a dedicated group of patients and staff, the Office of Experience will be establishing a Patient and Family Partnership Council that will have beneficiaries and staff members working together to identify and address issues that affect our patients ability to access and receive quality healthcare. In addition, we are working hard to determine how else we can increase the impact the beneficiary voice has on our day to day operations.

In addition to serving as the Chief Experience Officer at WRNMMC, you are currently providing oversight to the Experience Office at the NCR Market level. What recommendations do you have for other Markets? How can they translate this work?

I have come to understand that having a leader whose job description/responsibility contains both Patient and Staff Experience is extremely powerful. If someone "at the table" has that perspective, it can absolutely help shape policies and decisions that are being made that can otherwise adversely affect our patients or our staff. While some feel that focusing on Experience is a waste of time (who cares if they LIKE being a patient or staff member in our facility?) it is important to understand that numerous studies have demonstrated that a positive Experience (for both the staff and the patient) directly impacts the quality of care. I don't think anyone can argue that it is our desire to provide the highest quality care... and getting to that level means we must have someone who is working on changing the culture and ideas that directly effect Experience. We can't afford to do otherwise.

COL Kimball-Eayrs will share more of her expertise at the 2019 NCR Workplace Violence Prevention Program Forum on 25 April 2019 at the Ft. Belvoir Officer's Club. Register at: <https://einvitations.afit.edu/inv/anim.cfm?i=438905&k=06624A007B52> to reserve your spot. This event is FREE and open to military, civilian and contracting personnel. Continuing education is also being offered.

2019

Federal Employee Viewpoint Survey

Empowering Employees. Inspiring Change.

The 2019 Federal Employee Viewpoint Survey (FEVS) cycle has officially begun and the start dates for this year have been released. All permanent, non-politically appointed Federal civilian personnel that have been with their agency prior to October 1, 2018 will be invited via their work email to participate in the survey over the course of 6 weeks beginning on their service's start date.

Start Dates:

WAVE 1

Navy – Monday, May 13
 Army – Tuesday, May 14
 Air Force – Wednesday, May 15

WAVE 2

Army Corps – Tuesday, May 21
 4th Estate (OSD/ DHA) – Wednesday, May 22
 Marine Corps – Thursday, May 23

The FEVS is an annual survey administered by the U.S. Office of Personnel Management (OPM). The purposes of the FEVS is to measure permanent Federal civilian employees' perceptions of whether, and to what extent, conditions characteristic of successful organizations are present in their agencies. This also provides feedback to leadership at individual commands, facilities, or smaller departments within any agency as to their employee's perceptions of their working environment.

So, be on the lookout for your invitation and please take the 15-20 minutes to complete your survey!

FEVS POC for the NCR Market/ tIMO: Rob Judd , robert.j.judd2.civ@mail.mil , 301-295-0988

DPMAP 2019 Annual Appraisal !!!

The performance rating cycle Defense Performance Management and Appraisal Program (DPMAP) ended March 31, 2019.

Key Points:

1. DoD automated appraisal tool facilitates program through MyBiz+, MyPerformance
2. One rating cycle for all grades (1 April – 31 March)
3. Three tier rating system 5 (Outstanding); 3 (Fully Successful); 1 (Unacceptable)
4. Supervisors must have 50% or more supervisory elements
5. Minimum rating period is 90 days
6. Mandatory higher level review of the appraisal

Annual Appraisal Discussions:

1. Be detailed
2. Communicate feedback proactively
3. Breathe
4. Be Fair
5. Encourage Feedback

DPMAP Resources:

- DCPAS New Beginnings webpage: <https://www.dcpas.osd.mil/LER/DPMAP>
- DODI 431; Employee User Guide; Supervisor User Guide; Trusted Agent, Tool Kit, How to Videos

Defense Performance Management and Appraisal Program





Source: DHA Combat Support / Transition Support Plan



*** If you have a question, please bring it through your chain of Command. Each facility has a designated Transition Lead that can answer most questions regarding our transition, and bring unknown questions to DHA. Let us know!

As we continue through this year's transition, the DHA understands there is uncertainty among a lot of people. Below are some of the most frequently asked questions of the tIMO. In future editions, we will continue to publish FAQ's.

What will happen to my time off awards or compensatory time for travel when I transfer to the DHA?

Time-off awards will **not** transfer to a new organization. Compensatory time off is handled as follows:

FLSA Exempt employee

The time limit for using compensatory time is the end of the 26th pay period after the pay period during which it was earned. An agency may provide that an FLSA exempt employee who fails to take the compensatory time within 26 pay periods, or who transfers to another agency or separates from service before the compensatory time expires, must:

- receive payment for unused compensatory time at the overtime rate in effect when earned; or
- forfeit the unused compensatory time unless failure to use the compensatory time is due to an exigency of the service beyond the employee's control. An FLSA employee whose compensatory time off was forfeited due to an exigency of service beyond the employee's control must receive payment for the unused compensatory time at the overtime rate in effect when earned.

FLSA Non-exempt (FLSA Covered) Employees

The time limit for using compensatory time is the end of the 26th pay period after the pay period when it was earned. If the FLSA nonexempt employee fails to take the compensatory time within 26 pay periods, or the employee transfers to another agency or separates from Federal service before the compensatory time expires, pay the earned compensatory time off at the overtime rate in effect when earned.

Will Federal civilian staff keep their identities as the Army/Navy/Air Force?

A current Army, Navy, or Air Force Federal civilian employee identified to transfer from the Military Departments (MilDep) to the Department of Defense (DoD) will become a DoD civilian when they are formally notified by their parent MilDep that they will become part of the DHA.

Military members will remain the responsibility of their MilDep and remain Soldiers, Sailors, and Airmen within the Army, Navy, and Air Force respectively. Additional specific questions about military members should be routed to the Chief, Military Personnel Services Division, J-1.

What does it mean to be a DoD CIV working for the DHA?

From a Human Resource perspective, civilian employees will transfer from the Army, Navy, and Air Force and become Department of Defense employees. DoD manages the same HR areas as the services, including accountability, awards, labor management and employee relations, staffing and recruiting, personnel actions, and performance management. The DoD publishes guidance through issuances including DOD Instructions (DODI), DOD Directives (DODD), and DOD Manuals (DODMs).

DoD Civilian employees across the DHA will have common standards rather than individual standards aligned with the Military Departments. Over time, we will become more efficient and effective operating under common guidance that applies to all functional capabilities necessary to operate the Agency, market-level operations, and Military Treatment Facility functions.

Will the DHA be responsible for managing resources and shifting them across organizations within DHA when necessary?

DHA will manage all resources for the agency except military personnel. Military personnel will remain assigned to their respective military departments with duty in the military treatment facilities, markets/SSO, and agency HQ.



U.S. Department of Health and Human Services

Behavioral Health Services Employee Assistance and WorkLife Programs

UPCOMING LIVE WEBINARS

May 15, 2019 | 1:00–2:00pm ET

Pace Yourself for Productivity

Do you find that you're always one step behind, 10 minutes late, or just not meeting deadlines? Demanding responsibilities can leave us drowning and making little headway in tasks. Learn how to identify time-wasters and change procrastination habits in order to plan for today, forecast for the future, and ensure productivity throughout. **Register:** <https://eapworklife.adobeconnect.com/egpct1gsvu0j/event/registration.html>

June 12, 2019 | 1:00–2:00pm ET

Your New Life: Adjusting to Major Life Changes

Transformation can sound exciting and adventurous. However, when faced with change in our lives, especially unplanned change, it can be challenging, overwhelming, and even scary. We'll examine ways to flow with life's surprises and make the journey a more positive experience.

Register: <https://eapworklife.adobeconnect.com/eajgw8vmp7v4/event/registration.html>

FOR SUPERVISORS

June 26, 2019 | 1:00–2:00pm ET

Leading Starts with Emotional Intelligence

Emotional intelligence – or quotient (EQ) – is the ability to manage our emotions and have empathy in relationships with others. Being aware of how you utilize your EQ as you lead within your workplace culture can make a difference in how you are viewed as a leader. We'll discuss key EQ assets, ways to measure your current EQ, and how to strengthen and develop the qualities that reflect a well-rounded and well-equipped leader.

Register: <https://eapworklife.adobeconnect.com/er05erdk4nii/event/registration.html>

24 HOURS A DAY

1-800-222-0364 , TTY: 1-888-262-7848

www.WorkLife4You.com Registration Code: NCRMD

Introducing members of the tIMO: Womack Army Medical Center, Walter Reed National Military Medical Center, Naval Hospital Jacksonville, Keelser AFB 81 MDG, Fort Belvoir Community Hospital, the Joint Pathology Center, Seymour Johnson AFB 4 MDG, Pope Field 43 MDS, JB Charleston 628 MDG.



SPOTLIGHT:



Naval Hospital Jacksonville's priority, since its founding in 1941, is to heal the nation's heroes and their families. The command is the Navy's third largest medical treatment facility, comprising a hospital and five branch health clinics across Florida and Georgia. Of its patient population (163,000 active and retired Sailors, Soldiers, Marines, Airmen, Guardsmen, and their families), about 84,000 are enrolled with a primary care manager and Medical Home Port team at one of its facilities.

The tIMO is proud to welcome and serve Naval Hospital Jacksonville.

Source: <https://health.mil/>

tIMO site:

<https://info.health.mil/ncr/timo/default.aspx>

If you have any topics, questions, or comments for
The Chronicle please contact:

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