

February 2023

To: All Wing HSOs

From: Lt Col Stephen Leighton, Senior Program Manager for Health Services (CAP/HS)

Let me start off by saying that one of my primary goals for this year is to dramatically increase the amount and quality of communications within CAP Health Services. Each of you has been identified as and confirmed in your duty position as the Wing HSO for your respective Wings. I would welcome you to share any of this communication with all of the HSOs in your Wings.

This communication will include the following:

1. An update on the progress of the Draft, proposed new HS Regulation, 79-1, along with the proposed new CAP forms to replace the current 160 series.
2. An update on the progress and plans for the Draft, proposed new Health Service Specialty Track Guidelines. This will include a short discussion about the plans to put much of the knowledge elements into AXIS.
3. Some thoughts about how to handle requests for advancement in the HSO Specialty Track during the interim period until the Guidelines are finally approved.
4. Information about the developing collaborative and cooperative relationship between Health Services, Safety and the Chaplaincy.
5. A request for information about your Wing’s health services program, along with a survey about your Wing’s First Aid training program and your interest in both CPR and AEDs, in particular whether your Wing would be interested in participating in a proposed program to obtain AEDs at reduced cost, along with appropriate training and maintenance.
6. A listing of the current active National HS Working Groups. In addition, you are requested to make opportunities to participate in the Working Groups available to the HSOs in your Wing.
7. A brief review of the current and future work of the Health Services Advisory Team.
8. Progress on the Draft, proposed CAPR 79-1:

The good news is that it appears that there is an excellent chance that the new Health Services Regulation will finally be approved this year. It has been a long 4 years since this process began, but it appears to be moving forward. The new Regulation will help to clarify some of the questions and concerns that have been communicated to the National level and will introduce the new position of the Mission Health Service Officer (MHSO). It is intended that the MHSO position will become for Health Services what the MSO position has been for Safety. Over the coming years, plans are being developed to create a robust training program for MHSOs that will ensure that our MHSOs are fully capable of fulfilling this position on the ICT, on Missions, and for a wide range of activities, as well as enhance the role of the HSO at all levels in CAP.

1. An update on the progress and plans for the Draft, proposed new Health Service Specialty Track Guidelines. This will include a short discussion about the plans to put much of the knowledge elements into AXIS.

A full set of Specialty Track Guidelines has been created and is under review with the proposed new regulation. The Health Service Officer Curriculum Working Group is developing modules to be uploaded into AXIS this year. Each of the knowledge-based items for each level of HSO will be included in those modules. These have been reviewed by a National Committee tasked with updating all of the Specialty Track Guidelines and have been found consistent with the new, consistent formatting. HSOs, E&T Officers, and Commanders who would like a copy of the Draft, proposed guidelines are welcome to contact me (my contact information is at the end of this communication) at any time.

1. Some thoughts about how to handle requests for advancement in the HSO Specialty Track during the interim period until the Guidelines are finally approved.

The process for advancing in the HSO Specialty Track has been very confusing for a long time, as most of you are probably well aware. Too many qualified HSOs have been denied advancement because the CC or PDO simply didn’t have any idea about how to evaluate progress. Other members, even members in CAP for a very short time (as short as 1 month), have been given elevated ratings in Health Services based on their qualifications outside of CAP. Because the position of CAP HSO is a unique one, we are seeking to bring this to a close.

To remedy this, I would offer that where questions arise, request a copy of the Draft, proposed Specialty Track Guidelines to follow, as the final approved version is likely to be very close to the draft version. It is important to recognize that the role of the HSO in CAP is very different from most other health service roles outside of CAP. Prior training in medicine, nursing, paramedic and other fields certainly is valuable, but doesn’t automatically qualify an HSO for a higher HS rating. If questions come up that you find you cannot answer, please reach out to National Health Services and we will be glad to provide you with guidance.

1. Information about the developing collaborative and cooperative relationship between Health Services, Safety and the Chaplaincy.

Some of you may have already been aware that there has been a concerted effort to develop solid, cooperative and collaborative relationships between Safety, Health Services and the Chaplaincy. Clearly, these three divisions in CAP, together, are concerned with the health, safety and well-being of the membership. Blessed by National Command, Health Services has already joined with Safety in jointly contributing to the re-named Health & Safety Dispatch (replacing the Safety Beacon). Any and all HSOs are encouraged to consider writing short articles (300 – 500 words) on any topic in health services. Any articles received will be reviewed by the Health Services Advisory Team and adjusted (if needed) to fit the Dispatch. Articles can be sent to the CAP/HS: Lt Col Stephen Leighton at sleighton@capnhq.gov

Collaborative work with the Chaplain Corp is also active and on-going, especially in the area of Resiliency and the use of the 5 Pillars of Wellness. Attached to this message is an invitation to the upcoming on-line review of the 5 Pillars that is coming up very soon. I would strongly recommend sending this out to your Wing HSOs so that they have the opportunity to participate as well.

1. A request for information about your Wing’s health services program.

Most Wings have developed some level of Health Services program for the Wing. Many health service programs are limited to simply providing HSOs at Encampment and other major activities or assisting members in obtaining First Aid training for the purposes of qualifying for ES positions, while other Wings have developed major programs that include participation in Wing Staff meetings and decisions, active participation on Incident Command Teams and more. It would be quite helpful to the Health Services Advisory Team to have a brief description of each Wing’s health services program. There are opportunities to develop programs to make available equipment and training in health services where it is needed. Please see and return the short, attached survey about your Wing’s health services program, First Aid training program and your interest in both CPR and AEDs. In particular, we are interested in knowing whether your Wing would like to participate in a proposed program to obtain AEDs at reduced cost, along with appropriate training and maintenance.

1. The focus and work of the current active National HS Working Groups.

At this time, there are several active Health Services Working Groups at the National Level:

* Health Services Advisory Team
* Health Services Curriculum Development working group.
* First Aid training working group.
* Encampment Health Services working group.
* MHSO (Mission Health Services Officer) Development working group.
* Disaster and Epidemic working group.
* Aeromedicine working group.

Attached to this e-mail is a copy of an application form for use by any HSO who would like to become actively involved in one of these working groups. It is important to stress to interested HSOs that these are active working groups and acceptance into the working group would include an expectation of active participation.

1. A brief review of the current and future work of the Health Services Advisory Team.

As many of you are aware, the Health Services Advisory Team (HSAT) has been quite active over the last 3 years, beginning with the announcement of the Pandemic. Throughout that time, Health Services has advised National, Regional and Wing Commanders, along with Cadet Programs regarding risk mitigation during the Pandemic. CAP experienced a substantially lower infection rate than the general population, testifying to the skillful handling of the pandemic situation at all levels. The HSAT consists of all of the Regional HSOs as well as additional “ad hoc” members who bring various backgrounds and expertise to the table. The above working groups all report back to the HSAT which works with the CAP/HS to guide the development and work of CAP Health Services at all levels. This represents a substantial expansion and elevation of the role of Health Services in CAP.

Over the coming months and years, we will endeavor to keep you appraised of the ongoing work and projects of CAP Health Services and always welcome HSO feedback and recommendations. Eventually, we hope to build the Mission HSO position into one that matches the Mission Safety Officer both in training and as direct advisors to Command.

Finally, it is hoped that the work of the last few years will bring about a much more interesting and vital role for HSOs throughout CAP. This should include new and better opportunities for prospective members with health services backgrounds to see in CAP unique opportunities to express their expertise in a unique way in a unique organization.

Respectfully,

Lt Col Stephen Leighton, CAP/HS

e-mail: sleighton@capnhq.gov

Phone: 336-529-0383