



UNDER SECRETARY OF DEFENSE
4000 DEFENSE PENTAGON
WASHINGTON, D.C. 20301-4000

AUG 14 2012

MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
DIRECTORS OF THE DEFENSE AGENCIES
DIRECTORS OF DEPARTMENT OF DEFENSE FIELD ACTIVITIES

SUBJECT: Delegation of Expedited Hire Authority for Shortage Category and/or Critical Need Health Care Occupations

Secretaries of the Military Departments, Directors of the Defense Agencies, and Directors of Department of Defense (DoD) Field Activities with Independent Appointing Authority (IAA) are hereby delegated the authority and responsibility under provisions of section 1599c of title 10 United States Code (U.S.C.) (Expedited Hire Authority), as amended, to appoint health care professionals in the occupations on the attached list, at all grade levels for their organizations and their serviced organizations without IAA. The health care occupations listed on Attachment 1 have been determined as meeting the criteria for being designated as a shortage category or critical need occupation.

The authorities in sections 3304, 5333, and 5753 of title 5, U.S.C. will be utilized to recruit and appoint individuals into these occupations in the competitive service. The principles of preference for the hiring of veterans and other persons established in subchapter 1 of chapter 33 of title 5, U.S.C. will also be applied when exercising this authority. Attachment 2 provides implementation guidance for using this expedited hiring authority, which expires December 31, 2015.

Requests to include additional occupations under this authority must be submitted to the Defense Civilian Personnel Advisory Service (DCPAS), via the Chief Human Capital Officer, Office of the Assistant Secretary of Defense for Health Affairs, and must include the data delineated in Section VII of the attached updated implementation guidance.

Although the delegated appointment authority expires on December 31, 2015, the Department will annually assess its usage, and may rescind the authority earlier should conditions warrant. Assessment of the usage of this authority will be based, in part, on DoD Component data required to be submitted to DCPAS by the Components annually on October 31, from 2012 through 2015. Reports should address the data required by Section IX of the attachment.

This supersedes the previous delegation memorandum to the Secretaries of the Military Departments and Directors of the Defense Agencies of April 25, 2012.

You may re-delegate this authority in writing.

Erin C. Conaton

Attachments:
As stated

ATTACHMENT 1
Health-care Shortage and/or Critical Need Occupations

<u>Series</u>	<u>Occup Title</u>
180	PSYCHOLOGIST
181	PSYCHOLOGY AID & TECHNICIAN
185	SOCIAL WORKER
186	SOCIAL SERVICES AID & ASSISTANT
601	GENERAL HEALTH SCIENCE (CHIROPRACTOR) (CYTOTECHNOLOGIST)
602	MEDICAL OFFICER / PHYSICIAN
603	PHYSICIAN ASSISTANT
610	NURSE
620	PRACTICAL NURSE
621	NURSING ASSISTANT
630	DIETITIAN & NUTRITIONIST
631	OCCUPATIONAL THERAPIST
633	PHYSICAL THERAPIST
636	REHABILITATION THERAPY ASSISTANT
640	EMT/PARAMEDIC
642	NUCLEAR MEDICINE TECHNICIAN
644	MEDICAL TECHNOLOGIST
645	MEDICAL TECHNICIAN
647	DIAGNOSTIC RADIOLOGIC TECHNOLOGIST
648	THERAPEUTIC RADIOLOGIC TECHNOLOGIST
649	MEDICAL INSTRUMENT TECHNICIAN
651	RESPIRATORY THERAPIST
660	PHARMACIST
661	PHARMACY TECHNICIAN
662	OPTOMETRIST
665	SPEECH PATHOLOGIST & AUDIOLOGIST
667	ORTHOTIST & PROSTHETIST
668	PODIATRIST
669	MEDICAL RECORDS ADMINISTRATOR
671	HEALTH SYSTEM SPECIALIST
675	MEDICAL RECORDS TECHNICIAN
680	DENTAL OFFICER / DENTIST
681	DENTAL ASST (EXP FUNC DENTAL AUX)
682	DENTAL HYGIENIST
683	DENTAL LABORATORY AID & TECHNICIAN
690	INDUSTRIAL HYGIENIST
701	VETERINARIAN
858	BIOENGINEER & BIOMEDICAL ENGINEER

ATTACHMENT 2
UPDATED IMPLEMENTING GUIDANCE FOR
EXPEDITED HIRING AUTHORITY FOR HEALTH CARE PROFESSIONALS

I. Authority

- A. Section 1599c(a) of Title 10, United States Code (U.S.C.), provides that the Secretary of Defense may designate any category of healthcare occupations within the Department of Defense as shortage category positions or critical need occupations and utilize the authorities in sections 3304, 5333 and 5753 of title 5, U.S.C., to recruit and appoint qualified persons directly to positions so designated.
- B. The authority to recruit and appoint qualified persons directly in the competitive service under this expedited hiring authority to shortage category or critical need positions is delegated to DoD Component Heads. This authority may be further delegated in writing.
- C. Appointments under this authority may not be made after December 31, 2015.
- D. In using these authorities, the principles of preference for the hiring of veterans and other persons established in subchapter I of chapter 33 of title 5, U.S.C., will be applied.

II. Use of Expedited Hiring Authority.

The following principles shall be followed when exercising this authority:

- A. Comply with all relevant laws to the extent that DoD is not exempt from such laws.
- B. Adhere to displaced employee procedures.
- C. Adhere to merit principles.

III. Announcement Process –

- A. Public notice is required. Public notification can be on a one-time basis or through an open continuous announcement.
- B. In making public notification, Components must use announcements that are concise, easily understood and user-friendly.

1. Components will establish procedures for recruiting that will ensure fair and open competition and the identification of qualified persons for referral to management for selection and appointment.
2. Potential applicants should have ready access to information about when, where, and how to apply for healthcare positions.

IV. Selection of applicants.

All applicants considered for selection must be qualified.

A. Qualified individuals are defined as individuals who:

1. Meet established DoD agency specific qualification standards, or in the absence of DoD standards, the Office of Personnel Management's (OPM's) qualification standards.
2. Meet any selective placement factors.

B. Application of the principles of veterans' preference:

1. When preference eligibles and non-preference eligibles are being considered at the same time, the preference eligible must be selected if candidates are essentially equally qualified.
2. Essentially equal qualification determinations will be based on an analysis of the qualifications of the respective candidates and their relationship to the requirements of the position being filled.
2. An appointing official may not non-select a preference eligible who is essentially equally qualified to select a non-preference eligible unless the requirements governing non-selection of preference eligible veterans described below are met.

C. Process required to non-select preference eligibles:

1. Justification to non-select any preference eligible must be based on the requirements of the position and the qualification of the preference eligible. The selecting official must articulate why the qualifications of non-selected preference eligibles are not essentially equal to those of selected non-preference candidates. Non-selection of a preference eligible may also be related to the accuracy of qualifications presented by the preference eligible.

2. All non-selection recommendations must be coordinated with the local Human Resources Officer (HRO). The HRO may request additional information from the selecting official in order to adequately review and advise on the request to non-select a preference eligible. Requests to non-select preference eligibles must include a written analysis, based on proper and adequate reasons that directly affect the candidate's clinical qualifications and the clinical requirements of the position. Each case should be decided based on application of merit system principles.

3. Non-selection of preference eligibles, except for veterans with a compensable service connected disability of 30% or more, will be documented by the selecting official and approved by the second level supervisor.

4. For non-selection of veterans with a compensable service connected disability of 30% or more (CPS), the Military Treatment Facility (MTF) Commander, or equivalent, must recommend approval of the passover based on documented determination that the veteran does not have qualifications essentially equal to those of the non-preference candidate. The DoD Component Head, or their equivalent, will exercise approval authority on these Passover requests. This authority may be re-delegated to the component Deputy Surgeon General (DSG) or equivalent, in each component's subordinate command, for adjudication. Delegations must be in writing.

All non-selection documentation and decisions must be provided to the local HRO, with a copy to the Assistant Secretary of Defense (Health Affairs) Chief Human Capital Officer (ASD(HA) CHCO). The information will be maintained as part of the staffing case file. Components will report information annually as required in paragraph IX.

V. Merit Principles of Fair and Open Competition –

A. Recruitment should be from qualified individuals from appropriate sources in an endeavor to achieve a workforce that is representative of all segments of society, and selection and advancement should be determined solely on the basis of relative ability, knowledge, and skills after fair and open competition which assures that all receive equal employment opportunity.

B. Components must ensure transparency in hiring processes.

VI. Appointing Authority – Individuals appointed under this policy will be given appointments using “Z5C” (10 U.S.C. 1599c). Z5C will be used for Nature of Action Codes (NOACs) 100, 101, 500, 501, 108, 508, 120 and 520. Actions will be processed in the Defense Civilian Personnel Data System (DCPDS).

VII. Adding additional occupational series to this expedited hiring authority –

The following data, at a minimum, shall be submitted to support a request for positions in addition to those included in the current Secretary of Defense health care professional and medical EHA authorization. Information will be provided to the Defense Civilian Personnel Advisory Service (DCPAS) through the Assistant Secretary of Defense (Health Affairs) (ASD(HA)) Chief Human Capital Officer (CHCO).

A. Current Recruitment Needs

- Numbers of positions for which you need to recruit
- Attempts to recruit and results
- Attempts to incentivize candidates and result of the incentives on recruitment success

B. Projected Recruitment Needs

- Significantly increased future workforce requirements due to new or increased mission
- Substantial increase in vacancies due to projected retirements and/or turnover

C. Supply Gap

- Vacancy lapse rate, i.e., inability to find qualified applicants leads to inability to fill positions
- Market data analysis that shows the number of available applicants with the necessary skills is lower than the demand

D. Past Recruitment Efforts and evidence of the ineffectiveness of these efforts,

e.g.,

- Job fairs
- Incentives
- Student Loan Repayment

VIII. Oversight and Accountability –

A. The ASD(HA), and the Deputy Assistant Secretary of Defense (Civilian Personnel Policy) (DASD(CPP)), under the direction and control of the USD (P&R), are responsible for this expedited hiring authority, the determination of

shortage category positions or critical need occupations, and the development of implementing guidance and policies under Section 1599c of title 10, U.S.C.

- B. ASD(HA) CHCO, also serving as the OSD FCM for Health Affairs, is responsible for oversight, accountability and reporting among the Component health affairs communities.
- C. DoD Component Heads are responsible for proper use of this authority, adherence to merit and veterans' preference principles, accountability and reporting for their respective component and in coordination with their respective Functional Community Managers.
- D. DoD Component Heads shall provide information and data on the use of this appointing authority when requested by the DCPAS or the ASD(HA) CHCO and as required by Section IX below.
- E. Full documentation for appointments made under this authority, sufficient to allow reconstruction of the action, must be maintained.
- F. Component FCMs will provide oversight, accountability and reporting for their respective healthcare community on issues such as workforce planning, expanded recruitment strategies and the use of recruitment incentives. They will provide information, as requested, to the ASD(HA) CHCO.
- G. DCPAS shall oversee and monitor use of this authority throughout the DoD.
- H. Appointments under this authority will be evaluated as part of the DoD Human Capital Accountability Framework.

IX. Reports

Components must report to DCPAS annually, from 2012 through 2015 inclusive, on October 31st, the below data. Reports should be developed with input of the Component Health Affairs FCM and Human Resources staff.

- A. Use of incentives in conjunction with the authority, e.g., recruitment/relocation incentives; student loan repayments.
- B. Effectiveness of the authority in meeting Component staffing needs.
- C. Documentation that would support continued use of the authority, e.g., large numbers of recruitments compared to market supply gaps.

D. Documentation for the non-selection of veterans, to include occupation, location and reason(s) for non selection.