



REPLY TO  
ATTENTION OF

DEPARTMENT OF THE ARMY  
OFFICE OF THE ASSISTANT SECRETARY  
MANPOWER AND RESERVE AFFAIRS  
5440 STUDENT DRIVE  
ABERDEEN PROVING GROUND, MD 21005-5200

October 20, 2000

## MEMORANDUM FOR CONUS CPOC DIRECTORS

**SUBJECT: Recruitment for Medical Positions – Civilian Personnel Operations  
Center Management Agency (CPOCMA) Guidance Memorandum  
00-41**

This memorandum supplements CPOCMA Guidance Memo 00-32 dated September 18, 2000. The enclosed MEDCOM memorandum, subject: Revised Mission and Procedures for External Recruitment of Hard-to-Fill Medical Positions reflects agreement between the MEDCOM Commander and the CPOCMA Director regarding recruitment for medical positions.

### Recruitment for Medical Positions:

The Medical Cell at the Northeast Civilian Personnel Operations Center (NECPOC) is responsible for delegated examining for the 18 2-grade interval series listed in CPOCMA Guidance Memo 00-32. The Medical Cell will recruit for permanent, full-time positions only.

The CPOCs are responsible for recruitment for all other medical positions to include temporary, part-time and intermittent positions in the 18 series listed in the CPOCMA guidance memo. The CPOCs should work closely with serviced CPACs which have medical treatment facilities to project staffing needs. When significant temporary and less than full-time staffing needs are anticipated, CPOCs should issue open continuous announcements to establish inventories of candidates for these positions.

PERSACTIONS to fill temporary and less than full time positions will be submitted as name requests after selections are made. The DOD Priority Placement Program will be cleared when the PERSACTION is received.

### Participation in Job Fairs:

The Department of Army Staffing Task List assigns responsibility for administration of the external recruitment program to CPOCs. This includes off-post recruitment such as job fairs.

The NECPOC Medical Cell will lead and coordinate Army-sponsored job fairs within the four regional medical commands it services. Participation in locally sponsored, non-Army job fairs is at the discretion of the CPOCs. If the local job fair appears to be a likely source of candidates for hard-to-fill medical positions, participation should be coordinated by the CPOC and CPAC with the CPOC taking the lead. The CPOC should advise the Medical Cell of any plans to participate in a non-Army medical job fair.

Medical Cell or CPOC recruiters who attend job fairs are recruiting for the Department of Army. Candidates should be referred to the Medical Cell or CPOC as appropriate regardless of who is recruiting. Recruiters who attend job fairs should keep track of the number of valid applications which are received as a result of the job fair.

Questions about this memo may be directed to Tricia Horst at DSN 458-1755 or by e-mail to [patricia.horst@cpocma.army.mil](mailto:patricia.horst@cpocma.army.mil).



Elmer F. Williams

Director, Civilian Personnel Operations  
Center Management Agency

Enclosure

Copy Furnished:  
Civilian Personnel Director, MEDCOM  
Chief, NECPOC Medical Cell

## Horst, Patricia C Ms CPOCMA

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To: Jamison, Dian S  
Subject: RE: MEDCOM Guidance to Field - MEDCELL FY 01

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- > MCPE-C (690)
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- > MEMORANDUM FOR Commanders, MEDCOM Installations, Major Subordinate
- > Commands and Activities
- >
- > SUBJECT: Revised Mission and Procedures for External Recruitment of
- > Hard-to-Fill Medical Positions
- >
- >
- > 1. LTG Peake has approved, through fiscal year 2001, extension of our
- > Medical Cell (MEDCELL) at Aberdeen Proving Ground, Maryland, for external
- > recruitment for full-time positions in our hard-to-fill medical
- > occupations. His approval included changes to the MEDCELL mission and
- > MEDCOM role, as described in the following paragraphs.
- >
- > 2. Occupational series. The MEDCELL will continue to provide centralized
- > medical external recruiting for permanent fills for all of the
- > occupational series listed on the enclosure for all U.S. Army Medical
- > Command (MEDCOM) medical treatment facilities (MTFs) and activities except
- > Madigan Army Medical Center (MAMC). The West Civilian Personnel
- > Operations Center (CPOC) will service all of MAMC's recruitment needs
- > beginning 1 October 2000. Servicing Civilian Personnel Operations Centers
- > (CPOCs) will resume the total recruiting mission for medical occupations
- > not listed on the enclosure.
- >
- > 3. Permanent full time versus less than full time and temporary
- > recruiting needs. The MEDCELL will recruit for permanent, full-time
- > positions only. Your servicing CPOC will meet your recruitment needs for
- > temporary and less than full-time medical positions. You will notify your
- > CPOC of "when actually employed" (WAE) and temporary needs via e-mail or
- > other communication rather than via a PERSACTION/request for personnel
- > action. The CPOCs will establish standing inventories in appropriate
- > occupations to fill these needs. When you make a selection from this
- > standing inventory, you will then submit the request for personnel action
- > as a name request to the servicing CPOC.
- >
- > 4. MEDCELL streamlined processes.
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- > \* The MEDCELL will streamline the recruiting process by establishing a
- > "Quasi" direct-hire procedure for extreme shortage positions. This
- > procedure involves name requests from the medical activity and quick
- > assessment and referral by the MEDCELL.
- >
- > \* If MEDCELL finds that a name-requested individual is not qualified
- > for the position, it will contact the selecting supervisor to seek
- > clarification of the applicant's resume so that an accurate qualification
- > assessment is possible. It will no longer return name requests as not
- > qualified without this discussion with the selecting supervisor.
- >
- > \* If MEDCELL determines that a name-requested individual is not
- > qualified for the position for which requested, it will attempt to
- > recommend alternative hiring options for that individual--such as
- > qualification for other current vacancies--to the medical activity.
- >
- > \* The MEDCELL will issue open continuous announcements to maintain
- > inventories for the following occupations in its mission.
- >
- > GS-180/185 - Interdisciplinary ADAPCP
- > Counselor
- > GS-602 - Medical Officer

- > GS-610 - Nurse
- > GS-644 - Medical Technologist
- > GS-660 - Pharmacist

> \* The MEDCELL will establish long-term announcements for the remaining  
> occupations and make interim referrals to you as needed. Long-term  
> announcements are like any routine posting except that the open period for  
> applying is longer than on routine postings and multiple referrals to  
> multiple vacancies can be made from the posting.

> \* In addition, MEDCELL will post specific announcements for vacant  
> positions requiring unique skills.

> \* MEDCELL will accept applications in any format whether by fax, mail,  
> or electronic.

> 5. Marketing efforts. The MEDCELL will continue to lead and coordinate  
> job fairs and similar local efforts to recruit candidates for medical  
> positions listed in its mission, except those for MAMC. Regional medical  
> centers and MTFs must be active partners in marketing our medical jobs and  
> in assisting local applicants in submitting applications for  
> consideration. The MTFs should name request qualified individuals for  
> vacancies whenever possible. The MEDCOM Civilian Personnel Division will  
> manage available marketing dollars and distribute those upon request for  
> specific marketing/recruitment efforts from the MEDCELL or MTFs.

> 6. Recruitment sources. The MTFs should try to target recruitment from a  
> single source to fill vacancies. You should submit recruitment requests  
> for multiple sources to "shop" for candidates only if you cannot project  
> the most viable recruitment source. Historically, 50 percent of all  
> referrals issued by the MEDCELL were returned without action because the  
> CPOC filled the position via internal placement or Excepted Appointment.  
> The same is true for the CPOCs. This results in duplicative efforts that  
> both waste resources devoted to meeting our critical recruitment needs and  
> cause delays in filling positions.

> 7. Projecting vacancies to achieve timely fills. We will work together  
> to project vacancies, with the goal of starting the recruitment process in  
> time to have replacements on hand before or as vacancies occur. The U.S.  
> Army Europe will project vacancies, if possible, based on pending tour  
> expirations and will initiate recruitment action as far in advance of the  
> actual vacancy as possible to achieve timely fill. The Civilian Personnel  
> Operations Center Management Agency (CPOCMA) will project continental  
> United States vacancies based on historical data from the Workforce  
> Analysis Support System. These projections will help the MEDCELL manage  
> open continuous and long-term announcements.

> 8. Standard qualification requirements. The MEDCOM is working to  
> standardize qualification and credentialing requirements and to streamline  
> privileging processes to enhance all aspects of our recruitment program.

> 9. Access to qualified military who leave active duty. The CPOCMA is  
> working with the U.S. Army Personnel Command to refer medical military  
> members leaving the service under honorable conditions to the MEDCELL for  
> referral for MEDCOM vacancies. We encourage you to counsel your departing  
> military members in the same way.

> 10. Performance evaluation. The MEDCOM and CPOCMA will develop  
> instruments for evaluation of timeliness and effectiveness of the  
> recruitment efforts for medical positions in each MEDCOM Regional Command.  
> The Civilian Personnel Division will brief the MEDCOM Commander on a  
> quarterly basis beginning with 1st Quarter fiscal year (FY) 01.  
> Continuation of MEDCELL beyond FY01 will be determined upon completion of  
> 3rd Quarter briefing.

> 11. The successful recruitment for hard-to-fill medical positions  
> requires a cooperative effort between the medical activity and the  
> personnel community. All must be meaningful and open communication as to  
> needs and requirements and conduct careful succession planning to meet  
> those needs. Either party attempting to accomplish the mission

