

REGIONAL HEALTH COMMAND ATLANTIC OFFICE OF THE INSPECTOR GENERAL



RHCA IG TEAM





REGIONAL HEALTH COMMAND- ATLANTIC COMMAND INSPECTOR GENERAL

Last quarter, our office conducted an inspection regarding the staffing adequacy at our Region's Soldier Recovery Units (SRUs). These units are part of the Army Recovery Care Program which transitions Soldiers back to the force and/or to Veteran status through a comprehensive program of medical care/rehabilitation management, professional development and achievement of personal goals. Regional Health Command - Atlantic hosts more SRUs than any other Region with 6 SRUs and one Soldier Recovery Brigade. The total Soldier capacities of these units ranges from 150 to 250 Soldiers and they also account for Soldiers in the Remote Medical Management program which provides medical case management for medically non-complex Army National Guard or Army Reserve Soldiers. It was an honor to meet with these teams of selfless, caring individuals who do their very best in taking care of our wounded and recovering teammates. The results of our findings are posted on the RHC-A webpage at https://www.nrmc.amedd.army.mil/Explore-RHC-A/Inspector-General/Inspection-Reports/ and we thank them for what they do for our Army.

ARMY COMBAT FITNESS TEST (ACFT)

HQDA EXORD 153-22 ARMY COMBAT FITNESS TEST (ACFT)

https://www.milsuite.mil/book/docs/DOC-1129937

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Some Key points in this EXORD:

-Starting 1 April 2022, the ACFT will begin to be fully implemented as the Army's official physical fitness test; with record testing beginning 01 October 2022 as follows: Regular Army, United States Army Reserve Active and Guard Reserve (RA/USAR (AGR)) personnel completing one record ACFT prior to 1 April 2023, and Army Reserve and Army National Guard component (RC (less USAR (AGR)) personnel completing one record ACFT prior to 1 April 2024.

-The Army will incorporate the ACFT into personnel policy in a time-phased, deliberate manner, to ensure all Soldiers have the opportunity to train for and take the test.

-All Soldiers are expected to become familiar with the revised ACFT events and scoring tables, and will take at least one diagnostic ACFT prior to taking their first record ACFT.

-All ACFT modification templates (in E-profile) for permanent profiles must be updated to reflect the ACFT Events permitted and prohibited.

-RA and USAR (AGR). Soldiers will take a diagnostic ACFT (to standard) between 01 April 2022 and 30 September 2022. RC (less USAR (AGR). Soldiers will take a diagnostic ACFT (to standard) between 01 April 2022 and 31 March 2023. In any instance where the Soldier passes a diagnostic ACFT prior to 01 October 2022, the Soldier may elect to have that diagnostic test re-characterized as a record ACFT and uploaded to the Digital Training Management System (DTMS) at any time after 01 October 2022.

-HQDA DCS, G-3/5/7 will publish a subsequent FRAGO to this EXORD announcing when DTMS is ready to receive data, and forward data to personnel systems.



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ARMY COMBAT FITNESS TEST (ACFT) ENTRIES ON EVALUATION REPORTS,

MILPER Message 22-099, and posted on S1NET at the following link. https://www.milsuite.mil/book/docs/ DOC-1131248

Some Key points

-The purpose of this message is to update and inform rating officials and leaders on ACFT content entries authorized on evaluation reports with the release of Army Directive 2022-05 – ACFT that occurred on 23 March 2022. Additionally, this message was to re-inform of procedural requirements specific to APFT data entry on evaluation reports as the Army continues transition to the new test of record beginning 01 April 2022.

-No ACFT information or ACFT data (including diagnostic ACFT test results) will be entered on an evaluation report having an evaluation "Thru Date" prior to 01 October 2022. This aligns with Army Directive 2022-05, which indicates 01 October 2022 and after as the first instance when a record ACFT is able to be taken, and/or, when the first instance a previous diagnostic ACFT, re-characterized as a record ACFT, is authorized for entry within the Digital Training Management System (DTMS).

-Evaluation procedural requirements for APFT data entry remains unchanged in this example. A selection of "NO APFT" from the provided drop down will occur, with the required statement "NO APFT IAW with Army Directive 2022-05." annotated within the associated comment section.

Reference:

HQDA EXORD 153-22

MILPER MESSAGE 22 -099

Army Directive 2022-05

www.milsuite.mil

PROMOTION POINT CHANGES FOR PROMOTION TO SERGEANT & STAFF SERGEANT

From the Army G-1: This applies to the Regular Army (RA) and the United States Army Reserve (USAR). Effective 1 April 2023, award of promotion points are changed as outlined in memo located https://www.milsuite.mil/book/docs/DOC-1136517. Applicable to both the RA and all USAR simultaneously, these changes will inform the selection process for promotion pin-on to Sergeant (SGT) and Staff Sergeant (SSG) beginning with the June 2023 promotion month. With the implementation of the Integrated Personnel and Pay System-Army (IPPS-A), promotion point calculations will be fully automated within the system for both RA and USAR Soldiers.

- RA and USAR (AGR) Soldiers will continue to use the last record APFT to establish physical fitness promotion points through 31 March 2023, and USAR (less AGR) Soldiers continue through 31 March 2024. During these periods, E-4s and E-5s with no record APFT in the DTMS will be provided the opportunity to take the APFT solely for promotion purposes. No adverse administrative actions, including flags or the initiation of separation, will be taken against Soldiers who fail the APFT under this provision.
- Effective 1 April 2023, RA and USAR (Active Guard Reserve (AGR)) Soldiers will begin using their record
 ACFT scores to determine award of promotion points for promotion to SGT and SSG.
- USAR (less AGR) Soldiers will continue to use their last record Army Physical Fitness Test (APFT) to award promotion points through 31 March 2024. To support transitioning to the revised distribution of promotion points, effective 1 April 2023, all USAR (less AGR) Soldiers will use a transitional APFT-based table to determine promotion points. Effective 1 April 2024, all USAR (less AGR) Soldiers will use of the ACFT to award promotion points.

QUARTERLY NEWSLETTER



REGIONAL HEALTH COMMAND ATLANTIC OFFICE OF THE INSPECTOR GENERAL



ARMY Directive 2022-06 (Parenthood, Pregnancy and Postpartum)

Army Directive 2022-06 purpose was to update Army policy and execute Secretary of Defense priorities. The directive incorporates evidence-based health and wellness guidance to improve quality of life, promote flexibility, and enable all Soldiers to safely continue their duties, return to readiness, perform critical assignments, and advance in their careers while growing their Families. This directive is grounded in the Army People Strategy; Diversity, Equity, and Inclusion Annex; Holistic Health and Fitness practices; Department of Defense Equal Opportunity Policy; and medical guidance. It also serves as part of the broader Action Plan To Prioritize People and Teams. This directive applies to the Regular Army (RA), Army National Guard (ARNG), Army National Guard of the United States (ARNGUS), and U.S. Army Reserve (USAR). This directive addresses a multitude of topics to include:

Leave Management:

- Maternity convalescent leave (birth parent): limited to six week for a maximum of 12 weeks of non-chargeable leave that may be taken consecutively with primary or secondary caregiver leave.
- Primary caregiver leave: Limited to six weeks of non-chargeable leave and must be taken within one year.
- Secondary caregiver leave: Limited to 21 days of non-chargeable leave and must be taken within one year.

Operational and Training Deferment: The provision requires that a birth parent (Soldiers who physically give birth) and in some cases the active duty non-birthparent be deferred or excused for 365 days after the birth of their child from all continuous duty events that are in excess of 1 normal duty day/ shift to ensure that at least one parent is home with their child during this time period of their child's life. The rule also applies to situations where a Soldier becomes a parent through specific types of adoption, foster placement and surrogacy situations. What constitutes a normal duty day/shift for purposes of this directive? A normal duty day/ shift is defined by commanders depending on the mission of the unit. However, based on the guidelines in the directive relating to family care plans, the safest interpretation of a normal duty day or shift would be a duty day or shift that correlates to the times when a soldier can receive childcare from the CDC or comparable childcare facility

Professional Military Education (PME): The Army Directive states, "Temporary profiles for fertility/ pregnancy/postpartum will not restrict the eligibility for Officers and Warrant Officers to attend and/or graduate from PME..." The provision exempts pregnant and postpartum Soldiers from the physical requirements of the courses, but must work with their commandants "to complete all course requirements. Enlisted Soldiers shall not be required to attend mandatory PME courses during the first 365 days postpartum. This delay cannot result in any adverse administrative actions. The Deputy Chief of Staff, G-1 was tasked to establish policy for temporary promotion of Soldiers delayed in completing mandatory PME courses as a result of a temporary pregnancy profile.

Implementation: The Army Directive lays out which organizations and leaders will be responsible for providing education and guidance on the implementation of these new policies. Brigade level commanders will be responsible for publishing policy letter that establishes brigade procedures on these issues pursuant to the directive. Further, this directive orders that an online "toolkit" which will not require CAC to access to be created and organized with all relevant parenthood, pregnancy, and postpartum resources, and the updating of 19 Army Regulations within the next 24 months of Army Directive 2022-06 published date.

Reference:

Army Directive 2022-06

Army Regulation 600-8-10

army-directive2022-06-article-bymrs-bethwoodward.pdf
(milsuite.mil)