

## DEPARTMENT OF THE ARMY HEADQUARTERS, UNITED STATES ARMY MEDICAL COMMAND 2450 CONNELL ROAD, BLDG 2264 JBSA FORT SAM HOUSTON, TEXAS 78234-7664

OTSG/MEDCOM Policy Memo 24-010

MCCG

4 March 2024

Expires 4 March 2026

## MEMORANDUM FOR ALL PERSONNEL, U.S. ARMY MEDICAL COMMAND

SUBJECT: Commander's Open Door Policy

1. Reference: Army Regulation (AR) 600-20, Army Command Policy, 24 July 2020.

2. Purpose: To describe The Surgeon General/Commanding General's Open Door Policy. This policy applies to all military personnel and Department of the Army Civilian personnel assigned or attached to the Office of The Surgeon General or the Army Medical Command, and Family Members of our Soldiers.

3. My intent is to listen to concerns and assist with solutions that are in the best interest of the individual, the unit, and this command. It is my experience that most problems can be solved by the individual's immediate chain of command. While I do not require an individual to obtain chain of command approval prior to speaking to me, I do request that the chain of command be used and given every reasonable opportunity to solve problems at the lowest possible level.

4. The Open Door Policy is not intended to supplement or replace the formal review process established by law, regulation, or collective bargaining agreements nor will it interfere with ongoing investigations or matters where subordinate authorities have taken final action or the appellate process has run its course. Formal review processes are available to address most problems and they afford individuals appropriate due process.

5. Some examples of formal review processes that may involve me as a decision maker are proceedings under Article 15 of the Uniform Code of Military Justice (UCMJ), administrative separation actions, administrative and negotiated grievances (to include reviewing allegations of civilian misconduct), contract awards, EO complaints, non-punitive reprimands under AR 600-37, medical processing pursuant to the integrated disability evaluation system, clinical quality assurance actions (adverse clinical privileging and medical malpractice) in accordance with AR 40-68, and disciplinary actions. An individual Soldier or Family Member involved in one of these formal review processes may schedule an Open Door meeting with me *after* the conclusion of the process.

6. Any request to discuss an issue with me should be addressed in writing and describe the nature of the issue, why my personal attention is required, and steps taken to address the issue up to that point. Issues affecting enlisted personnel should be brought to the attention of the MEDCOM Command Sergeant Major, if possible, before being brought to me.

7. No member of our organization should feel they cannot voice their concerns or make a complaint due to fear of retaliation or reprisal. Personnel are prohibited from taking or threatening to take an unfavorable action, withholding or threating to withhold a favorable action, or taking any action in reprisal or retaliation against any person who makes or prepares to make communication or complaint to a Member of Congress, the Command, the Staff Judge Advocate, or the Inspector General. Commanders all at levels have the responsibility to address issues in a timely manner. By listening to its personnel, the command is able to improve and to foster understanding of the rationale for practices, processes, and decisions. The chain of command will ensure complainants are permitted to address their concerns and protected from all forms of retaliation or reprisal.

8. The point of contact for the Open Door Policy is OTSG/MEDCOM Executive Office at 703-693-5820.

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MARY KRUEGER IZAGUIRRE Lieutenant General, USA The Surgeon General and Commanding General, USAMEDCOM