

Army Family Action Plan (AFAP) General Officer Steering Committee (GOSC) Summary

General Daniel Allyn, Vice Chief of Staff, Army (VCSA) chaired the 21 Sep 15 AFAP GOSC meeting which reviewed 15 issues. Attendees included senior officials from the Department of Defense (DoD), Department of the Army (DA), Army Staff, Commands, military support organizations, and senior spouses.

Family Support Issues

Issue 625: Transitional Compensation (TC) Benefits for Pre-existing Pregnancies

Proponent: Assistant Chief of Staff for Installation Management (ACSIM)

Issue recommendation: Authorize TC benefits for the child of a pregnant abused Family Member from birth through benefit period.

Final issue status: Complete

Accomplishments:

1. In Jul 10, Office of the Assistant Chief of Staff for Installation Management (OACSIM) submitted a proposal for the fiscal year (FY) 13 unified legislative and budgetary (ULB) cycle to change the definition of "dependent" in the TC statute.
2. In Nov 11, issue recommendation became an omnibus 2013 proposal and was sent to Office of Management and Budget (OMB) for review and interagency coordination.
3. In Mar 12, issue was approved by OMB and was submitted to congress for final approval in the FY13 National Defense Authorization Act (NDAA).
4. In Jan 13, the FY13 NDAA was approved.
5. In Feb 15, DoD provided a "policy instrument" updating the definition of dependent to include unborn children.

Estimated cost: TC payments are specified by the dependency and indemnity compensation rates. Approximately six Army Families a year would be impacted at an estimated cost of less than \$4,000/case/year.

Justification: The Secretary of the Army signed an Army-wide memo on 28 Aug 15 authorizing TC benefits for unborn children. The memo has been distributed Army-wide and implementation is underway.

Issue 650: Exceptional Family Member Program (EFMP) Enrollment Eligibility for Reserve Component (RC) Soldiers

Proponent: ACSIM

Issue recommendation: Authorize RC Soldiers enrollment in the EFMP.

Final issue status: Active

Accomplishments:

1. Established Oct 10 EFMP policy working group.
2. Included authorization for voluntary RC enrollment in revised Army regulation (AR) 608-75, EFMP.
3. AR 608-75 submitted to Army Publishing Directorate (APD) for initial review.
4. Finalized corrective actions from initial APD review.
5. Finalized active component and RC policy language to ensure synchronization between policies and operational procedures regarding policy changes.

6. Regulation resubmitted to APD May 2014.
7. On 10 Sep 15 the Office of the Judge Advocate General (OTJAG) and Office of the General Counsel (OGC) provided a legal opinion on the memorandum from OACSIM to the Office of the Secretary of Defense (OSD) requesting authorization for respite care.
8. OTJAG provided legal review of AR 608-75 on 29 Sep 14. OTJAG stated Army does not have the fiscal authority to provide exceptional Family member (EFM) respite care.

Estimated cost: Army is currently the bill payer for active guard reserve (AGR) Soldiers accessing EFMP respite care. Army National Guard (ARNG) would be the bill payer for mobilized ARNG Soldiers. Projected cost is based on Army-provided model at three percent of projected EFM enrollment. Army would continue to pay for non-mobilized AGR population. The ARNG and the United States Army Reserve (USAR) would pay for EFMP respite care for mobilized Soldiers. If three percent of eligible EFMP use respite care, ARNG's annual cost would be ~\$259,000 and USAR's annual cost will be ~\$274,000.

Issue discussion: The VCSA expressed concern whether the RC has allocated money in their budget to fund the EFMP requirement. The ARNG and USAR representatives both validated they will fund the requirement pending OSD decision for respite care authority to use operations and maintenance funding. The Deputy Assistant Secretary of Defense for Military Community and Family Policy (DASD MC&FP) cautioned the RC that personnel requirements and training requirements partner with implementing a program.

Way ahead:

1. Resubmission of AR 608-75 to APD dependent on OSD response to authorize respite care.
2. Remove authorization for voluntary RC enrollment in AR 608-75 if OSD does not approve operations and maintenance dollars since voluntary enrollment for RC Soldiers without the EFMP respite care benefit provides no benefit to the RC Soldier unless the RC Soldier is Title 10 or Title 32.
3. Publish AR 608-75.
4. Present new financial requirement in RC program objective memorandum (POM) requests. RC EFMP respite care would be an unfinanced requirement until included in the POM.

Issue 688: Resilience Training for Army Teens

Proponent: Deputy Chief of Staff, G-1

Issue recommendation: Implement resilience training for Army teens.

Final issue status: Complete

Accomplishments:

1. Secretary of the Army Directive dated 26 Mar 13 provided direction to increase Army Family resilience. Comprehensive Soldier and Family Fitness (CSF2) adapted existing adult resilience training for teens.
2. CSF2 Teen Curriculum (CSF2-TC) conducted a pilot with 730 students during the 2013-2014 school year in coordination with Walter Reed Army Institute of Research (WRAIR) to complete a program evaluation.

3. The 2014-2015 school year focused on delivery at four installations and nineteen National Guard states trained 3,600 Army teens.

4. In accordance with Army Directive 2014-23, Conduct of Screening & Background Checks, instructors must have background checks above and beyond security clearances, prior to curriculum delivery.

Estimated cost: \$21.91 per student for 2014-2015 school year pilots with economies of scale in the out years.

VCSA direction: The VCSA directed AFAP GOSC member commands to expose their commanders and leaders to Army teen resiliency training availability.

Justification:

1. WRAIR completed final data collection to support the CSF2-TC pilot program evaluation and reported significant results in reductions in depression and anxiety for females, and increases in positive to negative coping strategies and problem solving for males.

2. Teen resilience curriculum is available Army wide for 2015-2016 school year.

Issue 690: Army and Local Community Support for RC, Geographically Dispersed (GD), and Transitioning Soldiers and Families

Proponent: ACSIM

Issue recommendation: Establish a process to connect RC, GD, and transitioning Soldiers and Families to local community support.

Final issue status: Active

Accomplishments:

1. Convened working group to formulate the concept of leveraging existing Soldier and Family information and referral capabilities such as ARNG Family Assistance Centers (FACs) and USAR Army Strong Centers as a resource to connect community support to RC, GD, and transitioning Soldiers and Families.

2. Socialized the concept with ARNG and USAR leaders.

3. Coordinated, vetted, and approved the concept with the Ready and Resilient Council of Colonels and GOSC.

4. Visited a local FAC with ARNG and USAR leaders to discuss concept and assess local impact.

Estimated cost: To be determined.

VCSA direction: The VCSA directed a common operating system where a Soldier can look at a map and know what resources are available.

Way Ahead:

1. Reconvene working group to explore policy and resource implications of leveraging existing information and referral capabilities to connect community support to RC, GD, and transitioning Soldiers and Families.

2. Complete a cost benefit analysis, potential cost sharing models, and develop courses of action (COA).

3. Brief COAs to stakeholder leaders.

4. Incorporate policy changes in AR 608-1, Army Community Service (ACS).

Issue 691: RC Soldiers and Families Access to ACS Services

Proponent: ACSIM

Issue recommendation: Eliminate the one year post mobilization restriction for RC Soldiers and Families to access ACS services.

Final issue status: Active

Accomplishments:

1. OACSIM, Installation Management Command (IMCOM), USAR, and ARNG working group established in the fourth quarter of FY14.
2. An OTJAG opinion in the fourth quarter of FY14 stated there is “no legal objection” to RC Soldiers and Families having access to ACS services.
3. Initial analysis of population to be served was conducted in first quarter FY15.

Estimated cost: To be determined.

Issue discussion: The ACSIM stressed the importance of capturing workload and requirements to prevent compromising resources. The DASD MC&FP stressed ARNG and USAR Soldiers and Families are eligible for Military One Source (MOS) regardless of activation status. MOS provides resources and twelve no cost non-medical counseling visits per person per issue. DoD OGC gave OSD permission to engage in paid digital strategies since eighty-five percent of the DoD community is online. The G-6 representative expressed concern for how Army recruiters and their Families receive services. The Installation Services Director said the concern is addressed in Issue 690 which targets the GD.

VCSA direction: The VCSA directed ACSIM to examine systems being employed to capture how ACS resources are used and how the Army will program for the resources in the future. If the Army offers the resource to the RC, the Army must fund it.

Way Ahead:

1. Analyze whether the projected increase to ACS utilization by RC members will require additional ACS staffing and funding.
2. Present analysis to leadership for decision on policy changes.
3. Submit policy changes to next revision of AR 608-1.

Soldier Support and Entitlements Issues

Issue 596: Convicted Sex Offender Registry

Proponent: Deputy Chief of Staff, G-1

Issue recommendations: Establish a searchable sex offender registry and make it available to the military community. Require all convicted sex offenders who are authorized a DoD identification card to register with the installation Provost Marshal Office (PMO) and be entered into the registry.

Final issue status: Active

Accomplishments:

1. OGC and OTJAG do not support the recommendations.
2. DoD Directive-Type Memorandum 15-003, Registered Sex Offender (RSO) Identification, Notification, and Monitoring, uses National Crime Information Center (NCIC) information to identify RSO Service members, dependents, federal employees, and contractors.
3. AR 614-30, Overseas Service, prohibits RSO dependents from overseas tours.

4. Army Directive 2013-21, Initiating Separation Proceedings and Prohibiting Overseas Assignments for Soldiers Convicted of Sex Offenses, bars overseas assignments for RSO Soldiers.
5. Secretary of the Army Directive 2013-06, Providing Specified Law Enforcement Information to Commanders of Newly Assigned Soldiers, authorizes access to a Soldier's criminal history and sex offender registry requirements.
6. Human Resources Command tracks Soldier RSOs by coding them with an eligibility limiting code of L8.

Estimated cost: To be determined.

Way ahead:

1. Publish AR 190-45, Law Enforcement Reporting.
2. PMO maintains a list of all RSOs living, working, and visiting installations as determined via the NCIC and Defense Enrollment Eligibility Reporting System "interface."

Issue 669: Return to Active Duty Medical Retention Processing 2 (MRP2) Time Restrictions for RC Soldiers

Proponent: Deputy Chief of Staff, G-1

Issue recommendation: Extend the RC Soldier MRP2 time restriction from six months to five years of release from active duty date.

Final issue status: Complete

Accomplishments:

1. Deputy Chief of Staff, G-1, Director of Military Personnel Management, is not pursuing a change to the six month restriction, but is authorizing a waiver request on a case by case basis.
2. Commanders must submit justification in writing as a waiver to request MRP2 for medical care until the publication of AR 600-XX.
3. Informal staffing of the continuum of care process was completed Jul 11.
4. Formal staffing for continuum of care process was completed in Feb 12.
5. AR 600-XX will include continuum of care processing.
6. All Army activities (ALARACT) 089/2015, Return to Active Duty MRP2 Time Restrictions for RC Soldiers, was published, 9 Jun 15.

Estimated cost: No cost to the Army to implement.

Issue discussion: The ARNG concurred that the waiver process works.

Justification: Waiver requests are handled in accordance with the ALARACT until the publication of the AR. AR 600-XX will be published by second quarter FY16. Eight waiver requests have been submitted and approved since the ALARACT was published.

Issue 684: Survivor Investment of Military Death Gratuity and Service Members' Group Life Insurance (SGLI)

Proponent: Deputy Chief of Staff, G-1

Issue recommendation: Extend the time period for Survivors to invest Military Death Gratuity and SGLI funds in a Roth Individual Retirement Account (IRA) or Coverdell Education Savings Account (ESA) from twelve months to thirty-six months.

Final issue status: Unattainable

Accomplishments:

1. On 24 May 12, Senator Richard Blumenthal introduced a bill to amend the Internal Revenue Code of 1986 to extend the time period from one to three years for contributing Military Death Gratuity and SGLI in Roth IRA and/or Coverdell ESA.
2. On 28 Oct 13, Office of the Chief Legislative Liaison (OCLL) confirmed through Senator Blumenthal's office that the issue has tax implications and cannot be introduced to the House Ways and Means Committee until the Way and Means Committee lifts a moratorium on introducing all tax related legislation.
3. On 1 May 14, OCLL notified G-1 that Representative Aaron Shock introduced a bill that would resolve the issue. The legislation was referred to the House Ways and Means Committee.
4. Proposed legislation was not adopted during the 113th Congress.

Estimated cost: Unknown

Issue discussion: The DASD MC&FP stated the sister services do not support the issue and urged survivor financial counseling as a mitigating strategy.

VCSA direction: The VCSA declared the issue unattainable. The VCSA urged AFAP GOSC members to build advocacy for the issue with Congress and the sister services until the issue can be reentered into AFAP in 2018.

Justification:

1. Congress did not pass multiple proposed legislative proposals.
2. The Office of the Surgeon General (OTSG) was unable to locate the two grief studies cited in the issue.
3. At the OSD Compensation Chief's meeting, the Army did not garner support from the sister services for the issue.
4. The Assistant Secretary of the Army for Manpower and Reserve Affairs (ASA M&RA) reviewed the issue and concurs with G-1 that the issue lacks Congressional and sister service support.

Issue 609: Total Army Sponsorship Program (TASP)

Proponent: IMCOM

Issue recommendations: Standardize and enforce the Army TASP through the Command Inspection Program (CIP). Add TASP to the CIP checklist in AR 600-8-8 Appendix B.

Final issue status: Active

Accomplishments:

1. Completed the design and development phase of Army Career Tracker (ACT) Sponsorship and the Government Acceptance Test.
2. Developed training materials to support new Sponsorship procedures using the ACT system.
3. Executed the ACT Sponsorship Pilot to refine new sponsorship procedures and requirements using an automated system.
4. Incorporated Sponsorship Training into the Army Learning Management System.
5. Enabled ACT Sponsorship module access via privately owned smart devices (i.e. iPhones, iPads, notebooks, etc).

6. Sponsorship linked directly to CIP; monthly Sponsorship reports to be validated by Commander per DA EXORD 161-15. Report will now be an inspectable item for Organizational Inspection Program (OIP).

Estimated cost: \$169,000

Issue discussion: The Forces Command (FORSCOM) Command Sergeant Major (CSM) expressed concerns with the process. The FORSCOM CSM stated ACT is driving TASP policy rather than TASP policy dictating ACT functions. The VCSA stated sponsorship has been broken throughout his career but the Army should leverage technology to facilitate the sponsorship process.

VCSA direction: The VCSA tasked G-1 to take the lead on re-shaping the process, and requested FORSCOM and Training and Doctrine Command clearly articulate what TASP policy should include and align ACT to meet the TASP policy. Additionally, the VCSA directed AFAP GOSC members to make TASP a leadership priority. The VCSA directed ACSIM to accelerate the TASP regulation publication. The Installation Services Director stated a draft regulation would be available in FY16. The Director of the Army Staff (DAS) agreed to accelerate the APD process.

Way ahead:

1. Revise AR 600-8-8 to standardize sponsorship procedures and enforce TASP through CIP using the ACT system.
2. Draft DA Pamphlet 600-8-8 to provide guidance and operating instructions.
3. Total Army ACT sponsorship phased implementation.
4. Continue to educate the Army on ACT sponsorship functionalities.
5. Continue to synchronize efforts to enhance TASP with key stakeholders.
6. Update OIP Checklist with ACT sponsorship functionalities in AR 600-8-8.

Medical and Behavioral Health Issues

Issue 614: Comprehensive Behavioral Health (BH) Program for Children

Proponent: The Surgeon General

Issue recommendations: Provide unified, comprehensive, timely children's BH services with dedicated providers. Increase, integrate and streamline existing counseling services to provide comprehensive BH services for children of all Soldiers.

Final issue status: Active

Accomplishments:

1. Operation order 14-44 in Mar 14 implemented the Child and Family Behavioral Health System (CAFBHS) enterprise-wide.
2. CAFBHS 2-1/2 day Primary Care Manager (PCM) and BH Lead Training has been completed for all five Regional Medical Commands (RMCs).
3. Tasker published mandating that 75% of PCMs be CAFBHS trained by end of calendar year 2015.
4. Approximately 65% of the CAFBHS provider positions are filled and productivity increased 18% for Family members.
5. Public Health Command studying implementation at Joint Base Lewis-McCord, Fort Hood, and Fort Bragg.
6. CAFBHS Regional Prototype (P-CAFBHS) sites have been identified for implementation with RMCs.

7. School Behavioral Health is operational in 46 schools on eight installations with planned expansion to one hundred seven schools and an additional ten installations.

Estimated cost: \$58,000,000 after implementation is completed in FY17.

Issue discussion: The OTSG representative stated issue closure is contingent on hiring BH providers. OTSG has only been able to hire sixty five percent of the required staff due to a nationwide shortage of BH providers. The DASD MC&FP offered support through Military Family Life Consultants (MFLCs), particularly the specialists in child and youth behavioral areas. The FORSCOM representative requested remote locations such as Fort Irwin and Fort Polk receive implementation priority. The FORSCOM CSM urged increased recruiting of community partners near Army's installations.

VCSA direction: The VCSA directed OTSG to provide a follow up on BH provider hiring gaps to analyze how the Army can be more competitive in recruiting BH providers.

Way ahead:

1. Phased CAFBHS Implementation.
2. Prioritize hiring of CAFBHS staff.
3. Establish Regional P-CAFBHS sites.
4. Train PCMs and BH providers on CAFBHS model, screening, early identification, and treatment of common BH disorder in military children and adolescents.
5. Establish regional teleconsultation centers to support PCM providers.
6. Continue expansion of Community Outreach to support Army Families.

Issue 641: Over Medication Prevention & Alternative Treatment for Military Healthcare System (MHS) Beneficiaries

Proponent: The Surgeon General

Issue recommendation: Authorize and implement a comprehensive strategy to optimize function and manage pain including but not limited to alternative therapy and patient/provider education for all MHS beneficiaries.

Final issue status: Active

Accomplishments:

1. The FY10 NDAA directed DoD to develop a comprehensive pain management strategy.
2. The Comprehensive Pain Management Campaign Plan directed implementation of the Pain Management Task Force with recommendations for holistic, multidisciplinary, and multimodal pain management.
3. U.S. Army Medical Command (MEDCOM) efforts lead DoD Health Executive Council Pain Working Group and ongoing Tri-Service/Veterans Affairs pain initiatives. Tri-Service Charter signed May 14.
4. MEDCOM established an Interdisciplinary Pain Management Center (IPMC) network and tiered pain management teams to include Pain Champions in Medical Homes.
5. MEDCOM established Pain Management tele-mentoring hubs in all RMC.
6. MEDCOM working with Drug Enforcement Administration for access to state prescription registry databases to facilitate over medication prevention.

Estimated cost: \$32,000,000 annually for the Army. Defense Health Program wedge for pain inserted in the FY16-20 POM. MEDCOM funds remaining pain requirements beyond Defense Health Agency (DHA) allocation.

Issue discussion: The DHA representative applauded the Army's work as ground breaking not just in DoD but also in the civilian sector.

VCSA direction: The VCSA directed OTSG to clearly state the metric that will be used to determine successful completion and close the issue.

Way ahead:

1. Continue IPMC specialty clinics. IPMCs are MEDCOM's highest tier of pain management clinics with standardized personnel, equipment, and services offered at select sites.
2. Track Measurements of Effectiveness for at risk polypharmacy Soldiers to ensure communication between Military Treatment Facilities and commanders.

Issue 665: Formal Standardized Training for Designated Caregivers of Wounded Warriors

Proponent: The Surgeon General

Issue recommendation: Implement formal standardized, face-to-face training for designated Wounded Warrior caregivers on self-care, stress reduction, burnout and prevention of abuse/neglect.

Final issue status: Complete

Accomplishments:

1. Army Medical Department Center and School (AMEDDC&S) trained nurse case managers (NCMs) on the Veterans Affairs' Easter Seals' caregiver handbook. Training has been provided to approximately five hundred NCMs.
2. Warrior Transition Command (WTC) developed a care for the caregiver training program that replaced the AMEDDC&S caregiver program.
3. WTC implemented a care for the caregiver tracking tool in the Medical Operational Data System to track the number of Families trained.
4. Survey of participants found high satisfaction with training program.
5. WTC participated in peer to peer support. The initiative uses MFLCs located on installations across DoD to conduct peer-to-peer support forums.

Estimated cost: Program funded through existing resources.

Issue discussion: The DAS expressed concern regarding how an increase in cases would be handled. The OTSG representative stated the train the trainer nurse case managers make service scalable.

VCSA direction: The VCSA directed OTSG to validate how caregiver training effectiveness will be assessed in the future.

Justification: In order to determine the effectiveness of this training, the WTC conducts caregiver satisfaction surveys. Caregiver feedback is that they are satisfied with the support.

Issue 692: RC Soldiers BH Treatment Regardless of Duty or Veteran Status

Proponent: ARNG

Issue recommendation: Provide BH treatment to uninsured or underinsured RC Soldiers regardless of duty and veteran status.

Final issue status: Active

Accomplishments:

1. In order to provide BH treatment to uninsured or underinsured RC Soldiers regardless of duty and veteran status the ARNG determined that a ULB proposal is required.
2. The ULB proposal requests legislation to authorize vouchers to pay existing BH care providers in the Soldiers' or veterans' communities.
3. The vouchers would be funded by operations and maintenance (O&M) funds. Use of O&M funds will negate inclusion of DHA in issue resolution.
4. The ARNG, USAR, OSD, and OTSG are working on the cost benefit analysis portion of the ULB proposal.
5. The ULB is targeted for FY18 submission cycle.

Estimated cost: \$6,100,000

Issue discussion: The VCSA queried if ARNG needed assistance with the cost benefit analysis required for the legislative proposal. ARNG stated no assistance was needed. The OCLL representative reminded members that sister service support is necessary for the legislative proposal. The DASD MC&FP offered MFLC service as a bridge until legislation is passed. The ASA M&RA Congressional Affairs Contact Officer (CACO) stated that the sister services do not support the proposal and recommended a BH voucher pilot to build support for the initiative. In the interim, the ASA M&RA CACO will attend separate working group meetings with the sister services who have new BH delivery systems in place. The DHA representative requested inclusion in the issue resolution process to evaluate how DHA could interface. VCSA expressed concern that the ARNG stated the issue evolved because DHA could not meet the need. DHA countered that DHA is lifting and shifting managed care support contracts to cover issues where service is required.

VCSA direction: The VCSA directed the ARNG to share the potential BH voucher pilot with the sister services to build support. The VCSA also directed the ARNG to develop mitigating strategies to resolve BH treatment until the legislative proposal can move forward.

Way ahead: Submit the cost benefit analysis and ULB proposal to OCLL.

Civilian Personnel Issues

Issue 679: Creditable Civil Service Career Tenure Requirements for Federally Employed Spouses of Service Members and Federal Employees

Proponent: Deputy Chief of Staff, G-1

Issue recommendation: Increase the thirty day creditable civil service career tenure requirement break for all federally employed spouses of service members and Federal employees to one hundred eighty days after resignation in conjunction with the relocation of their military or Federal sponsor.

Final issue status: Active

Accomplishments:

1. Deputy Assistant Director at Office of Personnel Management (OPM) agreed at a minimum to increase the time limit for the break to one hundred eighty days. OPM is now investigating whether career conditional status should even exist.

2. Once final determination is made on the continuation of career conditional status, or merely extend the time limit on the break in career conditional status to one hundred eighty days, then the appropriate public notice will be posted in the Federal Register, followed by changes to the Code of Federal Regulations.

3. Draft regulatory change options working through OPM channels and the Office of Management and Budget.

Estimated cost: No cost to implement.

Issue discussion: The DASD MC&FP asked if legislation could resolve the issue. The G-1 representative stated the issue could only be resolved by OPM. G-1 reiterated that an organization can offer one hundred eighty days of leave without pay as a bridging strategy and hire behind the employee. The FORSCOM CSM concurred this is a problem that was brought up at the September 2015 Fort Benning Congressional Military Family Caucus Summit. The FORSCOM CSM offered that Soldiers are provided more than thirty days to relocate before reporting to their new duty. Soldiers receive fourteen days to clear their current duty station, travel days to the new duty station, and the option of thirty days leave in route. OPM's thirty day policy could be a contributor to the increasing number of geographical bachelor Soldiers. The DASD MC&FP offered to engage the White House on issue resolution and assist the Army with an interim solution.

VCSA direction: The VCSA directed G-1 to provide an OPM contact the VCSA could speak with to adjudicate the issue.

Way ahead:

1. OPM will publish recommendations and changes in the Federal Register for comment before final adoption.
2. Changes will be published in the Federal Register by second quarter FY16.

Issue 689: Sexual Assault Restricted Reporting Option for Department of Army Civilians (DACs)

Proponent: Deputy Chief of Staff, G-1

Issue recommendation: Authorize restricted reporting of sexual assault for DACs.

Final issue status: Active

Accomplishments:

1. The DoD and Army approved a one year pilot test in U.S. Army Europe in Sep 09 allowing DACs to file restricted reports of sexual assault.
2. DoD OGC opined that restricted reporting creates a government liability that violates Title VII of the Civil Rights Act and Equal Employment Opportunity laws.
3. DoD Instruction 6495.02, Sexual Assault Prevention and Response (SAPR) Program Procedures, states that civilian employees are eligible only to bring unrestricted reports.
4. Sexual Harassment and Assault Response Program working with stakeholders to collect and analyze funding, manpower, policy, and procedural impacts for a legislative proposal.
5. DoD SAPR approved the Air Force's exception to policy to authorize civilians Sexual Assault Response Coordinator services.

Estimated cost: \$25,000 annually to provide DACs with emergency sexual assault services at \$500 per person.

VCSA direction: The VCSA directed G-1 to contact the Air Force so the Army can duplicate their civilian exception to policy.

Way ahead: Coordinate this action for legislative submission to allow DACs restricted reporting.

Ms. Christina Vine
DAIM-ISS/ (571)256-8696
christina.m.vine.civ@mail.mil