



**DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY MEDICAL COMMAND
2748 WORTH ROAD
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OTSG/MEDCOM Policy Memo 20-068

MCHR-FP

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MEMORANDUM FOR

**Commanders, MEDCOM Major Subordinate Commands
Deputy Chiefs of Staff, OTSG/MEDCOM OneStaff
Directors, OTSG/MEDCOM OneStaff**

SUBJECT: MEDCOM Family Readiness Program Policy

1. References:

- a. Title 10, U.S.C., Section 1588, Authority to Accept Certain Voluntary Services.
- b. DoDI 1342.22, Military Family Readiness, 3 Jul 12, Incorporating Change 2, 11 Apr 17.
- c. AR 600-20, Army Command Policy, 24 Jul 20.
- d. Department of the Army Concept Plan for the Army-wide Implementation of the Family Readiness Support Assistants (FRSAs), 27 Jun 07.
- e. Office of the Chief of Public Affairs (OCPA), The United States Army Social Media Handbook, 02 Apr 16.
- f. AR 40-58, Army Recovery Care Program, 12 Jun 20.
- g. Memorandum, Secretary of the Army and Chief of Staff, 1 Apr 13, subject: Extending Benefits to Same Sex Spouses of Soldiers.
- h. DoDI 1100.21, Voluntary Services in the Department of Defense, 27 Mar 19.
- i. HQDA EXORD 233-19, Army-Wide Implementation of the Soldier and Family Readiness Group (SFRG), 1 Apr 19.
- j. Memorandum, OTSG/MEDCOM Policy 19-041, MCHR-FP, 04 Sep 19, subject: Contact with Families of Deployed Soldiers and Civilians.
- k. Memorandum, Official Communication in Support of the Total Army Family Program Policy, 04 Sep 19.

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- i. AR 600-8-101, Personnel Readiness Processing, 06 Mar 18.
 - m. DoDI 5500.07-R, Joint Ethics Regulation, 30 Aug 93, Incorporating Change 7, 17 Nov 11.
 - n. AR 11-7, Internal Review Program, 29 Mar 17.
 - o. AR 1-100, The Army Gift Program, 7 Feb 19.
 - p. AR 600-29, Fund Raising Within the Department of the Army, 7 Jun 10.
 - q. AR 608-1, Army Community Service, 19 Oct 17.
 - r. AR 608-1, Appendix K, Army Family Action Plan, 19 Oct 17.
 - s. AR 600-77, Administrative Management of Wounded, Ill, or Injured Soldiers, 5 Mar 19.
 - t. Memorandum, OTSG/MEDCOM Policy 18-066, Social Media Policy, 25 Oct 18.
2. Purpose: Prescribes Commander Policy, responsibility, authority, and procedures for establishing and operating their Family Readiness Program.
3. Proponent: The proponent for this policy is the Chief, Family Programs, Human Resources Directorate/G-1, G-1/4/6.
4. Background: The Army places significant value on both military and personal preparedness. The Secretary of the Army states: "I intend to ensure Soldiers and their Families have the resources to thrive. This includes quality and safe housing, reliable health care and access to childcare. Taking care of the force leads to a better quality of life, retention of world-class Soldiers and ultimately improved Readiness." The Chief of Staff of the Army states: "People are always my #1 priority. Our Army's people are our greatest strength and our most important weapon system. Our people are our Soldiers, Family Members, Department of the Army Civilians, and Soldiers for Life." The Sergeant Major of the Army states: "People First, that includes Families. After nearly two decades of sustained combat operations, our generation of leaders has learned firsthand that Families are directly tied to readiness. Training and deploying in the COVID-19 operational environment has required sacrifice from everyone who makes the Army possible, to include our Family Members."
5. Applicability: This policy applies to all MEDCOM units.
6. Policy: This policy prescribes commander responsibilities for the execution of their Family Readiness Program. The Family Readiness Program consists of Soldiers (Active Component, Army National Guard and United States Army Reserve), Department of the

Army Civilians, Retirees, (regardless of their marital status) and their legal Family Members. The Family Readiness Program creates predictable programs and services through a service delivery system and network that best meets the need of the command's footprint, regardless of location. This policy outlines diverse options for accessing a network of integrated services to help the total force be prepared to effectively navigate the challenges of daily living experienced in the unique context of military service. It is an inspectable program area at all command levels. The command Organizational Inspection Program (OIP) process takes place biennially (Army Recovery Care Program inspections take place annually) and confirms regulatory/policy compliance on program areas including but not limited to: document security, non-medical support, solicitation and response to Family readiness issues, social media venues and content, and reporting requirements.

a. Service Members who are concerned about their Families' well-being and support while away from home are unable to focus 100% on their mission which may lead to accidents, injuries and possible deaths. Our goal is a combat-ready force supported by Families whose quality of life reflects the high standards and pride of the Nation they defend. We achieved that goal by working in partnership with DOD personnel and their Families, recognizing their role in the readiness of the Total Force. The support they receive and the success of the global mission are directly related.

b. Commanders, at all levels, are responsible for developing a delivery system that maximizes the network of agencies, programs, services, and individuals in a collaborative manner to promote military Family readiness. This includes incorporating Family readiness into organizational goals related to the recruitment, retention, morale, and operational readiness of the military force. Additionally, commanders will ensure the inclusion of those deployed and/or geographically dispersed.

7. Calendar Year (CY) Reporting Requirements:

**a. Commanders, at all levels, are responsible for the completion of the quarterly Family Readiness Program report. The quarterly report submission is required on the third Friday in January, April, July and October. The Family Readiness Program report is located within the Family Programs SharePoint Site at:
<https://mitc.amedd.army.mil/sites/G1/fampro/SitePages/Total%20Army%20Family%20Programs%20Report.aspx>.**

b. The MEDCOM Family Programs Division may adjust content and frequency of the reports as appropriate. If a commander assigns a representative or designee to complete this reporting requirement, the commander still approves documentation and data prior to submission.

c. The MEDCOM Chief, Family Programs, provides a quarterly Family Readiness Program report to MEDCOM Leadership the last working day of January, April, July and October. This report will assist leadership in tracking compliance, challenges and best practices within the Family Readiness Program.

8. MEDCOM Chief, Family Programs Responsibilities:

a. Serves as the Commanding General's Family Readiness Program Subject Matter Expert (SME) to facilitate full implementation and issue resolution of the Family Readiness Program in coordination with Commanders and G-1s/Chiefs of Human Resources.

b. Provides command-specific Family Readiness policy, guidance, training and awareness to all MEDCOM commanders and their supporting staff.

c. Provides Senior Leader Spouse trainings, video-teleconferences, face-to-face conferences, tele-conferences, focus groups and other Family readiness events directed by The Surgeon General and Commanding General, USAMEDCOM.

d. The MEDCOM Chief, Family Programs, is the Family Readiness SME on regulatory/policy compliance throughout the OIP process. The Chief executes the Regional Health Command (RHC) Family Readiness OIP and provides Major Subordinate Command inspector guidance on programming compliance. Commanders will utilize the Family Readiness OIP checklist provided by the HQ MEDCOM Family Programs Division located on the OIP Homepage SharePoint Link: https://mitc.amedd.army.mil/sites/G357/RTE_DIV/SitePages/MEDCOM%20OIP%20HOME%20PAGE.aspx.

9. Commander and Leader Responsibilities:

a. Commanders will ensure that an effective program delivery system for the total force is in place. Commanders will identify and input fiscal and personnel resource requirements for the Family Readiness Program as part of the command operating budget process. These requirements include but are not limited to supplies, equipment and training. Commanders have the flexibility to tailor their program to meet documented needs and to support local demographics and conditions. This provides commanders the opportunity to exclusively design their programs and establish a delivery system through a variety of venues and platforms.

b. Commanders may support their Family Readiness Program administratively by hiring a Family Readiness Support Assistant (FRSA), GS-0303-06. Hiring an FRSA is highly encouraged to provide program continuity. Commanders will base their decision to hire an FRSA on the availability of operational funds, mission requirements and Families' needs. Commanders who hire or retain an FRSA will utilize the Army standardized Family Readiness Support Assistant Position Description (PD) # EMMC356774 in Annex A. Commanders with FRSA staff understand the FRSA will not perform duties outside of the standardized PD or in conflict with AR 608-1 FRSA guidance.

c. RHC Commanders are authorized and encouraged to utilize their Defense Health Program Defense Health Program funding to obtain a Family Program Specialist,

GS-0301-09 within the Commander's ability to manage Civilians to budget. The Family Readiness Specialist performs advanced duties such as conducting briefings and trainings, OIP inspections and providing Senior Leader Spouse support. Commanders who hire a Family Programs Specialist will utilize the MEDCOM standardized Family Programs Specialist PD FRMC383982 in Annex B.

d. Commanders are responsible for developing a Standard Operating Procedure (SOP) that will include up-to-date alert rosters, reporting requirements and Soldier Family Readiness Group (SFRG) processes and communication procedures. The SOP may include additional information such as outlines of communication networks (including social media), frequency of communication, and control measures for informal funds, audit and fundraising approval procedures.

e. Commanders will continue to encourage use of social media and approve content posted on all media sites. Commanders may delegate the Command Family Readiness Representative to oversee the SFRG social media sites.

f. Senior Leader Spouses may participate in Family Readiness as much or as little as they deem appropriate. They may participate in an advisory role for the SFRG mission and be the guest speaker at events. They may participate in the Army Family Action Plan process, attend Family readiness teleconferences and VTCs and assist in developing products such as a monthly newsletters or spouse guides. Senior Leader Spouses may participate in the exchange of programming ideas, suggestions, concerns on regulation revisions and initiatives as members of Army Executive Working Groups. Senior Leader Spouses assist commanders in sharing mission, vision, leadership priorities and valuable information to other spouses, Family Members and SFRG members. The HQ MEDCOM provides Senior Leader Spouses a biannual virtual training that covers topics such as MEDCOM Overview, OPSEC, PAO, Military OneSource, Resources, and a 30-60-90 Plan for Success session. Senior Leader Spouses can positively influence others and play an important role in developing a cohesive team.

10. SFRG Structure:

a. The SFRG is a unit Commander's program formed in accordance with (IAW) AR 600-20 and AR 608-1. The SFRG is a command sponsored organization. Its members include assigned Soldiers (married and single), DA Civilians, volunteers and their Families (immediate and extended, wherever they may be located). The SFRG is a force multiplier by connecting Soldiers with the command team and providing a network of mutual support. The inclusion of these individuals is automatic but participation is voluntary. The well-being of today's force is paramount to the success of any mission; therefore, there is an inextricable link between SFRGs and Soldier readiness. Commanders are required to sustain their SFRG year-round. Commanders will consider SFRG requirements when planning their yearly budget. The SFRG budget needs vary widely and are highly dependent on the location of the supported unit, unit mission, unit deployment requirements, and composition of the SFRG.

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b. Commanders, at all echelons, are responsible for and required by regulation to shift the SFRG's main focus away from social activities and fundraising to a high-functioning command information structure that communicates, informs, and connects unit personnel, their Family Members, volunteers, and single Soldiers to a network of on-post and vetted off-post resources.

c. Commanders SFRG Chain of Command is responsible for the execution of the SFRG and will consist, at a minimum, of Unit Commanders, Rear Detachment Commanders or equivalent, Fund Custodians (Primary and Alternate) and a Command Family Readiness Representative (formally known as Family Readiness Liaisons and/or Family Readiness Officers. Commanders will appoint, in writing, the Fund Custodians and a Command Family Readiness Representative.

d. The Command Family Readiness Representative may be a Rear Detachment Commander or equivalent or a non-commissioned officer in the grade of Sergeant and above with 12-18 months unit retainability. Appointment order templates are provided in Annex C. Baseline responsibilities include: assisting commanders with SFRG rosters, establishing and executing the communication plan/strategies IAW commander's objectives, keeping commander abreast of known Soldier and Family issues, establishing chain of command/chain of concern for SFRG members, supporting Better Opportunities for Single Soldiers. Commanders may assign additional responsibilities as needed. Duties will be capable functions in conjunction with the Soldier's normal Military Occupational Specialty and key responsibilities. Commanders may have more than one Command Family Readiness Representative if needed to ensure mission success.

e. The primary and alternate fund custodians may be a Soldier but may not be the unit commander, First Sergeant, contractor, a volunteer or the Command Family Readiness Representative(s).

f. The SFRG is a commander's program; therefore, the commander is responsible and identified as the SFRG Leader, removing the previous Volunteer Leader position. Commanders will continue to recruit volunteers as needed to support the SFRG mission IAW AR 608-1; however, volunteers will not hold leader-type positions.

g. The SFRG element of Family readiness is no longer an inspectable area within the OIP process; however, commanders may request a review of their SFRG program at any time to confirm EXORD 233-19 and future regulatory/policy guidance compliance. Documented as a Staff Assistance Visit, inspectors will provide commanders an EXSUM of their review for their files and may assist commanders with follow-up reviews and get-well plans as requested.

11. Commanders will ensure all individuals within their Family Readiness Program receive and complete training relevant to their roles and responsibilities. Additional training requirements to meet local needs may include pre-job training to learn technical skills and on-the-job training. Additional training and/or resource materials are available

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through a variety of venues including but not limited to the MEDCOM Family Programs Division, local Garrison Army Community Service Centers and online sites such as Military OneSource.

12. The MEDCOM Chief, Family Programs will assist Commanders in establishing and sustaining a viable Family Readiness Program by providing expertise, training and support. Command legal advisors with the Office of the Staff Judge Advocate are available for consultation and advice on program operations.

FOR THE COMMANDER:


RICHARD R. BEAUCHEMIN
Chief of Staff