OPERATION ORDER 18-61 (Implementation and Execution of MEDCOM Career Skills Program (CSP) for Warrior Transition Units (WTUs)) – USAMEDCOM

References:

(a) Department of Defense Instruction (DoDI) 1322.29, Job Training, Employment Skills Training, Apprenticeships, and Internships (JTEST-AI) for Eligible Service Members, 24 Jan 14.

(b) Army Regulation 40-58 (Warrior Care and Transition Program), 23 Mar 15.

(c) Army Regulation 600-81 (Soldier for Life-Transition Assistance Program), 17 May 16.

(d) Department of the Army Office of the Deputy Chief of Staff, G-1 Memorandum For Commanding General, US Army Medical Command, Exception to AR 600-81 for CSP for Wounded, Ill and Injured Soldiers (WII), 26 Jan 18.

(e) WCTP, Soldier Leader Guide, 23 Jul 14.

Time Zone Used Throughout Order: Quebec (Eastern Daylight Time).

Task Organization: Not used.

1. Situation.

   a. Reference (c), Chapter 8 describes the CSP as an element of the Transition Soldier-Life-Cycle which encourages Soldiers to capitalize on training opportunities as they prepare for transition to the civilian workforce. CSPs include opportunities for active duty Soldiers with 180 days or less to separation to participate in non-federal internships, apprenticeships, on-the-job training (OJT), or job shadowing programs with non-federal employers, professional associations, unions, educational providers, and similar organizations. CSPs provide separating Soldiers early access to work or training environments, preparing them for prospective employment before they become Veterans.

   b. Due to the nature of their medical status, wounded, ill and injured (WII) Soldiers assigned to WTUs may not be able to participate in IMCOM managed CSP activities as outlined in reference (c), and may require specific, individualized CSP activities that are more in line with the WTU Soldiers’ abilities and needs, and still allow Soldier to meet medical appointments. Reference (d) grants the Commanding General, US Army Medical
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Command (MEDCOM) the authority to approve and implement CSPs tailored to individual medical needs for Soldiers assigned or attached to WTUs as an Exception to Policy (ETP) to Reference (c), chapter 8. At the discretion of the Commanding General, US Army Medical Command, this ETP approval authority may be further delegated to the Deputy Surgeon General/ Deputy Commanding General (Support).

2. **Mission.** Effective 15 June 2018, USAMEDCOM develops MEDCOM CSP process and implements MEDCOM CSP in order to authorize eligible WTU Soldiers assigned and/or attached to a WTU to participate in MEDCOM approved CSPs.

3. **Execution.**
   
a. **Commander’s Intent.**
      
      (1) Purpose. The primary purpose is to establish the elements required for WTUs to complete a MEDCOM CSP request package, establish the process flow to ensure packets are properly prepared, and to track and report CSP metrics once packets have been approved and WTU Soldiers start their CSP.

      (2) Key tasks.

         (a) The Deputy Chief of Staff, Warrior Care and Transition (DCS, WCT), Career and Education Readiness Division (CERD) will develop and publish appropriate CSP guidance documents to include standardized forms, metrics reporting forms, and a Standardized Operating Procedure (SOP) to be used by Regional Health Command (RHC) and Warrior Transition Battalion (WTB) Staff.

         (b) RHC Commanders, RHC TC PMs, commanders of Military Treatment Facilities (MTF) with associated WTUs, WTB/WTU/CCU Commanders and Transition Coordinators (TCs) will complete initial MEDCOM CSP training no later than (NLT) 15 June 2018.

            i. CSP make-up training for Transition Coordinators (TCs) and TC-PMs will be conducted on 17 May 2018 from 1030-1200 hrs. Method of delivery will be T-CON and Defense Connect Services (DCS).

            ii. WTU and Community Care Unit (CCU) Soldiers will not be authorized to participate in MEDCOM CSPs until this initial or make-up CSP training is completed by at least the BN Commander and the BN TC, and if the BN TC position is vacant, at least one CO TC.

      (3) End State. All WTB/WTU/CCU Commanders, RHC Commanders, RHC-WTO TC PMs, MTF Commanders with associated WTUs, and WTB/WTU/CCU TCs will be
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trained to understand and execute the standardized MEDCOM CSP Program including the approval processes for CSP Memorandums of Understanding (MOUs) in order to support the approval process for a MEDCOM CSP application for any eligible WTU Soldier starting on 15 June 2018.

b. Concept of Operations. DCS-WCT, CERD will develop and coordinate MEDCOM CSP approval and guidance documents, serve as the MEDCOM CSP Program Manager, establish and maintain MEDCOM CSP policy guidance and provide program oversight until the policy is fully incorporated into an Army regulation. CERD will facilitate all MEDCOM CSPs submitted by any WTU after 15 June 2018 and provide monthly CSP metrics data to Human Resources Command, Transition Division (HRC-TD) no later than the last working day of each month, beginning the month of June 2018.

c. Tasks to Subordinate Units.

(1) Army Medical Department Center and School (AMEDDC&S), US Army Health Readiness Center of Excellence (HRCoE): Incorporate key MEDCOM CSP elements and training requirements into the Warrior Transition Unit Staff Training Course NLT 4th quarter FY18.

(2) Regional Health Commands (RHCs-Atlantic, Central, and Pacific):

(a) Establish methodology and internal controls to receive CSP request packets submitted by WTBs through the MTFs to the RHC Commanders for concurrence, forward CSP request packets to DCS-WCT, track progress, and/or return packets (packets non-concurred by RHC or MEDCOM approved/disapproved) to the units.

(b) Ensure CSP request packets are complete and requirements have been met. CSP request packets received from MTF Commanders will be staffed and forwarded to DCS, WCT within five business days or returned to the MTF Commander for correction. RHC TC-PMs will not forward incomplete packets to DSC-WCT.

(c) The RHC TC-PM will monitor and track regional CSP data and metrics as defined in paragraph 3.d.(3)(l) below. This will include manually tracking WTB roll up CSP data until AWCTS data elements have been adequately established. The TC-PM will begin reporting metrics to DCS-WCT, CER on the 15th of each month beginning after the NLT date as determined in paragraph 3.a.(2).(b) above.

(d) RHC TC-PMs will advise and train each MTF Commander with WTU responsibilities (and/or their authorized designee) and their respective RHC Commanders (and/or their authorized designee) regarding their roles and responsibilities to the
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MEDCOM CSP 15 June 2018. RHCs will report MTF Commander training accomplishment to DCS, WCT CERD before 15 June 2018.

(e) All CSP request packets, status reports, and metric reporting data will be sent to the following email folder at usarmy.pentagon.medcom-dcs-wct.mbx.cer-div@mail.mil.

(f) RHC TC-PMs ensure MTF Commanders or their authorized designees will receive specific CSP roles and responsibilities training NLT 15 June 2018.

(g) RHC TC-PMs will process request packets within five (5) business days of receipt or return to the WTB Commander.

(h) RHC TC-PMs will ensure that all new WTB/WTU/CCU Commanders are trained within 45 days of assignment.

(i) RHC TC-PMs will implement MEDCOM CSP NLT 15 June 2018.

(j) RHC TC-PMs will route completed CSP request packets to MEDCOM CG through the DCS, WCT; completed packets will be returned to RHC TC-PMs for dissemination to the units.

(k) RHC TC-PMs will ensure WTU Commanders comply with MEDCOM Career Skills Program SOP.

d. Tasks to OneStaff. DCS, WCT:

(1) Cadre Development and Sustainment Division (CD&SD):

(a) Coordinate with CERD PM to define MEDCOM CSP key training elements and learning objectives.

(b) Coordinate with CERD PM to provide support for initial commander and TC training.

(c) Establish and coordinate Warrior Transition Unit Staff Training Course (Cadre Course) CSP training requirements with AMEDDC&S by end of 4th Quarter FY18.

(2) Infrastructure and Support Division (I&SD):
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(a) Coordinate with DCS, WCT CERD to develop, insert, and organize a monthly AWCTS generated report using existing and/or new CSP tracking elements in the AWCTS WTU data system.

(b) Coordinate with CERD regarding establishing a standardized naming convention for each CSP document uploaded into AWCTS.

(c) Target a development testing completion date (DT&E) by end of 4th Quarter FY18.

(d) Investigate direct system level reporting to US Army Human Resources Command, Transition Division to reduce manual reporting resource intensity.

(3) Career and Education Readiness Division (CERD):

(a) Develop standards and procedures for units to determine MEDCOM CSP eligibility and qualifications if not already established in Reference (b) and (c).

(b) Conduct initial CSP training for all RHC-WTO TC-PMs, WTB/WTU Commanders, and Battalion and Company TCs NLT 15 June 2018.

(c) Conduct MEDCOM CSP make-up training on 17 May 2018 from 1030-1200hrs EST.

(d) Incorporate CSP roles and responsibilities, processes, and other training elements into the next version of the Initial TC Training Course (Phase 1 and Phase 2).

(e) Ensure all new TCs and TC-PMs who Enter On Duty (EOD) on or after 15 June 2018 are trained within 45 days of EOD.

(f) Ensure all new WTB/WTU/CCU Commanders who are assigned on or after 15 June 2018 are trained within 45 days of assignment.

(g) Develop a training packet and provide to Regional Health Command TC-PMs NLT 20 May 2018 in order for TC-PMs to provide training on CSP specific roles and responsibilities to RHC Commanders and those MTF Commanders with responsibilities for WTB/WTU/CCU units. Ensure RHC Commanders and applicable MTF Commanders are advised and trained no later than 15 June 2018.

(h) Develop standardized MEDCOM CSP request packet submission elements, and ensure compliance with reference (c). Procedures will include routing through WTB, MTF and RHC Command to DCS, WCT. DCS, WCT CERD will ensure packets are valid and complete before routing to MEDCOM as per Reference (d). Establish expected
timelines and suspense procedure for each step with recommended response times to serve as guidelines for senior leaders.

(i) Develop a standardized MEDCOM CSP approval request submission packet from DCS, WCT to MEDCOM CG and applicable staff, including internal DCS, WCT coordination and routing on a MEDCOM 540 and the establishment of an internal approval packet tracking mechanism. Establish expected timelines and suspense procedures for each step with recommended response times to serve as guidelines for senior leadership.

(j) Develop an SOP for use by WTB/WTU/CCUs, MTF Commanders, and RHC staff and commanders. Include packet elements, roles and responsibilities, procedures, and forms, including using standard naming conventions for labeling all CSP related documents uploaded into AWCTS.

(k) Provide copies of DCS, WCT approved SOP and all packet materials to WTB/WTU/CCU commanders, TCs, and RHC TC-PMs at least five days before CSP training commences.

(l) Establish and revise as necessary internal, automated/manual CSP metrics reporting element suspense dates (including RHC reporting to DCS-WCT) to ensure end of month reporting requirements to HRC Transition Division (TD) are accurate and timely. Basic reporting requirements will include the following elements, which may be updated pending the publishing of a revised Reference (c):

i. Soldier’s name, rank, MOS, WTU/CCU Company
ii. Type of CSP (INT (Internship), APP (Apprenticeship), OJT, etc.)
iii. Program name or CSP title.
iv. Employer/Provider company name
v. Employer/Provider mailing address
vi. Employer/Provider POC/Supervisor name
vii. Employer/Provider telephone number
viii. Installation/Garrison name
ix. CSP Start date
x. Actual end date
xi. Reason for end date (COMP (Completion), WD (Withdrew), CER (CER eligibility changed), RET (Retired), RTD (return to unit or REFRAD)

xii. CSP projected length (number of weeks or days)

xiii. CSP Projected End Date
xiv. Are other WTU Soldiers currently enrolled in the same CSP (yes/no),
xv. Has Soldier been offered employment by Employer/Provider post CSP?
xvi. If so, employment start date?
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(m) Coordinate with DCS, WCT Infrastructure and Support Division (I&SD) AWCTS Program Manager to develop, insert, and format CSP tracking elements using the AWCTS WTU data system. Coordinate with I&SD regarding establishing a standardized naming convention for each CSP document uploaded into AWCTS.

4. **Sustainment**. Funding. No funds will be required to begin MEDCOM CSPs.

5. **Command and Signal**.


   b. Signal. The primary point of contact for this OPORD is Ms. Nancy Adams, DCS-WCT, CERD Chief, (703) 571-2775 or via e-mail at: nancy.b.adams.civ@mail.mil. Alternate POC is Mr. Michael D. Bowden, CER Division Action Officer and CSP Action Officer, (502) 613-4874 or email at: michael.d.bowden3.civ@mail.mil.

   c. This OPORD will expire one year from publication date.
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MRMC
RHC-Atlantic
RHC-Central
RHC-Europe
RHC-Pacific
AHCA
HFPA
DIR, AMEDD Transformation
DIR, Executive Agencies
DIR, Reserve Affairs
DIR, Special Staff
DIR, Public Affairs