EUROPE REGIONAL MEDICAL COMMAND
INSPECTOR GENERAL (IG)

Special Inspection of Facilities Used to House Wounded, Ill, and Injured (WII) Soldiers

Period of Inspection
02 JUN 14-22 JUN 14
MEMORANDUM FOR The Surgeon General and Commanding General of the U.S. Army Medical Command

SUBJECT: Final Report on the Special Inspection of Facilities Used to House WTU Soldiers FY 2014

1. I approve the findings and recommendations in the enclosed Inspector General report on the “Special Inspection of Facilities Used to House Wounded, Ill, and Injured Soldiers”.


Encl

CF: (w/encl)
Congressional Defense Committees
Assistant Secretary of Defense for Health Affairs
Department of Defense Agencies
Secretary of the Army
Installation Management Command
MEDCOM/OTSG OneStaff
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MEMORANDUM FOR Commanding General, Europe Regional Medical Command (ERMC)

SUBJECT: Final Report on the Special Inspection of Facilities Used to House Wounded, Ill, and Injured (WII) Soldiers for FY 2014

1. Purpose. Obtain ERMC Commander’s signature on the enclosed Special Inspection of Armed Forces Housing Facilities of WII Soldiers.

2. Discussion: On 19 Mar 14, The Europe Regional Medical Command (ERMC) Commander directed the “Special Inspection of Facilities Used to House WII Soldiers” (Appendix 1).

3. The inspection teams identified 20 findings, 12 observations, and made recommendations for corrective actions related to three objectives in accordance with Memorandum, Deputy Secretary of Defense, 18 Sept 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

4. The inspection teams inspected seven WTU locations within ERMC that included DoD owned Unaccompanied Personnel Housing (UPH), DoD owned Army/Military Family Housing (AFH), DoD Leased or Contracted Housing, and Privatized Family Housing (PFH).

5. Summarized Findings and Observations: The majority of the deficiencies identified were corrected on-the-spot or within 24 hours of submission of a work order.

   a. Within the assignments-related objective, there was one finding. The inspection teams determined that all Wounded, Ill, and Injured Soldiers are assigned appropriate housing applicable with their grade and number of dependents.

   b. Within the baseline standards-related objective, there were 18 total findings. There were 14 findings from UPH, which included the following: badly stained carpets, unsecured medication, barracks rooms not maintained, bathroom’s water heating system nonoperational, emergency and exit signs nonoperational, fire doors nonoperational, missing fire evacuation plans, fire doors nonoperational, fire extinguishers not mounted properly, and fire door maintenance not conducted.
Additionally, mold and mildew were identified in some barracks buildings. Four findings were identified in AFH, which included the following: obsolete smoke detectors, broken kitchen cabinet, mildew on the attic wall, and Fire Alarm Detection System not connected to fire station. There were 11 observations, which included the following: 10 observations in UPH and one in AFH.

c. Within the special medical requirements-related objective, there was one finding and one observation. The inspection teams determined that in one AFH, grab bars were not installed to support entrance and egress for WIIWs with limited mobility.

6. Recommendation: The ERMC Commander:

   a. Approve the final report.

   b. Authorize its immediate release to The Surgeon General/Commanding General, USAMEDCOM.
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Executive Summary

1. Background. On 18 Sep 07, the Deputy Secretary of Defense (DEPSECDEF) promulgated standards for facilities housing WII Soldiers who are receiving outpatient medical care. These standards focus in the areas of assignment, baseline accommodations, and special medical requirements. On 28 Jan 08, Public Law 110-181, Sec 1662 was enacted requiring Regional Medical Command (RMC) Inspectors General (IGs) to conduct semi-annual inspections of all WII Soldiers’ housing semi-annually for the first two years and annually thereafter; to submit a report on each facility inspected to the post Commander, the Secretary of the military department concerned, the Assistant Secretary of Defense for Health Affairs, and the congressional defense committees; and to post the final inspection report on their respective Internet website. To facilitate the conduct of the inspections, Headquarters, Department of the Army, issued guidance via ALARACT 162/2008 on 3 Jul 08 to all Army activities. This message directed US Army Medical Command (MEDCOM) RMC IGs, in coordination with Installation Management Command (IMCOM), to oversee the inspection effort. It also provided RMC IGs authorization to task staff members and IGs assigned to senior Commanders and IMCOM as well as “unlimited access to Army activities, organizations, and all information sources necessary to complete the inspection”. 29 Oct 13, the Commanding General, USA Medical Command directed Commanders of Regional Medical Commands to issue a directive to their IGs to conduct the “Special Inspection of Facilities used to House Recovering Soldiers.” On 19 Mar 14, the ERMC CG signed the directive for ERMC IG to inspect the Facilities used to House Recovering Soldiers assigned to the Warrior in Transition Units (WTUs) from 2-22 Jun 14.

2. Purpose. The purpose of the inspection is to assess the condition and adequacy of facilities used to house recovering Soldiers assigned to Warrior Transition Units.

3. Concept. Inspect seven WTU facilities in Germany and Italy spending at least one day at each location.

4. Objectives.
   a. Assess compliance with WII Soldiers’ housing assignments as outlined in Memorandum, Deputy Secretary of Defense, 18 Sep 07, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.
   b. Assess WII Soldiers’ occupied housing for compliance with baseline standards as outlined in Memorandum, Deputy Secretary of Defense, 18 Sep 07, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.
   c. Assess compliance with the requirement to provide special accommodations and services to WII Soldiers with functional limitations as outlined in Memorandum, Deputy Secretary of Defense, 18 Sep 07, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

5. Summary of Findings, Observations, and Recommendations
   **Objective 1**: Assess the compliance with WII Soldiers’ housing assignments.
Finding 1.1: All (7 of 7) installations have assigned housing for WII Soldiers appropriately for their grade and dependency status.

Root Cause(s): Not applicable.

Recommendation: The WTU Commander continue present practice.

Objective 2: Assess WII Soldiers’ occupied housing for compliance with baseline standards.

Finding 2.1: Few (2 of 7) installations had barracks rooms that were not maintained IAW WTU Barracks SOP.

Root Cause(s): (Won’t Comply-No Penalty) WII Soldiers did not keep their barracks room clean, neat, and free of clutter due to not being held accountable for maintaining their rooms in accordance with the SOP. Additionally, the WTU Cadre did not conduct thorough inspections of the rooms.

Recommendation: The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and enforce general cleanliness standards IAW the WTU Barracks SOP.

The WTU Cadre identify WII Soldiers that are unable to conduct cleaning requirements due to mobility limitations and request housekeeping services.

Finding 2.2: Few (1 of 7) installations had mold identified in barracks rooms.

Root Cause(s): (Don’t Know-Never Knew) The WII Soldier, assigned to the room, was on leave and failed to ensure his room was in accordance with the Barracks SOP prior to taking leave.

Recommendation: The WTU Cadre conduct regular checks of facilities used to house WII Soldiers, identify mold or conditions which may encourage the growth of mold, and report findings to DPW.

Finding 2.3: Few (2 of 7) installations had unsecured medications within WII Soldier’s barracks rooms.

Root Cause(s): (Won’t comply-No penalty). WII Soldiers were provided locks to secure their medications in their wall lockers, but failed to do so.

Recommendation: The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and ensure all medications are secured appropriately.

Finding 2.4: Few (2 of 7) installations had water heating systems that were not functioning correctly.

Root Cause(s): (Can’t Comply-Scarce Resources) The WTU Cadre stated that they were aware of the deficiency and have placed a work order through DPW.
**Recommendation:** The WTU Cadre follow-up with DPW to ensure the water heating system is repaired.

**Finding 2.5:** Few (1 of 7) installations had badly stained carpet within the barracks.

**Root Cause(s):** (Can’t Comply-Scare Resources) The work order to the replace carpet was already approved and awaiting action.

**Recommendation:** The WTU Cadre follow-up with DPW to ensure the carpet is replaced.

**Finding 2.6:** Few (1 of 7) installations had mildew identified in the attic of an Army Family Housing Unit.

**Root Cause(s):** (Don’t Know-Never knew) The Soldier did not conduct a thorough inspection of his housing unit. A work order was placed through DPW.

**Recommendation:**

The WTU Commander ensure WII Soldiers understand the process for reporting housing deficiencies to the WTU Cadre and DPW.

The WTU Cadre conduct regular checks of facilities used to house WII's and follow up with DPW.

The WTU Cadre ensure WII Soldiers know the products and information at the self-help home improvement store that can be used to prevent mildew in their unit.

The WII Soldiers residing in Army Family Housing ensure to report all housing deficiencies to WTU Cadre and DPW.

**Finding 2.7:** Few (1 of 7) installations had mildew identified in the ceiling and wall of barracks rooms.

**Root Cause(s):** (Can’t Comply-Scare Resources) The work order for anti-mildew treatment and paint was already placed and awaiting action.

**Recommendation:** The WTU Commander ensure WII Soldiers understand how to identify mildew and how to prevent conditions which may encourage its growth.

**Finding 2.8:** Few (1 of 7) installations had a broken kitchen cabinet in one of the Army Family Housing Unit.

**Root Cause(s):** (Don’t Know-Never knew) The Soldier noted the broken cabinet before the IG inspection but did not report the deficiency to the WTU Cadre or DPW. A work order was placed.

**Recommendation:**
The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on work orders with DPW.

The WTU Commander ensure WII Soldiers know the process for reporting housing deficiencies to their WTU Cadre and DPW.

**Finding 2.9:** Few (1 of 7) installations had obsolete smoke detectors in an Army Family Housing Unit.

**Root Cause(s):** (Don’t Know-Never knew) The WII Soldier and the WTU Cadre did not know the smoke detectors were obsolete.

**Recommendation:** Housing Management, in conjunction with DPW, ensure the Army Family Housing Units are equipped with the correct smoke detectors.

**Finding 2.10:** Few (1 of 7) installations’ fire evacuation plans were not posted within the barracks.

**Root Cause(s):** (Don’t Know-Forgot) The WTU Cadre forgot the requirement to have the evacuation plans posted on all floors of the barracks. WTU Cadre corrected deficiency and posted fire evacuation plans.

**Recommendation:** The WTU Commander ensure that fire evacuation plans and emergency phone numbers are posted on each floor aside each stairwell access door and at the entry of the building.

**Finding 2.11:** Few (1 of 7) installations had fire doors within the barracks that did not properly close.

**Root Cause(s):** (Can’t Comply-Scare Resources) The work order to repair fire doors was already placed and awaiting action.

**Recommendation:** The WTU Cadre follow-up with DPW to ensure the fire doors are repaired.

**Finding 2.12:** Few (1 of 7) installations had nonfunctional emergency and exit signs within the barracks.

**Root Cause(s):** (Don’t Know-Never Knew) The WTU Cadre did not conduct a thorough inspection of facilities used to house WII Soldiers. A work order was placed to repair the emergency and exit signs.

**Recommendation:** The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on work orders with DPW.

**Finding 2.13:** Few (1 of 7) installations had fire extinguishers that were not mounted properly in the barracks.

**Root Cause(s):** (Don’t Know-Never Knew) The WTU Cadre was not aware of the height that fire extinguishers were required to be mounted. A work order was placed to properly mount the fire extinguishers to the wall.
**Recommendation:** The WTU Cadre conduct regular checks of facilities housing WII Soldiers and follow-up on work orders with DPW.

**Finding 2.14:** Few (1 of 7) installations had a broken outlet in the barracks.

**Root Cause(s):** (Don’t Know-Never Knew) The Cadre did not conduct thorough inspection of facilities used to house WII Soldiers.

**Recommendation:** The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on work orders with DPW to replace the broken outlet.

**Finding 2.15:** Few (1 of 7) installations did not have emergency backup lighting installed.

**Root Cause(s):** (Can’t Comply-Scare Resources) The work order to install emergency backup lighting was already placed and awaiting action.

**Recommendation:** The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on the work order with DPW.

**Finding 2.16:** Few (1 of 7) installations had fire doors that did not have an updated annual inspection/service label.

**Root Cause(s):** (Don’t Know-Never Knew) The WTU Cadre was not aware of the requirement to have fire doors inspected annually. A work order was placed to have the annual inspection completed.

**Recommendation:** The WTU Cadre request annual inspections of the fire doors through DPW and that it is documented as required.

**Finding 2.17:** Few (1 of 7) installations had Fire Alarm Detection Systems (FADS) that were not connected to the Fire Control Center (FCC) in an Army Family Housing Unit.

**Root Cause(s):** (Don’t Know-Never knew) The WII Soldier and the WTU Cadre was not aware that the FADS were not connected to the FCC.

**Recommendation:** Fire and Safety Inspectors conduct functional testing as required to ensure the FADS are connected to the FCC.

**Finding 2.18:** Few (1 of 7) installations had re-locatable power taps (power strips) being utilized for permanent use instead of temporary use within the barracks.

**Root Cause(s):** (Don’t Know-Never Knew) The WTU Cadre was not aware that the re-locatable power taps (power strips) were only for temporary use.

**Recommendation:**

The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on the work order with DPW to install more outlets.

The WTU Cadre ensure the WII Soldiers understand that re-locatable power strips are for temporary use and should not take the place of permanently installed receptacles.
Observation 2.1: Few (1 of 7) installations had a missing oven handle in a barracks community kitchen.

Recommendation: The WTU Cadre conduct regular checks of facilities housing WII Soldiers and ensure WTU Cadre follow-up with Housing Management.

Observation 2.2: Few (1 of 7) installations had community bathroom ventilation systems that were not free of dust and/or dirt.

Recommendation: The WTU Cadre ensure the housekeeping team cleans the ventilation system cover, at a minimum, quarterly.

Observation 2.3: Few (1 of 7) installations had unauthorized appliances in the barracks rooms.

Recommendation:  
The WTU Cadre conduct regular checks of facilities housing WII Soldiers to ensure WII Soldiers know what appliances are not authorized in the barracks IAW the Barracks SOP.  
The WII Soldiers ensure unauthorized appliances are not utilized within the rooms.

Observation 2.4: Few (1 of 7) installations had community kitchens within the barracks that were not clean.

Recommendation:  
The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and enforce cleanliness standards IAW the Barracks’s SOP.

Observation 2.5: Few (1 of 7) installations had electrical extension cords that created a potential tripping hazard in the barracks.

Recommendation:  
The WTU Cadre conduct regular checks of facilities used to house WII Soldiers.

The WTU Cadre ensure the WII Soldiers are aware of the Safety and Fire prevention standards IAW the Barracks SOP.

Observation 2.6: Few (1 of 7) installations had nonoperational overhead fluorescent lights in the barracks.

Recommendation:  
The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up with DPW on the work order.

Observation 2.7: Few (1 of 7) installations had missing window screens within barracks rooms.

Recommendation:  
The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up with DPW on the work order.
Observation 2.8: Few (1 of 7) installations had a pedestrian walkway near the WTU barracks that are constantly blocked by cars.

Recommendation: The WTU Cadre follow-up with DPW on the work order to install parking curbs or posts.

Observation 2.9: Few (1 of 7) installations had a broken shower head within the barracks.

Recommendation: The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up with DPW on the work order.

Observation 2.10: Eligible WII Soldiers are being reimbursed for basic internet and telephone services.

Recommendation:

The WTU Commander ensure that all WII Soldiers and WTU Cadre know the process to request reimbursement for basic internet and telephone services.

The WTU Cadre track all WII Soldiers housed in Army Family Housing Units and ensure they are being reimbursed for basic internet and telephone services.

Observation 2.11: Few (1 of 7) installations had workspace concerns.

Recommendation: The WTU Commander engage garrison regarding workspace accommodations.

Objective 3: Assess compliance with the requirement to provide special accommodations and services to WII Soldiers with functional limitations.

Finding 3.1: Few installations (1 of 7) did not have grab bars installed in the bathroom of an Army Family Housing Unit.

Root Cause(s): (Don’t Know-Never knew) The WII Soldier did not informed his Cadre the need for grab bars. A work order was placed.

Recommendations:

The WTU Cadre follow-up with DPW to ensure the grab bars is installed.

The WTU Commander ensure the WTU Cadre and WII Soldiers know the process to request special accommodations in accordance with their medical limitations to DPW.

Observation 3.1: Majority (5 of 7) installations are not wheelchair accessible IAW Americans with Disability Act (ADA) standards. (No WII Soldiers affected)

Recommendation: The WTB-E has an established process to accommodate lodging for any potential WII Soldiers requiring wheelchair accessibility. Continue current practice.
Chapter 1 Objectives and Methodology

1. Objectives (Reference Appendix 1 – Special Inspection Directive).
   a. Assess compliance with WII Soldiers’ housing assignments as outlined in Memorandum, Deputy Secretary of Defense, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.
   b. Assess WII Soldiers’ occupied housing for compliance with baseline standards as outlined in Memorandum, Deputy Secretary of Defense, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.
   a. Assess compliance with the requirement to provide special accommodations and services to WII Soldiers with functional limitations as outlined in Memorandum, Deputy Secretary of Defense, 18 Sep 07, Subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel.

2. Inspection Team. The inspection team consisted of ERMC IG, Garrison IGs, representative from DPW, Housing, and Fire and Safety from each installation visited.

3. Methodology.
   a. Observation: The inspection teams inspected the following types of WII Soldiers’ occupied facilities: DoD Owned Unaccompanied Personnel Housing, DoD Leased or Contracted Housing or Lodging, DoD/NAF Owned Lodging, DoD Owned Family Housing, and Privatized Family Housing. Assessment of Privatized Family Housing was conducted with the consent of occupant and privatized housing management.
   b. Document Review. The inspection teams reviewed all local barracks SOPs and open work orders.
   c. Interviews. The inspection teams conducted interviews with WTU Commanders, 1SGs, Platoon Sergeants, Cadres, and WII Soldiers.

4. Locations Visited:
   b. Baumholder (4 Jun 14 to 6 Jun 14)
   c. Kaiserslautern (4 Jun 14 to 5 Jun 14)
   b. Katterbach/Ansbach (17 Jun 19 to 19 Jun 14)
   c. Stuttgart (17 Jun 14)
   d. Vicenza (17 Jun 14 to 18 Jun 14)
e. Vilseck/Grafenwoehr (12 Jun 14 to 13 Jun 14)

f. Wiesbaden (3 Jun 14 to 4 Jun 14)

5. Findings/Observation Format.

a. Where a violation of a published standard, policy, law or regulation existed, a Finding Statement was developed and is addressed in the following format:

   Finding statement
   Standard(s)
   Root Cause
   Discussion
   Recommendation

b. Where there was no violation of a published standard, policy, law, or regulation, but an observation was made to improve current operations, an Observation Statement was developed and is addressed in the following format:

   Observation statement
   Standard(s), if applicable
   Discussion
   Recommendation

6. In the report, quantitative terms, such as “few, some, majority, and most” are used to describe percentile ranges of quarters/barracks rooms inspected linked to specific findings or observations. These terms are defined as follows:

<table>
<thead>
<tr>
<th>Term</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Few</td>
<td>1-25%</td>
</tr>
<tr>
<td>Some</td>
<td>26-50%</td>
</tr>
<tr>
<td>Majority</td>
<td>51-75%</td>
</tr>
<tr>
<td>Most</td>
<td>76-99%</td>
</tr>
<tr>
<td>All</td>
<td>100%</td>
</tr>
</tbody>
</table>
Chapter 2 Good News

1. WII Soldiers stated that DPW responds quickly, usually within 24hrs, to work order requests in housing and in the barracks rooms. All WII Soldiers stated that DPW ensures their work order requests are completed in a timely manner.

2. All WTB-E command teams, cadre, and staff are very caring and passionate about providing the best care and housing for WII Soldiers.

3. IMCOM approved funds for reimbursing basic cable and telephone services for all qualified WII Soldiers living in Army Family Housing Units.

4. WTB-E provided excellent presentations to inform leaders of the benefits authorized by local Garrisons for WII Soldiers within Europe.
Chapter 3 Findings and Observations

Objective 1: Assess compliance with WII Soldiers’ housing assignments.

Finding 1.1: All (7 of 7) installations have assigned housing for WII Soldiers appropriately for their grade and dependency status.

Standard: Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 6, p.16.

Inspection Results: The inspector did not find any violations of a published standard, policy, law, or regulation in regards to this objective.

Root Cause(s): Not applicable.

Recommendation: The WTU Commander continue present practice.

Objective 2: Assess WII Soldiers’ occupied housing for compliance with baseline standards.

Finding 2.1: Few (2 of 7) installations had barracks rooms that were not maintained IAW WTU Barrack’s SOP. (9 WII Soldiers affected)

Standard: Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p.16.


Inspection Results: The safety inspector noted that nine WII Soldiers, within the barracks, did not clean their rooms in accordance with Barracks SOP. WII Soldiers had dirty dishes in the sink and full trash cans. The WTU Cadre stated that the WII Soldiers were aware of the cleanliness standards and that they inspected their WII Soldiers’ rooms a week prior to the IG inspection.

Root Cause(s): (Won’t Comply-No Penalty) WII Soldiers did not keep their barracks room clean, neat, and free of clutter due to WII Soldiers not being held accountable for maintaining their rooms in accordance with the SOP. Additionally, the WTU Cadre did not conduct thorough inspections of the barracks room.

Recommendation:

The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and enforce general cleanliness standards IAW WTU Barracks SOP.

The WTU Cadre identify WII Soldiers that are unable to conduct cleaning requirements due to mobility limitations and request housekeeping services.
**Finding 2.2:** Few (1 of 7) installations had mold identified in barracks rooms. (1 WII Soldier and 1 individual room affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p. 16.

**Inspection Results:** The inspector noted mold in three glass containers caused by standing water and rotten plants. The WTU Cadre stated that the Soldier was instructed by his squad leader to clean his room before going on leave, but the Soldier failed to thoroughly clean the room. The WTU Cadre immediately removed the containers from the room.

**Root Cause(s):** (Don't Know-Never Knew) The WII Soldier, assigned to the room, was on leave and failed to ensure his room was in accordance with the Barracks SOP prior to taking leave.

**Recommendation:** The WTU Cadre conduct regular checks of facilities used to house WII Soldiers, identify mold or conditions which may encourage the growth of mold, and report findings to DPW.

**Finding 2.3:** Few (2 of 7) installations had unsecured medications within WII Soldier's barracks rooms. (3 WII Soldiers affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p.17.


**Inspection Results:** The inspector noted that some WII Soldiers had medications unsecured. The WTU Cadre stated that WII Soldiers were provided locks and were informed to secure their medication in their locker in accordance with the Barracks SOP.

**Root Cause(s):** (Won't comply-No penalty). WII Soldiers were provided locks to secure their medications in their wall lockers, but failed to do so.

**Recommendation:** The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and ensure all medications are secured appropriately.

**Finding 2.4:** Few (2 of 7) installations had water heating systems that were not functioning correctly. (16 WII Soldiers and 2 common areas affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p. 17.
Discussion: The inspector noted that the water pressure was low and the water was not getting hot in both male and female shower rooms. The DPW representative stated that a work order was already placed and was pending parts to repair the water heating system.

Root Cause(s): (Can't Comply-Scarce Resources) The WTU Cadre stated that they were aware of the deficiency and have placed a work order through DPW.

Recommendation: The WTU Cadre follow-up with DPW to ensure the water heating system is repaired.

Finding 2.5: Few (1 of 7) installations had badly stained carpet within the barracks. (14 WII Soldiers and 14 individual rooms)

Standard: Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p.16.

Inspection Results: The inspector noted stained carpet within a barracks building. This finding was reported in FY13 WTU Housing inspection report. The DPW representative stated that a work order to replace the carpet had been placed and funding was recently approved. Contractors will start the project in Oct 14, and replace the carpet with linoleum tiles throughout the bldg.

Root Cause(s): (Can’t Comply-Scare Resources) The work order to replace carpet was already approved and awaiting action.

Recommendation: The WTU Cadre follow-up with DPW to ensure the carpet is replaced.

Finding 2.6: Few (1 of 7) installations had mildew identified in the attic of an Army Family Housing Unit. (1 WII Soldier and a common area affected)

Standard: Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p.16.

Inspection Results: The inspector noted mildew on the attic walls of a WII Soldier’s Army Family Housing Unit. Neither the WII Soldier nor the WTU Cadre was aware of the mildew until the day of the inspection. The DPW representative placed a work order and recommended that no one uses the attic until the mildew is removed.

Root Cause(s): (Don’t Know-Never knew) The Soldier did not conduct a thorough inspection of his housing unit. A work order was placed through DPW.

Recommendation:

The WTU Commander ensure WII Soldiers understand the process for reporting housing deficiencies to the WTU Cadre and DPW.
The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow up with DPW.

The WTU Cadre ensure WII Soldiers know the products and information at the self-help home improvement store that can be used to prevent mildew in their unit.

The WII Soldiers residing in Army Family Housing ensure to report all housing deficiencies to WTU Cadre and DPW.

**Finding 2.7:** Few (1 of 7) installations had mildew identified in the ceiling and wall of barracks rooms. (1 WII Soldier and 1 individual room affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p.16.

**Inspection Results:** The inspector noted two rooms within the WTU barracks building with mildew on the ceiling and wall. The WTU Cadre stated that a work order was placed before the IG inspection for anti-mildew treatment and paint. The DPW representative stated that a possible water leak caused the stains.

**Root Cause(s):** (Can’t Comply-Scare Resources) The work order for anti-mildew treatment and paint was already placed and awaiting action.

**Recommendation:** The WTU Commander ensure WII Soldiers understand how to identify mildew and how to prevent conditions which may encourage its growth.

**Finding 2.8:** Few (1 of 7) installations had a broken kitchen cabinet in one of the Army Family Housing Unit. (1 WII Soldier and 1 common area affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p.17.

**Inspection Results:** The inspector noted that the entire cabinet door in an Army Family Housing Unit was broken. The Soldier stated that the cabinet door was broken due to accidentally grabbing the door and trying to prevent a fall while using the steps to reach an item from the cabinet. The DPW representative stated that a work order was not submitted on this deficiency. The inspector instructed the Soldier to place a work order as soon as possible and to avoid using that cabinet until it is repaired.

**Root Cause(s):** (Don’t Know-Never knew) The Soldier noted the broken cabinet before the IG inspection but did not report the deficiency to the WTU Cadre or DPW. A work order was placed.

**Recommendation:**
The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on work orders with DPW.

The WTU Commander ensure WII Soldiers know the process for reporting housing deficiencies to their WTU Cadre and DPW.

**Finding 2.9:** Few (1 of 7) installations had obsolete smoke detectors in an Army Family Housing Unit. (1 WII Soldier and 1 common area affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p.16.

**Inspection Results:** The fire and safety inspector noted an Army Family Housing Unit was equipped with single station smoke detectors that are no longer are authorized. A work order was placed to replace the obsolete smoke detectors.

**Root Cause(s):** (Don’t Know-Never knew) The WII Soldier and the WTU Cadre did not know the smoke detectors were obsolete.

**Recommendation:** Housing Management, in conjunction with DPW, ensure the Army Family Housing Units are equipped with the correct smoke detectors.

**Finding 2.10:** Few (1 of 7) installations’ fire evacuation plans were not posted within the barracks. (3 WII Soldiers and 2 common areas affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p.17.

**Inspection Results:** The fire inspector noted that the fire evacuation plans were not posted within the barracks on each floor or near stairwells. WTU Cadre stated that copies of the evacuation plans were maintained in a safety book located in the WTU Cadre office. WTU Cadre corrected the deficiency and posted fire evacuation plans.

**Root Cause(s):** (Don’t Know-Forgot) The WTU Cadre forgot the requirement to have the evacuation plans posted on all floors of the barracks. WTU Cadre corrected deficiency and posted fire evacuation plans.

**Recommendation:** The WTU Commander ensure that fire evacuation plans and emergency phone numbers are posted on each floor aside each stairwell access door and at the entry of the building.

**Finding 2.11:** Few (1 of 7) installations had fire doors within the barracks that did not properly close. (3 WII Soldiers and 1 common area affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p. 17.


**Inspection Results:** The fire inspector noted some fire doors did not properly close and seal automatically within the barracks. The WTU Cadre stated that a work order was placed and pending parts to repair the fire doors.

**Root Cause(s):** (Can’t Comply-Scare Resources) The work order to repair fire doors was already placed and awaiting action.

**Recommendation:** The WTU Cadre follow-up with DPW to ensure the fire doors are repaired.

**Finding 2.12:** Few (1 of 7) installations had nonfunctional emergency and exit signs within the barracks. (7 WII Soldiers and 1 common area affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p. 17.

**Inspection Results:** The fire inspector noted several emergency and exit signs were inoperable within the barracks. The WTU Cadre stated that they were not aware the emergency and exit signs did not function correctly. The DPW representative placed a work order.

**Root Cause(s):** (Don’t Know-Never Knew) The WTU Cadre did not conduct a thorough inspection of facilities used to house WII Soldiers. A work order was placed to repair the emergency and exit signs.

**Recommendation:** The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on work orders with DPW.

**Finding 2.13:** Few (1 of 7) installations had fire extinguishers that were not mounted properly in the barracks. (3 WII Soldiers and 1 common area affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p. 17.


**Inspection Results:** The fire inspector noted that the fire extinguishers at the entry way were mounted too high in one location. The WTU Cadre was unaware of the requirement to mount the fire extinguisher not more that 5ft above the floor.

**Root Cause(s):** (Don't Know-Never Knew) The WTU Cadre was not aware of how high the fire extinguishers were supposed to be mounted. A work order was placed to properly mount the fire extinguishers to the wall.

**Recommendation:** The WTU Cadre conduct regular checks of facilities housing WII Soldiers and follow up on follow-up on work orders with DPW.
**Finding 2.14:** Few (1 of 7) installations had a broken outlet in the barracks. (1 WII Soldier and 1 individual room affected)

**Standards:** DA PAM 385-26, The Army Electrical Safety Program, 01 Feb 2013, para 2-5d.


**Inspection Results:** The DPW representative noted that one room had a broken outlet. The cadre was informed to submit a work order to replace the broken outlet to prevent a fire hazard.

**Root Cause(s):** (Don’t Know-Never Knew) The Cadre did not conduct thorough inspection of facilities used to house WII Soldiers.

**Recommendation:** The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on work orders with DPW to replace the broken outlet.

**Finding 2.15:** Few (1 of 7) installations did not have emergency backup lighting installed. (3 WII Soldiers and 1 common area affected)

**Standards:** DA PAM 385-26, The Army Electrical Safety Program, 01 Feb 2013, para 2-5d.


**Inspection Results:** The inspector noted that the backup lighting was not installed in the hallway of one barracks building. The cadre stated that it was never installed when DPW renovated the hallway after a water pipe busted above it on the second floor. The WTU Cadre stated that a work order was placed to install the backup lighting.

**Root Cause(s):** (Can’t Comply-Scare Resources) The work order to install emergency backup lighting was already placed and awaiting action.

**Recommendation:** The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on the work order with DPW.

**Finding 2.16:** Few (1 of 7) installations had fire doors that did not have an updated annual inspection/service label. (3 WII Soldiers and 1 common area affected)


**Inspection Results:** The inspector noted that the electronic fire door leading to the emergency exit had not been inspected during the past year. The safety inspector stated that the inspection of all fire doors is an annual requirement.

**Root Cause(s):** (Don’t Know-Never Knew) The WTU Cadre was not aware of the requirement to have fire doors inspected annually. A work order was placed to have the annual inspection completed.

**Recommendation:** The WTU Cadre request annual inspections of the fire doors through DPW and that it is documented as required.
Finding 2.17: Few (1 of 7) installations had Fire Alarm Detection Systems (FADS) that were not connected to the Fire Control Center (FCC) in an Army Family Housing Unit. (1 WII Soldier and 1 common area affected)


**Inspection Results:** The fire and safety inspector noted that the FADS were not connected to the FCC. The fire inspector stated that without the proper programming of the SIM cards, the FCC would not be alerted to a fire and reaction time would possibly be reduced. A work order was submitted to reprogram the SIM cards.

**Root Cause(s):** (Don’t Know-Never knew) The WII Soldier and the WTU Cadre was not aware that the FADS were not connected to the FCC.

**Recommendation:** Fire and safety inspectors conduct functional testing as required to ensure the FADS are connected to the FCC.

Finding 2.18: Few (1 of 7) installations had re-locatable power taps (power strips) being utilized for permanent use instead of temporary use within the barracks. (1 WII Soldier and 1 individual room affected)


**Inspection Results:** The fire and safety inspector stated that re-locatable power taps (power strips) commonly used for computers, printers, and other peripherals at workstations, offices, and dormitories are for temporary use in accordance with The National Fire Protection Association (NFPA) and that permanent receptacles should be installed.

**Root Cause(s):** (Don’t Know-Never Knew) The WTU Cadre was not aware that the re-locatable power taps (power strips) were only for temporary use.

**Recommendation:**

The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up on the work order with DPW to install more outlets.

The WTU Cadre ensure the WII Soldiers understand that re-locatable power strips are for temporary use and should not take place of permanently installed receptacles.

Observation 2.1: Few (1 of 7) installations had a missing oven handle in a barracks community kitchen. (7 WII Soldiers and 1 common area affected)

**Discussion:** During the walkthrough the inspector noted that the handle used to open the oven door was missing. The inspector stated that use of the oven could be a burn hazard since the only way to open the oven would be to touch the door. The WTU Cadre stated that one week prior he noticed the deficiency while conducting the routine building inspection and placed a work order with DPW. DPW recommended a “Do Not Use” sign be posted on the oven until the repair is made.

**Recommendation:** The WTU Cadre conduct regular checks of facilities housing WII’s and ensure WTU Cadre follow-up with Housing Management.
**Observation 2.2:** Few (1 of 7) installations had community bathroom ventilation systems that were not free of dust and/or dirt. (7 WII Soldiers and 2 common areas affected)

**Discussion:** The inspector noted that the bathroom ventilation system covers had dust/dirt build up. The DPW representative stated that the ventilation system works but the accumulation of dust increases risk of future failure.

**Recommendation:** The WTU Cadre ensure the housekeeping team cleans the ventilation system cover, at a minimum, quarterly.

**Observation 2.3:** Few (1 of 7) installations had unauthorized appliances in the barracks rooms. (1 WII Soldier and 1 individual room affected)

**Discussion:** The inspector noted that a room contained a cooking grill. The fire inspector stated that the appliance has a heating element which can be a fire hazard. Although the WTU Cadre had previously instructed the WII Soldier on authorized and unauthorized appliances, the Soldier stated that he forgot to move it to the kitchen area.

**Recommendation:**

The WTU Cadre conduct regular checks of facilities housing WII Soldiers to ensure WII Soldiers know what appliances are not authorized in the barracks IAW the barracks SOP.

The WII Soldiers ensure unauthorized appliances are not kept in barracks rooms.

**Observation 2.4:** Few (1 of 7) installations had community kitchens within the barracks that were not clean. (16 WII Soldiers and 2 common areas affected)

**Discussion:** The inspector noted that microwaves and refrigerators in community kitchens needed to be clean. The WTU Cadre was instructed to ensure that the kitchens were cleaned to prevent mold and/or potential pest problems.

**Recommendation:** The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and enforce cleanliness standards IAW the barracks SOP.

**Observation 2.5:** Few (1 of 7) installations had electrical extension cords that created a potential tripping hazard in the barracks. (1 WII Soldier and 1 individual room affected)

**Discussion:** The inspector noted electrical extension cords running across doorways. The WTU Cadre was reminded that cords should not be placed across doorways IAW the barracks SOP.

**Recommendation:**

The WTU Cadre conduct regular checks of facilities used to house WII Soldiers.

The WTU Cadre ensure the WII Soldiers are aware of the safety and fire prevention standards IAW the barracks SOP.
Observation 2.6: Few (1 of 7) installations had nonoperational overhead fluorescent lights in the barracks. (6 WII Soldiers, 3 individual rooms and 1 common area affected)

Discussion: The inspector noted that a group of lights were nonoperational in three barracks rooms and in a bathroom. A work order was placed to replace the lights.

Recommendation: The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up with DPW on the work order.

Observation 2.7: Few (1 of 7) installations had missing window screens within barracks rooms. (3 WII Soldiers and 3 individual rooms affected)

Discussion: The inspector noted that a few barracks rooms had window screens missing. The WTU Cadre stated that they were aware of the missing window screens and a work order was submitted to replace them.

Recommendation: The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up with DPW on the work order.

Observation 2.8: Few (1 of 7) installations had a walkway near the WTU barracks that are constantly blocked by cars. (16 WII Soldiers and 1 common area affected)

Discussion: The inspector noted that the pedestrian walkway is constantly blocked by cars. The WTU Cadre stated that a work order was submitted to DPW to add parking curbs or posts to prevent cars from blocking the walkway.

Recommendation: The WTU Cadre follow-up with DPW on the work order to install parking curbs or posts.

Observation 2.9: Few (1 of 7) installations had a broken shower head within the barracks. (7 WII Soldiers and 1 common area affected)

Discussion: The inspector noted that a shower head holder in the female bathroom was broken. The DPW representative stated that a work order was placed and is pending parts to replace the shower head.

Recommendation: The WTU Cadre conduct regular checks of facilities used to house WII Soldiers and follow-up with DPW on the work order.

Observation 2.10: Eligible WII Soldiers are being reimbursed for basic internet and telephone services.

Discussion: On 20 Feb 2014, garrison approved funds for WII Soldiers that are eligible to receive reimbursement of basic cable and basic telephone services bills. During the inspection it was noted that some WII Soldiers from Army Family Housing have been reimbursed for basic internet and telephone services and that other WII Soldiers are pending payment. The WTU Commanders and WII Soldiers know the process to request reimbursement for basic internet.

Recommendation:
The WTU Commander ensure that all WII Soldiers and WTU Cadre know the process to request reimbursement for basic internet and telephone services.

The WTU Cadre track all WII Soldiers housed in Army Family Housing Units and ensure they are being reimbursed for basic internet and telephone services.

**Observation 2.11:** Few (1 of 7) installations had workspace concerns. (No WII Soldiers affected)

**Discussion:** During the inspection it was noted that WTU Cadre did not have enough office space to conduct Cadre/Staff duties. The WTU Cadre voiced concerns of WII Soldiers overhearing medical information or other PII being discussed between Cadre and WII Soldiers in the confined space. The Cadre stated that they have a total of 6 rooms: 3 rooms for WII Soldier barracks; 1 room for Cadre administrative office functions; and 1 room for a multipurpose common area used for platoon formations, training, and civilian computer access. Additionally, this facility lacks allocated storage space and currently uses a vacant barracks room for storage. The Cadre stated that due to an increased number of personnel assigned, they are requesting additional space through garrison to accommodate the influx of Soldiers, Cadre, and Staff.

**Recommendation:** The WTU Commander engage garrison regarding workspace accommodations.

**Objective 3:** Assess compliance with the requirement to provide special accommodations and services to WII Soldiers with functional limitations.

**Finding 3.1:** Few installations (1 of 7) did not have grab bars installed in the bathroom of an Army Family Housing Unit. (1 WII Soldier and 1 common area affected)

**Standard:** Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel, paragraph 7, p. 16.

**Inspection Results:** The inspector noted that grab bars were not installed to support entrance and egress for WII Soldiers with limited mobility. A WII Soldier stated that he was having problems entering and exiting the bathing facilities due to the absence of grab bars. The DPW representative placed a work order to install grab bars.

**Root Cause(s):** (Don’t Know-Never knew) The WII Soldier did not informed his Cadre the need for grab bars. A work order was placed.

**Recommendations:**

The WTU Cadre follow-up with DPW to ensure the grab bars are installed.

The WTU Commander ensure the WTU Cadre and WII Soldiers know the process to request special accommodations in accordance with their medical limitations to DPW.

**Observation 3.1:** Majority (5 of 7) installations are not wheelchair accessible IAW Americans with Disability Act (ADA) standards. (No WII Soldiers affected)
Discussion: The inspectors noted that common areas, such as bathrooms, laundry rooms, kitchens, and water fountains are not ADA compliant and could not be accessed by WII Soldiers in a wheelchair. Currently there are no WII Soldiers requiring wheelchair accessibility. WTB-E leadership stated that they will transfer WII Soldiers requiring long-term wheelchair use to a CONUS WTU.

Recommendation: The WTB-E has an established process to provide ADA compliant lodging for any WII Soldier requiring short-term wheelchair accessibility. Continue current practice.
MEMORANDUM FOR ERMC Inspector General, U.S. Army, Europe Regional Medical Command, APO AE 09136

SUBJECT: Directive for the Inspection of Facilities used to House Recovering Soldiers

1. In accordance with Public Law 110-181 (enclosure 1), I direct the Europe Regional Medical Command Inspector General to conduct the special inspection of facilities used to house recovering Soldiers assigned to the Army Warrior Transition Units (WTUs) within Europe. You will conclude no later than 15 August 2014 and provide me with a written report at the conclusion of the inspection.

2. The inspection will determine if facilities used to house recovering Soldiers are in compliance with Memorandum, Deputy Secretary of Defense, 18 September 2007, Subject: DoD Housing Inspection Standards for Medical Hold and Medical Holdover Personnel.

3. ALARACT 162/2008 (enclosure 2) authorizes Regional Medical Command IG teams to coordinate with Installation Management Command IGs to task staff members and Inspectors General assigned to Senior Commanders and IMCOM. The inspection teams are authorized unlimited access to Army activities, organizations, and all information sources to ensure the successful and timely completion of this inspection requirement.

4. All personnel presented with this directive will afford the inspectors with the maximum assistance necessary to allow them to complete their task. Pursuant to AR 20-1, IG personnel are authorized access to all documents and other evidentiary materials needed to discharge their duties.

5. Point of contact is

3 Encls
1. Public Law 110-181, 28 Jan 08
2. ALARACT 162/2008
3. ALARACT 295/2008
MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
UNDER SECRETARY OF DEFENSE FOR PERSONNEL
AND READINESS
UNDER SECRETARY OF DEFENSE FOR
ACQUISITION, TECHNOLOGY AND LOGISTICS
ASSISTANT SECRETARY OF DEFENSE FOR HEALTH
AFFAIRS

SUBJECT: DoD Housing Inspection Standards for Medical Hold and Holdover
Personnel

The Wounded, Ill and Injured Senior Oversight Committee (WII-SOC), a joint
DoD/DVA committee, met and approved the following policy changes on August 28,
2007.

Effective immediately, the Military Services will provide housing for medical hold
and holdover personnel in accordance with the attached standards. These standards
address baseline accommodations and special features and services that may be required
depending on a member's medical condition and treatment plan.

The Secretaries of the Military Departments are directed to use these standards for
conducting the inspections required by section 3307 of the U.S. Troop Readiness,
Veterans' Care, Katrina Recovery, and Iraq Accountability Appropriations Act, 2007
(Public Law 110-28), and to report inspection findings to the Under Secretary of Defense
for Personnel and Readiness not later than October 31, 2007.

Timely implementation of these standards is a top Department priority.

Attachment:
As stated

25
HOUSING INSPECTION STANDARDS FOR MEDICAL HOLD AND HOLDOVER PERSONNEL

1. PURPOSE

These standards shall be used as a basis for evaluating the adequacy of facilities that house medical hold and holdover personnel.

2. GENERAL

In general, medical hold and holdover personnel receiving outpatient medical treatment (hereafter referred to as MH personnel or MH members) shall be assigned or referred to housing that exceeds or meets the applicable quality standards and is appropriate for their medical condition, expected duration of treatment, dependency status (including authorization of a non-medical attendant), and pay grade. The particular housing and associated amenities/services provided shall be an integral part of their medical treatment plan as determined by the primary care physician, patient, and chain of command. Note that some MH personnel with serious medical conditions are authorized non-medical attendants at the discretion of their primary care physician to assist in their recovery and rehabilitation. Non-medical attendants can include the member’s parent, guardian, or another adult (18 or over).

3. APPLICABILITY

These standards address baseline accommodations, and any special medically needed facility features and services. Standards and guidance are also provided for associated furnishings, amenities, operations/services, and maintenance that are critical to wellbeing and morale.

These standards apply to the following types of housing when occupied by MH personnel:

- DoD-owned family housing (FH)
- DoD-owned unaccompanied personnel housing (UPH)
- Lodging owned by DoD, whether supported by appropriated funds or a non-appropriated funded instrumentally (NAFI). Lodging types include temporary duty (TDY) lodging, permanent change of station (PCS) lodging, recreational lodging, and military treatment facilities (MTF) lodging, e.g., Fisher Houses.
- Lease/contracted housing and lodging, to the maximum extended permitted by the associated agreement.
- Privatized housing and lodging, to the maximum extended permitted by the associated agreement.
Note these standards do not apply to a service member’s privately-owned home, or a rented home in the community (not privatized) that a service member obtains on his or her own.

4. PRIORITY FOR SERIOUS MEDICAL CONDITIONS AS A DIRECT RESULT OF ARMED CONFLICT

It is fitting that medical hold personnel who have “serious physical disabilities”(1) or that are the “direct result of armed conflict” have priority for housing and certain services. While the minimum housing standards are the same for all medical hold personnel, DoD has a special obligation to provide the best for seriously Wounded Warriors. Examples where priority should be considered include: housing waiting lists, furnishing and electronic equipment, parking spaces, time to respond to maintenance requests, etc. Furthermore, the housing status of these seriously Wounded Warriors should be monitored at the Service HQ level.

5. RESPONSIBILITIES

The chain of command should be responsible, in consultation with the patient and the patient’s medical support team and case managers, to validate that every MH member is adequately housed in accordance with these standards. Before a MH member is assigned/referred to housing (e.g. before transitioning from inpatient to outpatient status), the case manager shall provide consultation to the chain of command to ensure that the intended patient housing meets any special medical needs. If an assigned/referred housing unit for a member does not meet all the applicable standards in this document, the installation or garrison commander shall document the reason why the standards were not met (authority can be delegated), and the respective Military Service headquarters must be notified no later than one week after the MH member takes occupancy.

(1) For purposes of this provision, “serious physical disability” means: (a) any physiological disorder or condition or anatomical loss affecting one or more body systems which has lasted, or with reasonable certainly is expected to last, for a minimum period of 12 contiguous months, and which precluded the person with the disorder, condition or anatomical loss from unaided performance of at least one of the following major life activities: breathing, cognition, hearing, seeing, and age appropriate ability essential to bathing, dressing, eating, grooming, speaking, stairs use, toilet use, transferring, and walking; or (b) serious psychological disabilities, such as post-traumatic stress disorder. (This definition is based primary on 32 C.F.R. 199.2, the regulations for the CHAMPUS/TRICARE program.)

(2) For purposes of this provision, “direct result of armed conflict” means there was a definite casual relationship between the armed conflict and the resulting unfitting disability. The fact that a member may have incurred a disability during a period of war or in an area of armed conflict; or while participating in combat operations is not sufficient to support this finding. Armed conflict includes a war, expedition, occupation of an area or territory, battle, skirmish, raid, invasion, rebellion, insurrection, guerrilla action, riot, or any other action in which Service members are engaged with a hostile or belligerent nation, faction, force, or terrorists. Armed conflict may also
include such situations as incidents involving a member while interned as a prisoner of war or while detained against his or her will in custody of a hostile or belligerent force or while escaping or attempting to escape from such confinement, prisoner of war, or detained status. (This definition is based on DoD 1332.38, Physical Disability Evaluation, paragraph E3.P5.2.2.1 and E3.P5.1.2)

6. ASSIGNMENT

As a general rule, unless dictated otherwise by special requirements, MH personnel shall be assigned/referred to housing that exceeds or meets the applicable quality standards and that: (a) is appropriate for their expected duration of their treatment, (b) supports a non-medical attendant, if authorized, (c) supports accompaniment by their dependents when desired and not incompatible with their treatment, and (d) is appropriate for their pay grade (e.g., configuration and size). Note that from a housing assignment/referral perspective, an authorized non-medical attendant shall be treated like a dependent, e.g., if no other acceptable accommodations are available, a single MH member with an authorized non-medical attendant shall be eligible for temporary assignment to family housing.

For example, MH personnel (whether single or married) with an authorized non-medical attendant and facing a long rehabilitation period should not be housed in a one-room lodging unit, but instead be provided with a lodging unit with a minimum of two bedrooms with a kitchen and living room (e.g. PCS lodging) or family housing (DoD-owned or privatized). When eligible for DoD-owned housing, MH personnel shall be included as part of “Priority 1”, as defined by DoD 4165.63M, DoD Housing Management Manual. This referral priority should also apply to privatized or long-term leased (e.g. section 801) housing or lodging provided the referral is consistent with the privatized project’s operating agreement.

If appropriate housing is not available on the installation on which the member is receiving care, or at nearby military installations, and the service member does not reside on a privatized-owned or rented home, MH personnel should be housed off the installation in private sector accommodations that are appropriate for their expected duration of treatment, dependency status (at their treatment location), and pay grade-unless dictated otherwise by special medical requirements.

7. BASELINE STANDARDS

Condition
All MH personnel housing must be in good overall condition with no major problems with any of the building systems, i.e., all are working properly and not at risk of imminent failure or malfunction. Building systems include but are not limited to roof, exterior walls, foundation, doors and windows, interior finishes, plumbing, lighting, electrical, life and fire safety, and heating-ventilation-and air-conditioning (HVAC). It is important that MH personnel be able to adequately control the temperature in their housing units. There shall be no mold, exposed lead-based paint, unsealed asbestos, inadequate air circulation, or any other environmental/safety/health hazard.
Kitchens
Kitchens are an important quality of life feature for MH personnel who face long rehabilitation periods, especially those with authorized non-medical attendants. Accordingly, kitchens shall be provided that exceed or meet exiting applicable standards for the type of accommodations provided (unaccompanied housing, lodging, or family housing).

Laundry Facilities
Laundry facilities shall be provided as definite by the type of housing (unaccompanied personnel housing, lodging, or family housing), or as applicable based on medical condition. If an assigned/referred housing unit only has laundry equipment hook-ups, a residential-quality clothes washer and a dryer should be provided as loaned furnishings.

Furnishings
Provide loaned furnishings as appropriate.

Electric Equipment
Generally, a television with cable/satellite service, internet service, and a television with local service shall be provided in each MH member’s housing unit. If a MH member is unable to bring their personal electronic equipment to their assigned/referred housing, and they face a long rehabilitation period, efforts should be made to provide additional electronic devices such as VRC/DVD player, stereo, computer with printer, and video game player. If the internet service is hard-wired, consideration should also be given to providing WIFI and laptop computer.

Housekeeping and Pest Management
MH personnel housing shall be kept free of pests and litter, and trash containers shall be emptied on an appropriate cycle.

Landscaping, Grounds Maintenance, and Parking
Parking areas, turf, and grounds shall be well-maintained, attractive and litter-free. The number of parking spaces shall be adequate to support expected occupancy. Snow and ice shall be removed promptly from walkways and parking areas to ensure safety and prevent injuries.

Physical Security
MH member accommodations shall be provided with appropriate physical security measures, including required lighting levels inside and outside (parking and walkways).

Building Maintenance and Housekeeping Requests
An effective preventive maintenance program shall be in place for MH personnel housing. Also, installations shall have a mechanism where MH personnel can request building maintenance and housekeeping services.
8. SPECIAL MEDICAL REQUIREMENTS

Many MH members will have certain medical conditions that result in various functional limitations. For these members, it is essential that special accommodations and services be provided as an integral part of their medical treatment plan as determined by the primary care physician, patient, and chain of command. Some of these limitations will be permanent, but many others will change during recovery and rehabilitation, which may eliminate the need for certain special accommodations or services.

Accessibility
For members who have accessibility requirements, accommodations must, at a minimum, comply with the most current standards issues by the Department of Defense under the Architectural Barriers Act of 1968, as amended. Note that accessibility also applies to the route and distance (e.g., walkways, ramps, parking) that a MH member must travel from their housing accommodations to reach their medical treatment center, dining facility, or other support services. For all other MH member accommodations, consideration should be given to incorporating “universal design” principles (e.g., lever type door handles in lieu of knobs).

Cognition
When required, MH member accommodations shall address the range of cognitive limitations that result from conditions such as Traumatic Brain Injury (TBI), Post Traumatic Stress Disorder (PTSD), and stroke. For example, sometimes complex geometric patterns on rugs, linen, or flooring can cause disorientation in these patients. Flooring and carpet with a subtle texture or pattern often helps with depth perception.

Visual and Auditory
Necessary features for visually and auditory impaired MH personnel shall be provided in accordance with the DoD standards.

Burns
MH personnel recovering from serious burns or nerve/neurological injuries are very sensitive to hot water, so consideration shall be given to installing special devices to regulate the water temperature.

Other Physical Limitations
Standards accessibility guidelines generally are adequate for ambulatory impaired MH personnel except in special cases such as when they are in a wheelchair with one or both legs in an extended position. In this case, normal wheelchairs clearances and turning circles may be inadequate. Even with the loss of both legs, MH personnel can be fully ambulatory with their prostheses, but still need accessible accommodations when they are in a wheelchair (such as when they have to use the bathroom at night).
For physically impaired MH personnel, bathrooms are the major source of concern. Suggestions for improvement include doors that open to the outside, additional clearance for wheelchairs, and longer hoses on shower nozzles. For MH personnel with loss of or injury to arms and hands, accommodations shall be provided with either a bidet bowl or an electrically powered ‘add-on bidet’ that replaces a normal toilet seat to rinse the peritoneal area.

**Housekeeping**
If a MH member without a non-medical attendance would have difficulty with basic housekeeping, it may be necessary to assign them to housing where these services are included with the accommodations, such as lodging, or to provide the required services for their housing unit such as by contract. Provide disposal of bio-hazard waste as required.

**Laundry Services and Equipment**
Special laundry service may also have to be provided for MH personnel who have a medical condition that requires their linen, towels, and clothing to be disinfected. In accessible units with a laundry, the clothes washer and dryer should be accessible from a wheelchair.

**Kitchens and Food Service**
For certain medical conditions, a kitchen or kitchenette may be prescribed, either in the unit or located within the same building. On the other hand, there could be special dietary requirements that would be most effective handled by a hospital or installation dining facility. Note that ranges and cook tops in accessible units shall have control knobs on the front for easy wheelchair access.

**Furnishing**
Accessible rooms need to have accessible furnishings, such as computer desks and higher beds.

**Parking**
MH personnel with mobility impairments shall have first priority in assignment and use if all parking spaces under the control of the facility, beginning with those spaces closest to the entrances and exits used by MH personnel. The next level of priority shall be extended to individuals who transport MH personnel with these types of disabilities. If possible, spaces shall be provided for pickup and drop-off in additional to daily and overnight use. The number of spaces shall be adequate to support the expected occupancy, including the required number of accessible spaces. Additional spaces shall be provided on an expedited basis to meet unforeseen needs.

**Proximity to Outpatient Treatment Center and Other Services**
MH personnel may require housing in close proximity to a medical treatment facility for reasons related to their disabilities or medical conditions. For example, there may be a substantial risk of unanticipated urgent medical situations that require prompt attention by caregivers, or the frequency and duration of routine medical treatment may dictate
the need for housing nearby. Transportation must be provided for MH personnel who do not have their own means to transport (e.g., transportation by a non-medical attendant with a POV) and who are not housed adjacent to their outpatient medical treatment facilities (whether on or off the installation). This transportation must be adequate to ensure timely access to treatment, dining facilities, and other important support facilities such as exchanges and commissaries.

9. **INSPECTIONS**

The Military Services shall conduct periodic inspections of MH personnel housing in accordance with these standards, at least on an annual basis. Inspections of privatized housing and lodging containing MH personnel shall be accomplished only with prior coordination with the project partner or owner. In the event a deficiency is identified, the commander of such facility shall submit to the Secretary of the Military Department a detailed plan to correct the deficiency; and the commander shall re-inspect such facilities not less often than once every 180 days until the deficiency is corrected.

10. **FEEDBACK AND UPDATES**

The Military Services shall implement periodic and comprehensive follow-up programs using surveys, one-on-one interviews, focus groups, and town-hall meetings to learn how to improve MH personnel housing and related amenities/services. Such feedback should be solicited from the MH members, their families and friends, care-givers, chain of command, and housing owners/operators. Summaries of the feedback with resulting changes should be provided on a periodic basis on OSD, in conjunction with any other reporting requirements.

11. **IMPLEMENTATION**

The Military Departments have the authority to issue supplemental instructions to provide for unique requirements within their respective organizations provided they conform to the basic policy guidance in this document.
Appendix 3 Reports

Inspection reports were provided to the incumbent of the offices listed below or their designated representatives on the date indicated:

<table>
<thead>
<tr>
<th>Office</th>
<th>Date of Report</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commander, Warrior in Transition Battalion-Europe</td>
<td>28 AUG 14</td>
</tr>
<tr>
<td>Commander, A Company Warrior in Transition Unit</td>
<td>24 JUL 14</td>
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<tr>
<td>Commander, B Company Warrior in Transition Unit</td>
<td>24 JUL 14</td>
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<tr>
<td>Commander, USAG Baumholder</td>
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<td>Commander, USAG Kaiserslatern</td>
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<tr>
<td>Commander, USAG Vicenza</td>
<td>24 JUL 14</td>
</tr>
<tr>
<td>Acronym</td>
<td>Definition</td>
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<td>---------</td>
<td>------------------------------------------------</td>
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<tr>
<td>ADA</td>
<td>Americans with Disabilities Act</td>
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<tr>
<td>AFH</td>
<td>Army/Military Family Housing</td>
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<td>ALARACT</td>
<td>All Army Activities</td>
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<tr>
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<tr>
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<td>Freedom of Information Act</td>
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<td>Installation Management Command</td>
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<td>MEDCOM</td>
<td>Medical Command</td>
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<tr>
<td>MH</td>
<td>Medical Hold</td>
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<tr>
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<td>Military Treatment Facility</td>
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<tr>
<td>NAF</td>
<td>Non-Appropriated Funds</td>
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<td>NAFI</td>
<td>Non-Appropriated Funds Instrumental</td>
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<td>National Fire Protection Association</td>
</tr>
<tr>
<td>OSD</td>
<td>Office of Secretary of Defense</td>
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<tr>
<td>PCS</td>
<td>Permanent Change Station</td>
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<td>Privately Owned Vehicle</td>
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<td>PTSD</td>
<td>Post Traumatic Stress Disorder</td>
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<td>RMC</td>
<td>Regional Medical Command</td>
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<tr>
<td>SOP</td>
<td>Standing Operating Procedures</td>
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<tr>
<td>TBI</td>
<td>Traumatic Brain Injury</td>
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<td>TDY</td>
<td>Temporary Duty</td>
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<td>Unaccompanied Personnel Housing</td>
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<td>USAMEDCOM</td>
<td>United States Army Medical Command</td>
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<td>WII</td>
<td>Wounded, Ill, and Injured</td>
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<td>Warrior Transition Battalion Europe</td>
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<tr>
<td>WTU</td>
<td>Warrior Transition Unit</td>
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Appendix 5 References

Army Regulation 420-1, Army Facilities Management, 12 February 2008


DA PAM 385-26, The Army Electrical Safety Program, 1 February 2013

ALARACT 295/2008, 9 December 08, Subject: MOD 1 to ALARACT 162/2008

ALARACT 162/2008, 3 July 2008, Subject: Inspection of Armed Forces Facilities Used to House Recovering Service Members Assigned to Army Warrior Transition Units

Memorandum, Deputy Secretary of Defense, 18 September 2007, subject: DoD Housing Inspection Standards for Medical Hold and Holdover Personnel

Memorandum, Deputy Chief of Staff, G-1, HQDA, 18 June 2007, subject: Housing Prioritization for Warriors in Transition


Memorandum, A Company, Warrior Transition Battalion, Europe Regional Medical Command, 2 August 2013, subject: Alpha Company Warrior Transition Unit: Barracks Standard Operating Procedures (SOP)


