



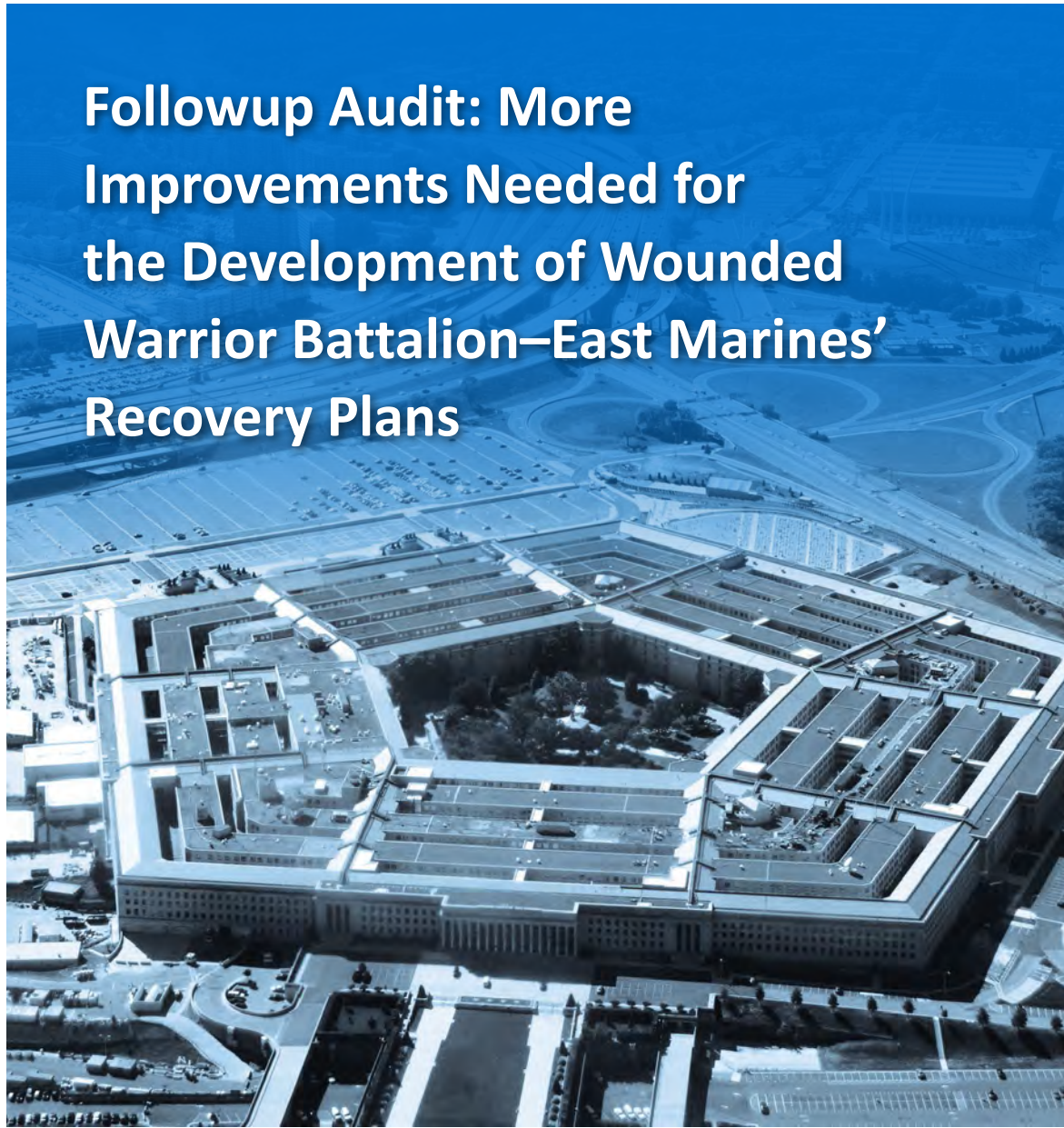
INSPECTOR GENERAL

U.S. Department of Defense

AUGUST 7, 2015



Followup Audit: More Improvements Needed for the Development of Wounded Warrior Battalion—East Marines' Recovery Plans



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Results in Brief

Followup Audit: More Improvements Needed for the Development of Wounded Warrior Battalion–East Marines' Recovery Plans

August 7, 2015

Objective

Our objective was to determine whether the United States Marine Corps Wounded Warrior Battalion–East (WWBn-E) officials promoted active participation of the recovering Service members when developing their Comprehensive Recovery Plans (CRPs) as agreed to in Recommendation C.1 of DoD OIG Report No. DODIG-2012-067 and whether these actions corrected the identified issues.

Finding

Wounded Warrior Regiment (WWR) officials did not fully implement the corrective actions as agreed to in Recommendation C.1 of DoD OIG Report No. DODIG-2012-067. Although the WWR officials improved the recovery care coordinator (RCC) program and developed CRPs, the revised training did not provide RCCs with the tools needed to ensure that recovering Marines had ownership of their plans and they had an ineffective quality assurance program. Specifically, we found that of the 40 selected CRPs:

- 1 did not include the recovering Marine in the development of the goals;
- 12 did not involve, or offer to involve, the recovering Marine's family or designated caregiver in the development of the plan;
- 14 did not establish all medical and long-term goals for the recovering Marine;

Finding (cont'd)

- 24 did not involve the recovering Marine in the development of action steps;
- 38 did not include the recovering Marine's entire recovery team in the development of the plan; and
- 40 were not signed by the RCC, the recovering Marine, and their family or designated caregiver.

This occurred because WWR officials did not clearly define roles and responsibilities to prepare CRPs, follow DoD Instruction 1300.24, or finalize the draft WWR Order P3100.1A. Additionally, the contracting officer and contracting officer's representative did not conduct contract surveillance for the WWR RCC contract as required by Federal and Defense Acquisition Regulations. As a result, recovering Marines continue to be at risk of not fulfilling their transition goals because they may not have had a complete CRP that focused on all relevant transitional goals and action steps.

Recommendations

We recommend that the Commanding Officer, WWR update the RCC training program as well as revise and finalize the WWR Order P3100.1A to comply with all DoD and Marine Corps policies and procedures. Additionally, we recommend the Director, Marine Corps Regional Contracting Office–National Capital Region verify that the WWR contracting officer and their representative performed and documented contract surveillance in accordance with the Federal and Defense Acquisition Regulations.

Management Comments and Our Response

The Office of the Director, Marine Corps Staff comments addressed all specifics of the recommendations, and no further comments are required. Please see the Recommendations Table on the back of this page.

Recommendations Table

Management	Recommendations Requiring Comment	No Additional Comments Required
Commanding Officer, Wounded Warrior Regiment		1
Director, Marine Corps Regional Contracting Office–National Capital Region		2



**INSPECTOR GENERAL
DEPARTMENT OF DEFENSE
4800 MARK CENTER DRIVE
ALEXANDRIA, VIRGINIA 22350-1500**

August 7, 2015

MEMORANDUM FOR COMMANDANT OF THE MARINE CORPS
ASSISTANT SECRETARY OF DEFENSE FOR HEALTH AFFAIRS
NAVY INSPECTOR GENERAL
MARINE CORPS INSPECTOR GENERAL

SUBJECT: Followup Audit: More Improvements Needed for the Development of
Wounded Warrior Battalion-East Marines' Recovery Plans
(Report No. DODIG-2015-159)

We are providing this report for your information and use. Wounded Warrior Regiment officials could not demonstrate that they fully implemented the corrective actions as agreed for Recommendation C.1 of DoD OIG Report No. DODIG-2012-067. Although officials revised the Recovery Care Coordinator training and quality assurance programs, they did not ensure that plans were developed with active participation by the recovering Marine or developed in accordance with DoD or Marine Corps policy and procedures. We conducted this audit in accordance with generally accepted government auditing standards.

We considered management comments on a draft of this report when preparing the final report. Comments from the Office of the Director, Marine Corps Staff, responding for the Commanding Officer, Wounded Warrior Regiment, and the Director, Marine Corps Regional Contracting Office-National Capital Region, addressed all specifics of the recommendations and conformed to the requirements of DoD Instruction 7650.03; therefore, we do not require additional comments.

We appreciate the courtesies extended to the staff. Please direct questions to me at (703) 604-8905 (DSN 664-8905).

A handwritten signature in black ink, reading "Amy J. Frontz", is positioned above the typed name.

Amy J. Frontz
Acting Deputy Inspector General
for Auditing

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Acronyms and Abbreviations

Introduction

Objective

Our objective was to determine whether the United States Marine Corps Wounded Warrior Battalion–East (WWBn-E) officials promoted active participation of the recovering Service members when developing their Comprehensive Recovery Plans (CRPs) as agreed to in Recommendation C.1 of DoD OIG Report No. DODIG-2012-067.¹ We also determined whether the corrective actions mitigated the identified issues. See the Appendix for a discussion of the scope and methodology and prior audit coverage.

Background

The National Defense Authorization Act for Fiscal Year 2008² requires that the Secretary of Defense and the Secretary of Veterans Affairs to develop and implement a comprehensive policy on improvements to the care, management, and transition of the recovering Marine.³ It also requires the development of CRPs for each recovering Marine.

Each Service has its own Wounded Warrior Program and must implement the requirements established in the Act and DoD Instruction 1300.24.⁴ The Marine Corps developed a draft WWR Order P3100.1A⁵ to provide supplemental guidance for its Wounded Warrior/Recovery Care Coordinator (RCC) program.

¹ DoD OIG Report No. DODIG-2012-067, “Assessment of DoD Wounded Warrior Matters–Camp Lejeune,” March 30, 2012.

² National Defense Authorization Act for Fiscal Year 2008, Public Law 110-181, Section 1611, “Comprehensive Policy on Improvements to Care, Management, and Transition of Recovering Service Members.”

³ WWR officials and guidance refer to wounded, ill, and injured Marines as recovering Service members. However, for the purposes of the report, we will refer to them as recovering Marines.

⁴ DoD Instruction 1300.24, “Recovery Coordination Program,” December 1, 2009.

⁵ Draft WWR Order P3100.1A, “Recovery Care Coordinator Program Procedural Manual,” provided to us on April 30, 2014, but was not signed or finalized. WWR officials stated the Draft WWR Order 3100.1A serves as a revision to Wounded Warrior Regiment Order 3000.1, “Standard Operating Procedures (SOP) for the Wounded Warrior Regiment (WWR) Recovery Care Coordinator (RCC) Program,” dated February 23, 2010. According to RCCs, they used Order P3100.1A as the main guidance to initiate the program.

U.S. Marine Corps Wounded Warrior Program

In April 2007, the Marine Corps established the Wounded Warrior Regiment (WWR) to assist wounded, ill, and injured Marines, sailors who support Marine units, and their families throughout the recovery process. WWR Headquarters is located at Marine Corps Base Quantico, Virginia and coordinates the operation of two Wounded Warrior Battalions:

- WWBn-E—headquartered at Marine Corps Base Camp Lejeune, North Carolina; and
- Wounded Warrior Battalion–West—headquartered at Marine Corps Base Camp Pendleton, California.

The two battalions have multiple detachments around the world that include locations at medical treatment facilities and the Department of Veterans Affairs (Poly-Trauma) Medical Centers. See Figure 1 below for illustration of WWR locations.

Figure 1. WWR East and West Battalion Locations



Source: Wounded Warrior Regiment

The recovering Marines in the WWR may have catastrophic medical conditions or require a high level of coordinated and integrated clinical and other recovery care support. The recovering Marines may be recovering from traumatic events such as improvised explosive device blasts, gunshots, chronic unresolved conditions, and training or vehicle accidents. This means that they may suffer from severe injuries that range from traumatic brain injury, amputation, auditory and visual impairments, spinal cord injuries, and post-traumatic stress disorder.

Recovery Care Coordination Program

Each Marine in the WWR is assigned to a designated recovery team. According to WWR officials, they began contracting for all services required for the RCC program during October 2010. The contract provides support for both the East and West Battalions in accordance with DoD and Marine Corps policies and procedures. The contracting officer for the WWR was from the Marine Corps Regional Contracting Office–National Capital Region, located at Marine Corps Base Quantico, Virginia. The contracting officer’s representative (COR) was from the WWR Headquarters also located at Marine Corps Base Quantico, Virginia. The scope of the audit covers WWR contracts for RCC services between FY 2012 and FY 2014. The contracting office awarded the initial service contract in April 2012 and two sole-source, bridge contracts to the original contractor.

In October 2014, the contracting officer awarded a new contract with a base year and 2 option years. See Table 1 for the list of contracts and periods of performance.

Table 1. Listing of WWR contracts

Contract No.	Period of Performance
M00264-12-C-0004	April 3, 2012, through June 30, 2013
M00264-13-C-0021	July 1, 2013, through May 24, 2014
M00264-14-C-1009	May 25, 2014, through November 24, 2014
M00264-15-C-1000	October 29, 2014, through October 28, 2015

The recovery team is critical to the recovery of recovering Marine’s and assists them during their transition back to their unit or to civilian life. The recovery team members consist of a:

- RCC;
- Section Leader;
- Medical Case Manager; and
- Primary Care Manager.

The RCC serves as the civilian point of contact for the recovering Marine to help them define and meet their individual goals for the three phases of recovery: recovery, rehabilitation, and reintegration. The RCC prepares the CRP to define

the transitional goals for the recovering Marine and their family. The RCC uses information provided by the recovery team, recovering Marine, and their family or designated caregiver(s).⁶ Specifically, the CRP:

- focuses on the immediate needs of the recovering Marine;
- establishes transition goals for return to duty or civilian life; and
- defines action steps for the goals that encourage continued mental, physical, and emotional growth.

The CRP serves as a framework to address both recovering Marine and the family's needs that may include employment, education, assistive technology, benefits and entitlements or housing. Currently, Marine Corps officials use an electronic system to document and update the CRPs. The CRPs are stored electronically in the Recovery Care Program–Support Solution (RCP-SS).⁷



Figure 2. Recovering Service Member
Source: Wounded Warrior Regiment

⁶ DoD Instruction 1300.24 states that recovering Marines who do not have or want immediate families (spouse or children) to support them with their recovery are permitted to designate another individual as a caregiver. The caregiver may include a friend, fiancée or fiancé, co-worker, and family member that is not a military dependent.

⁷ The DoD Wounded Warrior Program office manages RCP-SS and the Services use RCP-SS as a tool that stores the CRP.

RCCs develop the CRP from information obtained from the comprehensive needs assessment that identifies the needs of the recovering Marine and their family. The recovery team documents this assessment in the Marine Corps Wounded Ill/Injured Tracking System (MCWIITS). This system allows the recovery team supporting the recovering Marine's injury, illness, and nonmedical recovery to electronically share notes and assess a Marine's recovery and rehabilitation.

Review of Internal Controls

DoD Instruction 5010.40, "Managers' Internal Control Program Procedures," May 30, 2013, requires DoD organizations to implement a comprehensive system of internal controls that provides reasonable assurance that programs are operating as intended and to evaluate the effectiveness of the controls. We identified internal control weaknesses in the implementation and contract oversight of the Marine Corps RCC program. RCCs did not prepare CRPs in accordance with DoD and Marine Corps policies and procedures. In addition, the contracting officers did not develop a quality assurance surveillance plan for the base and first bridge contracts or ensure that the COR performed contract surveillance in accordance with Federal and DoD contracting requirements. We will provide a copy of the report to senior officials responsible for internal controls at the Marine Corps.

Finding

More Improvements Needed to Ensure Active Participation and Ownership of Comprehensive Recovery Plans

WWR officials did not fully implement the corrective actions as agreed to in Recommendation C.1 of DoD OIG Report No. DODIG-2012-067. Although the WWR officials improved the RCC program and developed CRPs, the revised training did not provide RCCs with the tools needed to ensure that recovering Marines had ownership of their plans, and they had an ineffective quality assurance program. Specifically, we found that of the 40 selected⁸ CRPs:

- 1 did not include the recovering Marine in the development of the goals;
- 12 did not involve, or offer to involve, the recovering Marine's family or designated caregiver in the development of the plan;
- 14 did not establish all medical and long-term goals of the recovering Marine;
- 24 did not involve the recovering Marine in the development of action steps;
- 38 did not include the recovering Marine's entire recovery team in the development of the plan; and
- 40 were not signed by the RCC, the recovering Marine, and their family or designated caregivers.

This occurred because WWR officials did not clearly define roles and responsibilities to prepare CRPs, follow DoD Instruction 1300.24, or finalize the draft WWR Order P3100.1A. Additionally, the contracting officer and the COR did not conduct contract surveillance for the WWR RCC contract as required by the Federal Acquisition Regulation (FAR) and Defense Federal Acquisition Regulation Supplement (DFARS). As a result, recovering Marines continue to be at risk of not fulfilling their transition goals because they may not have had a complete CRP that focused on all relevant transitional goals and action steps. This also puts the WWR RCC program at risk for not meeting its intended goals and objectives.

⁸ We selected 40 CRPs prepared by all 17 RCCs from three locations: Marine Corps Base Camp Lejeune, North Carolina; Marine Corps Base Quantico, Virginia; and Walter Reed National Military Medical Center, Bethesda, Maryland.

Prior Report Summary

Observation C of the DoD OIG Report No. DODIG-2012-067 identified three challenges that WWBn-E officials should address to help ensure the most successful and effective support for the care, healing, and transition of recovering Marines. The three challenges were:

- C.1. Warrior's Comprehensive Recovery Plans⁹
- C.2. Staff Training in Support of Warrior's Recovery and Transition
- C.3. Abuse of Illegal Drugs and Prescribed Medications

The report further stated that if officials address these challenges, they will increase the effectiveness of WWBn-E leadership and staff who provide quality and timely care and services that facilitate warrior recovery and transition. We followed up on Observation C.1, "Warrior's Comprehensive Recovery Plans."



Figure 3. No Man Left Behind Monument at Wounded Warrior Battalions
Source: Photo By: Cpl. Shaltiel Dominguez

⁹ The prior report referred to CRPs as comprehensive transition plans.

Lack of Ownership for Comprehensive Recovery Plans

The prior report stated that wounded warriors, also called recovering Marines, or Marines in this case, did not appear to have ownership of their CRPs as a tool to help them transition from recovery and rehabilitation to community reintegration. Consequently, recovering Marines may have been at risk of not accessing the full benefits of tools and resources available to help them fulfill their transition goals.

The CRP was recently implemented within the WWBn-E and was used by the RCCs as required by WWR regulations; however, the:

- majority of recovering Marines did not associate the name of the plan with the ongoing work that the RCCs had done to guide them through the process to identify their goals and job interests as part of their personal recovery and transition plan;
- platoon leaders were not committed to, or engaged in, the comprehensive transition plan process; and
- recovering Marines did not appear to own, or engage in, their CRP but rather the RCCs seemed to complete them for the Marine.

As a result, recovering Marines did not fully understand the relationship between the plan and their recovery goals and how the plan could affect their transition.



Figure 4. Recovering Marine
Source: Wounded Warrior Regiment

Recommendation and Agreed-Upon Actions

Recommendation C.1 stated that the Commander, WWBn-E should develop procedures and training for recovering Marines to ensure that they are active participants in the development of their CRP and that the plan is individually tailored and effective in fulfilling their transition goals.

The Commanding Officer for WWBn-E concurred with the recommendation in the final report and explained that the WWR:

- improved usage and awareness of the CRP;
- ensured that the CRP was written in the recovering Marine's own words to encourage buy-in and follow-through;
- implemented a quality assurance program to ensure consistent CRP development and documentation; and
- implemented a robust RCC training program to provide RCCs with the tools they need to properly document a recovering Marine's needs, goals, and required actions in the CRP since April 2011.

Since the prior report, WWR centralized the quality assurance and training programs for both the East and West Battalions. The quality assurance program now establishes activities, processes, and procedures for the CRP. The training program also provides RCCs with the tools to assist the recovering Marines during their recovery. Additionally, WWR officials decided to revise the RCC Service specific training.

Agreed-Upon Actions Not Fully Demonstrated

WWR officials improved the RCC program by actively promoting the CRP and its intended purpose. However, WWR officials did not:

- provide effective RCC training to clearly define roles and responsibilities, require RCCs to follow DoD Instruction 1300.24 when they prepared CRPs or finalized the draft WWR Order P3100.1A; or
- implement an effective QA program to verify whether RCCs complied with applicable guidance.

WWR officials improved the RCC program by actively promoting the CRP and its intended purpose.

Furthermore, the Marine Corps contracting officer and COR did not comply with surveillance requirements for service contracts.

Improved CRP Awareness

WWR officials improved the active promotion of the CRP. WWR officials provided factsheets to recovering Marines and their families that described the usage and promoted awareness of the CRP. The factsheets explain how each CRP:

- is tailored for each recovering Marines' unique situation;
- outlines the recovering Marine's goals regardless of whether the individual wants to return to duty or back to civilian life;
- serves as a framework to address the individual needs of recovering Marine's and their families through the recovery, rehabilitation, and reintegration phases; and
- transitions to the Department of Veterans Affairs if the recovering Marine leaves the military.

As a result, recovering Marines and their families or designated caregiver had a better understanding of the relationship between the CRP and their recovery goals and how the plan affected their transition back to their unit or civilian life.



Figure 5. Recovering Marine Assisting a Child
Source: Wounded Warrior Regiment

Training Still Did Not Provide RCCs With Necessary Tools

WWR officials did not ensure that RCCs received training to provide the necessary tools to properly document a recovering Marine's needs, goals, and required actions in the CRP. Specifically, RCCs did not always include all necessary recovery team members in the development of the CRPs and ensure that recovering Marines had buy-in and follow-through for their plans as required by DoD Instruction 1300.24. WWR officials also did not document who received the RCC training.

WWR officials did not ensure that RCCs received training to provide the necessary tools...

Improvements Needed for the Development of CRPs

For 38 of 40 sampled CRPs, RCCs did not include all necessary recovery team members when they developed the CRP. DoD Instruction 1300.24 states that recovery team members shall collaborate with the RCC and other recovery team members to:

- develop the CRP;
- evaluate the CRPs effectiveness in meeting the recovering Marine's goals; and
- update the CRP as necessary to accommodate the recovering Marine's changing objectives, abilities, and recovery status.

According to the draft WWR Order P3100.1A, the recovery team typically consists of the following members.

- RCC;
- section leader;
- medical case manager; and
- primary care manager.

There was generally no evidence that RCC included the entire recovery team and recovering Marine's family or designated caregiver in the preparation of the CRP.

However, there was generally no evidence that RCC included the entire recovery team and recovering Marine's family or designated caregiver in the preparation of the CRP.

We also found through interviews with recovering Marines that recovery team members such as the medical case manager and section leader were not always involved with preparation of the CRPs.

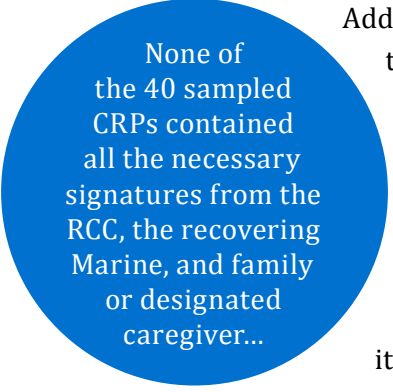
Additionally, RCC officials stated that they used the DoD and Marine Corps guidance to develop and coordinate the CRP. However, the RCC Service-specific

course material and the draft WWR Order P3100.1A did not clearly define the roles and responsibilities of the recovery team, recovering Marines and their families or designated caregiver for the preparation of the CRP.

It is very important to involve the entire recovery team to develop the CRP. This will ensure that the CRP is complete, accurate, and that the recovering Marine has a successful transition back to either their unit or civilian life. WWR officials should finalize and release the draft WWR Order P3100.1A and ensure it requires RCCs to involve all necessary individuals when they prepare the CRPs as required by DoD Instruction 1300.24 and establishes roles and responsibilities for recovery team members. WWR officials should also ensure that the RCC training emphasizes the involvement of the entire recovery team as required.

No Evidence of Buy-In for CRPs

Although some recovering Marines indicated that they had ownership of their CRP, they generally were not involved with the development of the actions steps to facilitate commitment and follow-through. For example, the RCC would include the recovering Marines when writing their goals, but would not include them when drafting the action steps to accomplish the goals. One recovering Marine did not understand how completing those steps would assist him in accomplishing his goals. Also, several recovering Marines stated that their RCC never updated their goals when they changed their priorities. For example, one recovering Marine explained that he decided to go to culinary school; however, his RCC did not update his CRP to reflect his new goal.



None of the 40 sampled CRPs contained all the necessary signatures from the RCC, the recovering Marine, and family or designated caregiver...

Additionally, none of the 40 sampled CRPs contained all the necessary signatures from the RCC, the recovering Marine, and family or designated caregiver when it was initially prepared. DoD Instruction 1300.24 states that the recovering Marines and their families or designated caregiver, and the RCC shall review the CRP and sign the document to demonstrate their understanding of the plan and commitment to its implementation.

For example, none of the recovering Marines signed the CRP. We found that the RCCs did not require recovering Marines to sign the plans for the following reasons.

- RCCs were unaware of the requirement to have the CRPs signed.
- RCCs believed that they “digitally signed” the CRPs within RCP-SS, when in fact they were merely acknowledging the date in which they made a change to the plan.
- One RCC believed that recovering Marines did not have to sign the CRP until they completed their assignment at the WWBn-E.

We also found that a few RCCs provided signed copies of CRPs. However, these plans were signed by the recovering Marine days before our site visit and neither WWR officials nor the RCCs could provide any prior signed versions of the plan.

As a result, WWR officials had no assurance that recovering Marines took ownership of their CRPs to encourage “buy-in” and follow-through. This occurred because the draft WWR Order P3100.1A and the Service-specific training course material did not require RCCs to sign the CRP, in addition to the recovering Marines and their families or designated caregiver. RCCs should sign CRPs to comply with DoD policy and also upload those documents within RCP-SS for retention purposes. WWR officials should revise and finalize the draft WWR Order P3100.1A to ensure that it requires all necessary parties sign the CRP to encourage commitment and follow-through as required by DoD Instruction 1300.24. WWR officials should also ensure that the RCC training emphasizes the required signatures and upload a copy of the CRP in the RCP-SS.

No Evidence RCCs Attended Training

WWR officials were unable to demonstrate that RCCs received the revised Marine Corps training in response to Recommendation C.1 of DoD OIG Report No. DODIG-2012-067. In fact, WWR officials did not issue course completion certificates or maintain training sign-in sheets. WWR officials stated that historically they did not issue completion certificates for this training course. Officials further stated that the sign-in sheets were no longer available. According to DoD Instruction 1300.24, WWR officials are required to provide a certificate of completion to those who have attended the training and forward the roster of attendees’ names to the Office of Wounded Warrior Care and Transition Policy.

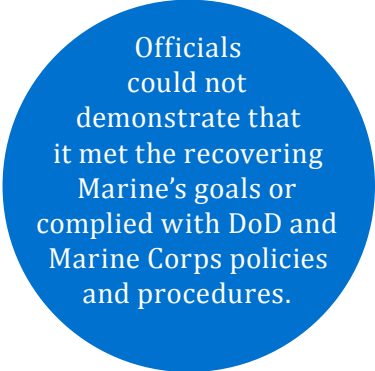
WWR officials were unable to demonstrate that RCCs received the revised Marine Corps training in response to Recommendation C.1 of DoD OIG Report No. DODIG-2012-067.

Since WWR officials did not maintain training course sign-in rosters or issue training completion certificates, there was no evidence that the RCC completed the course as required by DoD Instruction 1300.24. WWR officials should update the RCC training program to incorporate all applicable requirements from DoD Instruction and WWR Order P3100.1A for preparing CRPs that include clearly defining RCC roles and responsibilities to properly document a recovering Marine's needs, goals, and required actions. WWR officials should document and maintain training records for all RCC-related training courses as evidence of completion and forward those completion certificates to the DoD Officer of Wounded Warrior Care and Transition Policy as required by the DoD Instruction 1300.24.

Ineffective Quality Assurance Program

WWR officials developed a quality assurance program for RCCs to ensure consistent CRP development and documentation as agreed to in Recommendation C.1. However, officials could not demonstrate that it met the recovering Marine's goals or complied with DoD and Marine Corps policies and procedures. Specifically, we found that:

- CRPs were missing all relevant medical and nonmedical goals;
- RCCs did not include the recovering Marines in the development of the actions steps; and
- quality reviews were not adequate to determine whether the CRP actually complied with all policies and procedures.



Officials could not demonstrate that it met the recovering Marine's goals or complied with DoD and Marine Corps policies and procedures.

We found several inconsistencies and examples of noncompliance with DoD Instruction 1300.24. See Table 2 on the next page for a summary of the discrepancies we identified in our sample of 40 CRPS from WWBn-E.

Table 2. Summary of CRP Discrepancies Identified

Marine Corps Locations Visited	Total RMs	RMs Not Involved With Action Steps	Not all Recovery Team Members Involved With Creating the CRP	Did Not Involve the RM's Family or Designated Caregiver in the CRP Development	No Evidence of RCC and RM Buy-in of CRP
Camp Lejeune	26	17	26	5	26
Walter Reed	13	7	11	7	13
Quantico	1	0	1	0	1
Total	40	24	38	12	40

Legend

CRP Comprehensive Recovery Plan
RCC Recovering Care Coordinator
RM Recovering Marine

CRPs Did Not Include all Relevant Goals

We found that 14 of the 40 sampled CRPs did not have all medical or long-term goals in the plan. DoD Instruction 1300.24 requires a patient-centered plan that includes medical and nonmedical goals for recovery, rehabilitation, and transition. The goals can also include personal and professional goals and should identify services and resources needed to achieve the identified goals. However, we found the following.

- One RCC stated that the CRP was not sufficient because it did not include any medical-related goals. He further said that if a recovering Marine, suffering from a leg injury, decided to set a goal of 1000 steps per day, he would not include this medical-related goal in the plan.
- Several recovering Marines stated that their CRP did not reflect their long-term vision. They explained that these goals were not included in the CRP such as buying a home, pursuing a particular career, or relocating to a new area.

Several recovering Marines stated that their CRP did not reflect their long-term vision.

WWR officials stated that RCCs did not include medical goals in the CRP because they believed that RCP-SS could not contain medical information. According to the RCP-SS Privacy Impact Assessment, the system collects and stores limited injury and illness-specific medical information.

WWR officials should provide guidance to RCCs that explains the parameters of the limited injury and illness-specific medical information that can be included in RCP-SS. WWR officials should also ensure that RCCs make timely updates to the recovering Marines' CRP to reflect their current goals and priorities. This should allow the RCCs to develop accurate, complete, and current CRPs that include any relevant medical, nonmedical, personal, and professional goals as required by DoD Instruction 1300.24.



Figure 6. Recovering Marine Learning to Walk with His Prosthetics
Source: Wounded Warrior Regiment

Need for Marine Involvement for Action Steps

Out of the 40 sampled recovering Marines, 24 stated that they were not involved with the development of action steps for goals. DoD Instruction 1300.24 requires recovering Marines, their family or designated caregiver, and the recovery team develop action steps to accomplish goals that are:

- specific;
- measurable; and
- achievable within agreed-upon timeframes.

However, the 24 recovering Marines explained that they worked with RCCs to identify needs and goals; however, action steps were solely developed by RCCs without their input. Several RCCs also explained that they were responsible for creating action steps for the CRP. One RCC stated that the recovering Marine informs them of their goals and they tell the Marine how to achieve their goals.

Ineffective Quality Assurance Reviews

Although contractor personnel conducted reviews of the CRPs, the contractor did not conduct meaningful reviews or consider whether the plans complied with DoD and draft WWR policy requirements. The WWR RCC service contract states that the contractor shall implement a quality control program to verify that RCCs complied with:

- National Defense Authorization Act for FY 2008;
- DoD Instruction 1300.24; and
- Marine Corps policies and procedures.

Contractor personnel performed quarterly reviews to ensure that RCCs developed consistent CRP development and documentation for WWBn-E. However, these reviews focused on goal development and avoiding grammatical errors rather than ensure that the CRP met all the needs or priorities of the recovering Marine. RCCs stated that the current focus is on passing quarterly audits (quality reviews) rather than meeting the goals of the recovering Marine. Further, a RCC stated that the CRP is a “check the box process,” which does not focus on outcomes or benefit the recovering Marines. This RCC also expressed concern that they would fail the audit (quality review) if they tailored the CRP to the recovering Marine.

RCCs stated that the current focus is on passing quarterly audits (quality reviews) rather than meeting the goals of the recovering Marine.

The quarterly reviews and contractor personnel could not adequately explain how the CRPs were evaluated to ensure that the plans were:

- individually tailored;
- effectively fulfilled the recovering Marine's transition goals; or
- complied with DoD and Marine Corps policies and procedures.

As a result, WWR officials did not meet the intent of Recommendation C.1, as agreed. It is vital to have an effective quality assurance program for Marines to successfully transition back to their unit or civilian life. WWR officials should establish an effective quality assurance program to verify whether RCCs develop and document CRPs in accordance with DoD Instruction 1300.24 and Marine Corps guidance.

No Contract Surveillance for the WWR RCC Program

The contracting officer and designated COR for the WWR RCC contract did not monitor the contractor's performance.¹⁰ Specifically, the contracting officer:

- could not provide a Quality Assurance Surveillance Plan (QASP) for the original and first bridge contracts;
- provided a QASP for the second bridge contract, but did not develop a contract specific QASP as required by FAR 46.401¹¹ and DFARS 246.401.¹² For example, the QASP did not identify specific times or locations work was to be performed or specify the deliverables and services rendered that required surveillance; and
- stated that she relied on the COR to monitor the contract surveillance.

Contracting officer and designated COR for the WWR RCC contract did not monitor the contractor's performance.

¹⁰ We reviewed a nonstatistical sample of open CRPs from January 2012 through April 2014. Therefore, we did not review the new contract (M00264-15-C-1000) because the period of performance began in October 2014.

¹¹ FAR 46.401 states that Government contract quality assurance is performed at such times and places as may be necessary to determine that the supplies and services conform to contract requirements. It further states that the QASP should specify all work requiring surveillance and the method of surveillance.

¹² DFARS 246.401 states for service contracts, the contracting officer should prepare a QASP to facilitate assessment of contractor performance. This will ensure that the contractor meets contractual requirements and complies with all applicable laws and regulations.

Additionally, the contracting officer did not verify whether the COR completed his designated responsibilities or reviewed the COR file as required by DFARS Procedures, Guidance, and Information 201.602.¹³ We found that the contracting officer also did not officially appoint a COR from December 2012 through May 2014 (18 months) when the original COR left the WWR. When asked about the contract surveillance, the contracting officer stated that:

- she relied on the COR to monitor the contract;
- the COR had the QASP and the DoD activity (WWR) had the responsibility to develop it; and
- her contracting office conducts audits to review the COR files; however, she did not conduct a review for this contract due to “staffing shortages.”

The COR could not explain how he determined whether the services and contractual deliverables complied with contract requirements.

The COR could not explain how he determined whether the services and contractual deliverables complied with contract requirements. When interviewed, he stated that he did not conduct any reviews or use a QASP to monitor the contractor’s performance. Instead, the COR stated that the WWR distributed overall RCC program satisfaction surveys to the recovering Marines and their families as a quantitative metric to assess the performance of the contractor’s work.

As a result, WWR officials stated they conducted satisfaction surveys on the overall RCC program to ultimately determine the effectiveness of the contractor’s performance. However, the surveys were not sufficient to evaluate the contractor’s performance because they did not consider the primary contract deliverable. According to the WWR RCC contract, the primary deliverable is the individualized CRP developed for recovering Marines and their family or caregiver. Therefore, contracting and WWR officials did not have assurance that the services provided by contractor met contractual requirements.

Surveys were not sufficient to evaluate the contractor’s performance because they did not consider the primary contract deliverable.

¹³ DFARS Procedures, Guidance, and Information 201.602 states that contracting officers, as well as the requiring activities or the COR’s supervisor, shall review and document at least annually the COR’s files for accuracy and completeness. The results of this review shall be documented.

The Director, Marine Corps Contracting Office–National Capital Region, should conduct a review of the current WWR contract to determine whether the contracting officer should modify the performance work statement to clarify expectations and contractual deliverables. The Director should ensure that the contracting officer for the WWR RCC program adequately conducts contract surveillance in accordance with the FAR and DFARS. The Director should also ensure that the contracting officer coordinates with WWR officials and the COR to develop a QASP specific to the contract. Lastly, the Director should initiate a performance review of the contracting officer for the RCC contract to determine whether administrative actions are warranted.

Summary

WWR officials did not fully implement the corrective actions for Recommendation C.1 from DoD OIG Report No. DODIG-2012-067. As a result, contracting and WWR officials did not have assurance that they met the goals of the RCC program. It is vital to recovering Marines and their families or designated caregiver that the WWR RCC program complies with all DoD and Marine Corps policies and procedures. Marines, DoD civilians, and contractors must work together to provide effective care and support the recovering Marines to transition back to their unit or civilian life.

Recommendations, Management Comments, and Our Response

Recommendation 1

We recommend that the Commanding Officer, Wounded Warrior Regiment:

- a. Update the Recovery Care Coordinator training program to incorporate all applicable requirements from the DoD Instruction 1300.24 and Wounded Warrior Regiment Order P3100.1A, for the preparation of Comprehensive Recovery Plans.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Commanding Officer, Wounded Warrior Regiment agreed and stated the Marine Corps-specific training has been updated to include the applicable requirements for preparation of CRPs that are covered within the DoD Instruction 1300.24 and the WWR Order 3000.1A¹⁴.

¹⁴ WWR Order number and title changed from WWR Order P3100.1A, "Recovery Care Coordinator Program Procedural Manual" to WWR Order 3000.1A, "Recovery Care Coordinator Standard Operating Procedures." The WWR Order 3000.1A was in draft form and was provided as part of management comments. Due to the volume of the draft WWR Order, we will not include it in this report.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

- b. Document and maintain training records for all Recovery Care Coordinator related training course as evidence of completion and forward those completion certificates to the DoD Office of Wound Warrior Care and Transition Policy as required by the DoD Instruction 1300.24.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Commanding Officer, Wounded Warrior Regiment agreed and stated that the Marine Corps Recovery Care Coordination Program has initiated a comprehensive training plan that monitors and tracks completion of mandated training. Additionally, the Head added that training records (certificates and/or transcripts) are maintained; and Marine Corps-specific training certificates are forwarded to the Warrior Care Policy, as required by DoD Instruction 1300.24.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

- c. Revise and finalize the draft Wounded Warrior Regiment Order P3100.1A to:**
 - (1) Establish the roles and responsibilities for Recovery Care Coordinators and the other recovery team members involved in the preparation of the Comprehensive Recovery Plan.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Commanding Officer, Wounded Warrior Regiment agreed and stated that the WWR Order 3000.1A will establish the roles and responsibilities for RCCs and other recovery team members involved in the preparation of the CRP. The WWR Order is currently in staffing and scheduled for completion during the summer of fiscal year 2015.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

- (2) Require that Recovery Care Coordinators actively involve all necessary recovering Marines, their family or designated caregiver, and recovery team members when they prepare a comprehensive recovery plan that includes all relevant medical and nonmedical goals for the recovery, rehabilitation, and transition of the recovering Marine; and develop action steps for goals that are specific, measurable, and achievable within an agreed upon time frame.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Commanding Officer, Wounded Warrior Regiment agreed and stated that the WWR Order 3000.1A will require that RCCs involve all necessary recovering Marines, their family or designated caregiver, and recovery team members when they prepare a comprehensive recovery plan. The WWR Order also directs that the RCCs include all relevant medical and nonmedical goals for the recovery, rehabilitation, and transition of the recovering Marine; and develop action steps for goals that are specific, measurable, and achievable within an agreed upon time frame. The WWR Order is currently in staffing and scheduled for completion during the summer of fiscal year 2015.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

- (3) Require the Recovery Care Coordinators, recovering Marines, their family or designated caregiver sign the comprehensive recovery plan to demonstrate their understanding of the plan and commitment to its implementation, and upload the document within the Recovery Coordination Program Support Solution system or its replacement.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Commanding Officer, Wounded Warrior Regiment agreed and stated that the WWR Order 3000.1A will require the Marine's signature to demonstrate their understanding of the plan and commitment to its implementation. Specifically,

the WWR Order requires that the RCCs, recovering Marines, and their family or designated caregiver sign the CRP. Furthermore, the RCC must upload the signed plan within RCP-SS. The WWR Order is currently in staffing and scheduled for completion during the summer of fiscal year 2015.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

- d. Provide guidance to Recovery Care Coordinators to explain the parameters of the limited injury and illness-specific medical information contained in the Recovery Coordination Program Support Solution system or its replacement.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Commanding Officer, Wounded Warrior Regiment agreed and stated that the WWR will provide detailed instruction to RCCs on how to properly account for medical information within RCP-SS at the Marine Corps-specific and annual training courses.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

- e. Provide guidance to ensure that Recovery Care Coordinators make timely updates to the recovering Marines' comprehensive recovery plan to reflect their current goals and priorities.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Commanding Officer, Wounded Warrior Regiment agreed and stated that the WWR provides RCCs with guidance on making timely updates to the recovering Marines' CRP during the Marine Corps-specific and annual training courses.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

Recommendation 2

We recommend that the Director, Marine Corps Regional Contracting Office–National Capital Region should:

- a. Conduct a review of the current Wounded Warrior Regiment contract to determine whether the contracting officer should rewrite the performance work statement to clarify expectations and deliverables that are measurable and comply with the DoD and Marine Corps requirements.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Director, Marine Corps Regional Contracting Office–National Capital Region agreed and stated that the Contracting Officer, in conjunction with the WWR COR shall review the Performance Work Statement to ensure that it includes all requirements and that there are measurable deliverables that comply with DoD and Marine Corps requirements. The Head added that the expected completion date for the review is December 1, 2015.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

- b. Require that the contracting officer develop, in coordination with the Wounded Warrior Regiment officials, a quality assurance surveillance plan tailored specifically to the contract to ensure that the contractor creates effective Recovery Care Coordinator and quality assurance programs as required by the contract.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Director, Marine Corps Regional Contracting Office–National Capital Region agreed and stated that the contracting officer will work with the COR to develop a well-defined QASP that assists the COR with monitoring the contract to ensure that all requirements are being met. Furthermore, the Head stated the development of the QASP would occur by December 1, 2015.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

- c. **Verify that the Wounded Warrior Regiment contracting officer(s) and their contracting officer's representative(s) perform and document quality assurance and oversight in accordance with Federal Acquisition Regulation and Defense Federal Acquisition Regulation Supplement to ensure that contractor personnel developed and administered a Recovery Care Coordinator program that follows contractual requirements.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Director, Marine Corps Regional Contracting Office-National Capital Region agreed and stated that the contracting officer will monitor the contract in accordance with all applicable FAR; DFARS; and DFARS Procedures, Guidance, and Information. In addition, the contracting officer will meet with the COR to ensure that the individual understands their responsibilities. The Head also said that the Regional Contracting Office is currently preparing Standard Operating Procedures for CORs that details the steps for appointment, monitoring, and performance of annual audits. The Standard Operating Procedures expected completion date is November 1, 2015.

Our Response

The response from the Head addressed all specifics of the recommendation, and no further comments are required.

- d. **Initiate a performance review of the Wounded Warrior Regiment contracting officer(s) for the Recovery Care Coordinator contract to determine whether administrative actions are warranted.**

Office of the Director, Marine Corps Staff Comments

The Head, Audit Coordination, Office of the Director, Marine Corps Staff responding for the Director, Marine Corps Regional Contracting Office-National Capital Region disagreed and stated there was no indication of waste, fraud, abuse, or malice by the contracting officer(s) that would warrant administrative actions at this time. However, the Marine Corps will conduct a thorough review of the contracting file to determine whether any further courses of action are warranted. The completion date for the contracting file reviewed is January 1, 2016. The Head also stated that

the Regional Contracting Office and Commanding Officer approved contributing factors and corrective actions to ensure that current and new employees, as well as CORs, understand the lessons learned from the findings of this report.

The contributing factors for the identified deficiencies include critical staffing shortages and under emphasis on COR procedures. While the Marine Corps corrective actions focus on advertising critical jobs (7 contracting specialist and 1 Procedures, Policy, Quality, and Metrics team lead). Other corrective actions include updating and implementing contracting officers and CORs procedures; and emphasizing Annual COR training and audits.

Our Response

Although the Head disagreed, the actions met the intent of the recommendation. No further comments are required.

Appendix

Scope and Methodology

We conducted this performance audit from April 2014 through June 2015 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

We obtained and analyzed documentation related to the Marine Corps' Wounded Warrior program such as:

- selected CRPs;
- MCWIITS notes;
- WWR RCC contract documentation;
- WWR RCC training manual; and
- RCC quality assurance program.

We compared these documents to:

- FY 2008 National Defense Authorization Act;
- DoD Instruction 1300.24, "Recovery Coordination Program;"
- WWR Order 3000.1, "Standard Operating Procedures for the Wounded Warrior Regiment Recovery Coordination (RCC) Program;"
- Draft WWR Order P3100.1A, "Recovery Care Coordinator Program Procedural Manual;"
- Federal Acquisition Regulations;
- Defense Federal Acquisition Regulations Supplement; and
- WWR Recovery Care Coordinator Service Contracts.

We interviewed personnel from:

- WWR Headquarters and their contractor;
- Marine Corps Regional Contracting Office–National Capital Region at Marine Corps Base Quantico, Virginia;
- Office of Warrior Care Policy, Alexandria, Virginia; and
- selected recovering Marines, RCCs, and their recovery team members at:
 - Marine Corps Base Quantico, Virginia;

- Marine Corps Base Camp Lejeune, North Carolina; and
- Walter Reed National Military Medical Center, Bethesda, Maryland.

Universe and Sample

We selected 40 of 251 open CRPs from January 2012 through April 2014. For the 40 CRPs selected, we interviewed recovering Marines and their corresponding RCCs at three locations: Marine Corps Base Camp Lejeune, North Carolina; Walter Reed National Military Medical Center, Bethesda, Maryland; and Marine Corps Base Quantico, Virginia. See Table 3 below for the selection of open CRPs from the WWBn-E.

Table 3. Selection of Open CRPs From Wounded Warrior Battalion–East

Locations	Universe of CRPs	Sample CRPs
Camp Lejeune	199	26
Walter Reed	51	13
Quantico	1	1
Totals	251	40

Use of Computer-Processed Data

We used computer-processed data generated from RCP-SS and MCWIITS. RCP-SS contained the CRPs and MCWIITS contained the recovery team notes from interviews and evaluations of the recovering Marines. We compared the information contained in the CRPs to MCWIITS notes and interviews with recovering Marines as well as WWR and contractor personnel. We determined that the data were sufficiently reliable for the purposes of the audit.

Use of Technical Assistance

We used technical assistance from DoD OIG Quantitative Methods Division personnel to determine the sampling methodology for the audit.

Prior Coverage

During the last 5 years, the Department of Defense Office of Inspector General (DoD OIG), and DoD Recovering Warrior Task Force issued eight reports that discussed the Marine Corps Wounded Warrior program. Unrestricted DoD OIG reports can be accessed at <http://www.dodig.mil/pubs/index.cfm>. Also, the DoD Recovering Warrior Task Force report is available at <http://rwtf.defense.gov/reports/fy2011annualreport>.

DoD OIG

Report No. 2014-100, "Assessment of DoD Wounded Warrior Matters: Selection and Training of Warrior Transition Unit and Wounded Warrior Battalion Leaders and Cadre," August 22, 2014

Report No. DoDIG-2013-113, "Assessment of DoD Wounded Warrior Matters–Fort Riley," August 6, 2013

Report No. DoDIG-2013-087, "Assessment of DoD Wounded Warrior Matters–Joint Base Lewis McChord," May 31, 2013

Report No. DoDIG-2012-120, "Assessment of DoD Wounded Warrior Matters–Wounded Warrior Battalion–West Headquarters and Southern California Units," August 22, 2012

Report No. DoDIG-2012-067, "Assessment of DoD Wounded Warrior Matters–Camp Lejeune," March 30, 2012

Report No. SPO-2011-010, "Assessment of DoD Wounded Warrior Matters–Fort Drum," September 30, 2011

Report No. SPO-2011-004, "Assessment of DoD Wounded Warrior Matters–Fort Sam Houston," March 17, 2011

DoD Recovering Warrior Task Force

DoD Recovering Warrior Task Force, 2010 – 2011 Annual Report, September 2, 2011

Management Comments

Office of the Director, Marine Corps Staff



DEPARTMENT OF THE NAVY
HEADQUARTERS UNITED STATES MARINE CORPS
3000 MARINE CORPS PENTAGON
WASHINGTON, DC 20350-3000

IN REPLY REFER TO:
7500
DMCS-A
7 Jul 15

From: Head, Audit Coordination, Office of the Director,
Marine Corps Staff

To: Principal Assistant Inspector General for Auditing,
Office of the Inspector General, U.S. Department
of Defense

Subj: U.S. MARINE CORPS RESPONSE TO DODIG DRAFT AUDIT REPORT
PROJECT NO. D2014-D000XD-0161.000, FOLLOWUP AUDIT: MORE
IMPROVEMENTS NEEDED FOR THE DEVELOPMENT OF WOUNDED
WARRIOR BATTALION-EAST MARINES' RECOVERY PLANS

Ref: (a) DoD Instruction 7650.03
(b) DoDIG Memo of June 4, 2015

Encl: (1) Dir, Marine and Family Programs Division comments

1. Official responses to recommendations no. 1.a., 1.b.,
1.c.(1), 1.c.(2), 1.c.(3), 1.d., and 1.e. addressed to the
Commanding Officer, Wounded Warrior Regiment and required by the
references are provided at the enclosure, supported by the
accompanying draft Wounded Warrior Regiment Order 3000.1A.

2. Official responses to recommendations no. 2.a., 2.b., 2.c.,
and 2.d. addressed to the Director, Marine Corps Regional
Contracting Office-National Capital Region will be provided in
separate correspondence once finalized by the Office of the
Deputy Commandant, Installations and Logistics, which exercises
oversight of Marine Corps contracting offices.

3. For questions regarding the U.S. Marine Corps response to

[REDACTED]

A handwritten signature in black ink, appearing to read "C. K. Dove", is located below the redacted text.

C. K. DOVE

Copy to:
NAVINGEN (N11)
DC, M&RA
DC, I&L

Office of the Director, Marine Corps Staff (cont'd)



DEPARTMENT OF THE NAVY
HEADQUARTERS UNITED STATES MARINE CORPS
3280 RUSSELL ROAD
QUANTICO VIRGINIA 22134

IN REPLY REFER TO:
3000
M&RA
29 JUN 2015

From: Director, Marine and Family Programs Division
To: Director of the Marine Corps Staff (DMCS AUDITS)

Subj: DOD IG DRAFT REPORT "FOLLOWUP AUDIT: MORE IMPROVEMENTS
NEEDED FOR THE DEVELOPMENT OF WWR BATTALION-EAST, MARINES
RECOVERY PLANS", PROJECT NO. D2014-D000XD-0161.000

Encl: (1) Draft Wounded Warrior Regiment Order 3000.1A

1. The subject report has been reviewed.

a. The Marine Corps concurs that the information contained in the draft report is non-sensitive and does not require "For Official Use Only" designation.

b. The Marine Corps concurs with the basic assessment report and provides the following comments in response to the specific recommendations addressed to the Marine Corps. Responses are keyed to the format of the assessment report.

2. Recommendations Table:

- 1A: Update the Recovery Care Coordinator training program to incorporate all applicable requirements from the DoD Instruction 1300.24 and Wounded Warrior Regiment Order P3100.1A, for the preparation of Comprehensive Recovery Plans.

Response: The RCC USMC-specific training has been updated to include the applicable requirements from the DoD Instruction 1300.24 and the Wounded Warrior Regiment Order 3000.1A, for the preparation of Comprehensive Recovery Plans. A specific period of instruction within the RCC USMC training curriculum provides the Recovery Care Coordinators with the requirements from the DoD Instruction 1300.24. That module is titled the "Laws and Regulations" module.

- 1B: Document and maintain training records for all Recovery Care Coordinator related training courses as evidence of completion and forward those completion certificates to the DoD Office of Wound Warrior Care and Transition Policy as required by the DoD Instruction 1300.24.

Response: The USMC Recovery Care Coordination Program has initiated a comprehensive training plan, to include: monitoring and tracking the

Office of the Director, Marine Corps Staff (cont'd)

Subj: DOD IG DRAFT REPORT "FOLLOWUP AUDIT: MORE IMPROVEMENTS
NEEDED FOR THE DEVELOPMENT OF WWR BATTALION-EAST, MARINES
RECOVERY PLANS", PROJECT NO. D2014-D000XD-0161.000

completion of all mandated HQMC/MCB Specific/Wounded Warrior Regiment training, maintaining electronic and hard copy training records (certificates and/or transcripts), and forwarding all completed Service-specific training certificates to the Office of Wounded Warrior Care Policy, as required by DoD Instruction 1300.24.

- 1C(1): Revise and finalize the draft Wounded Warrior Regiment Order P3100.1A to establish the roles and responsibilities for Recovery Care Coordinators and the other recovery team members involved in the preparation of the Comprehensive Recovery Plan.

Response: Enclosure (1) is currently in staffing and will be signed and published this summer. It establishes the roles and responsibilities for Recovery Care Coordinators and the other recovery team members involved in the preparation of the Comprehensive Recovery Plan. Specific guidance and requirements for RCC case assignments and CRP development is located in Chapter 2.

- 1C(2): Revise and finalize the draft Wounded Warrior Regiment Order P3100.1A to require that Recovery Care Coordinators actively involve all necessary recovering Marines, their family or designated caregiver, and recovery team members when they prepare a comprehensive recovery plan that includes all relevant medical and nonmedical goals for the recovery, rehabilitation, and transition of the recovering Marine; and develop action steps for goals that are specific, measurable, and achievable within an agreed upon time frame.

Response: Enclosure (1) is currently in staffing and will be signed and published this summer. It requires Recovery Care Coordinators involve all necessary recovering Marines, their family or designated caregiver, and recovery team members when they prepare a comprehensive recovery plan. It also directs that the Recovery Care Coordinators include all relevant medical and nonmedical goals for the recovery, rehabilitation, and transition of the recovering Marine; and develop action steps for goals that are specific, measurable, and achievable within an agreed upon time frame. Specific guidance and requirements is located in Chapter 2.

- 1C(3): Revise and finalize the draft Wounded Warrior Regiment Order P3100.1A to require the Recovery Care Coordinators, recovering Marines, their family or designated caregiver sign the comprehensive recovery plan to demonstrate their understanding of the plan and commitment to its implementation, and upload the document within the Recovery Coordination Program Support Solution system or its replacement.

Office of the Director, Marine Corps Staff (cont'd)

Subj: DOD IG DRAFT REPORT "FOLLOWUP AUDIT: MORE IMPROVEMENTS NEEDED FOR THE DEVELOPMENT OF WWR BATTALION-EAST, MARINES RECOVERY PLANS", PROJECT NO. D2014-D000XD-0161.000

Response: Enclosure (1) is currently in staffing and will be signed and published this summer. It requires the Recovery Care Coordinators, recovering Marines, their family or designated caregiver sign the comprehensive recovery plan. The Marine's signature demonstrates their understanding of the plan and commitment to its implementation. The RCC must upload the document within the Recovery Coordination Program Support Solution system. All recovering Marines who are required to have a CRP have their latest CRP uploaded to the Recovery Coordination Program Support Solution system, along with the corresponding signature page. Specific guidance and requirements is located in Chapter 2.

- 1D: Provide guidance to Recovery Care Coordinators to explain the parameters of the limited injury and illness-specific medical information contained in the Recovery Coordination Program Support Solution system or its replacement.

Response: The Wounded Warrior Regiment will provide detailed instruction to the Recovery Care Coordinators, during USMC-specific training and annual training, on how to properly use the framework contained in the Incident/Injury Info Tab within the Recovery Coordinator Program Support Solution system. This is the appropriate location for injury and illness-specific medical information to be captured in the system.

- 1E: Provide guidance to ensure that Recovery Care Coordinators make timely updates to the recovering Marines' comprehensive recovery plan to reflect their current goals and priorities.

Response: The Wounded Warrior Regiment provides Recovery Care Coordinators with guidance on when and how often to make timely updates to the recovering Marines' comprehensive recovery plan during RCC USMC-specific and annual training. The period of instruction that addresses timely updates is the "Tasks/Timelines" module. In addition to the training module, the Recovery Care Coordinators receive a supplemental guide titled "WWR RCC Tasks" that specifies the requirements for timely updates. In addition to providing training, the Wounded Warrior Regiment's robust auditing process, reviews/monitors seventy-five percent of the existing Recovery Care Coordinators caseload and one hundred percent of all the new cases joined/TAD to the Wounded Warrior Regiment. The case elements reviewed during the audit process include, but are not limited to:

1. Timeliness (contact within 72 hours of assignment; at a minimum, contact every two weeks)
2. Comprehensive Needs Assessment
3. Comprehensive Recovery Plan
 - o Stage Specific Goals

Office of the Director, Marine Corps Staff (cont'd)

Subj: DOD IG DRAFT REPORT "FOLLOWUP AUDIT: MORE IMPROVEMENTS
NEEDED FOR THE DEVELOPMENT OF WWR BATTALION-EAST, MARINES
RECOVERY PLANS", PROJECT NO. D2014-D000XD-0161.000

o Succinct and Accurate Action Steps

3. The Marine Corps top priority remains "keeping faith" with our
wounded, ill and injured Marines and their families.

4. Point of contact for this matter is [REDACTED]
[REDACTED]



B. W. WHITMAN

Office of the Director, Marine Corps Staff (cont'd)



DEPARTMENT OF THE NAVY
HEADQUARTERS UNITED STATES MARINE CORPS
3000 MARINE CORPS PENTAGON
WASHINGTON, DC 20350-3000

IN REPLY REFER TO:
7500
DMCS-A
8 Jul 15

From: Head, Audit Coordination, Office of the Director,
Marine Corps Staff
To: Principal Assistant Inspector General for Auditing,
Office of the Inspector General, U.S. Department
of Defense

Subj: U.S. MARINE CORPS RESPONSE TO DODIG DRAFT AUDIT REPORT
PROJECT NO. D2014-D000XD-0161.000, FOLLOWUP AUDIT: MORE
IMPROVEMENTS NEEDED FOR THE DEVELOPMENT OF WOUNDED
WARRIOR BATTALION-EAST MARINES' RECOVERY PLANS

Ref: (a) DoD Instruction 7650.03
(b) DoDIG Memo of June 4, 2015
(c) DMCS-A ltr 7500 of 7 Jul 15

Encl: (1) Dir, Marine Corps RCO-NCR comments

1. Official responses to recommendations no. 2.a., 2.b., 2.c., and 2.d. addressed to the Director, Marine Corps Regional Contracting Office-National Capital Region and required by references (a) and (b) are provided at the enclosure. Enclosure (1) comments were formulated by the Office of the Dir, RCO-NCR and reviewed/approved by the Deputy Assistant Deputy Commandant, Installations & Logistics, Headquarters, U.S. Marine Corps.

2. As noted in enclosure (1), the Marine Corps concurs with recommendations 2.a., 2.b. and 2.c. The Marine Corps nonconcurs with recommendation 2.d. as it is currently written, and in acknowledgement of the conditions that formed the basis of the audit finding, provides for DODIG's consideration in enclosure (1) alternative recommended actions to be taken by the Marine Corps, with specific planned corrective actions and an estimated completion date.

3. Official responses to recommendations no. 1.a., 1.b., 1.c., 1.d., and 1.e. were provided in reference (c).

Office of the Director, Marine Corps Staff (cont'd)

Subj: U.S. MARINE CORPS RESPONSE TO DODIG DRAFT AUDIT REPORT
PROJECT NO. D2014-D000XD-0161.000, FOLLOWUP AUDIT: MORE
IMPROVEMENTS NEEDED FOR THE DEVELOPMENT OF WOUNDED
WARRIOR BATTALION-EAST MARINES' RECOVERY PLANS

4. For questions regarding the U.S. Marine Corps response to

[REDACTED]



C. K. DOVE

Copy to:
NAVINGEN (N11)
DC, I&L
DC, M&RA

Office of the Director, Marine Corps Staff (cont'd)

**DEPARTMENT OF DEFENSE INSPECTOR GENERAL (DODIG) DRAFT REPORT
DATED 4 JUNE 2015
PROJECT # D2014-D000XD-0161.000**

**"FOLLOWUP AUDIT: MORE IMPROVEMENTS NEEDED FOR THE
DEVELOPMENT OF WOUNDED WARRIOR BATTALION-EAST MARINES'
RECOVERY PLANS"**

**UNITED STATES MARINE CORPS COMMENTS
TO THE DODIG RECOMMENDATIONS**

DODIG recommends that the Director, Marine Corps Regional Contracting Office-National Capital Region should:

RECOMMENDATION 2A: Conduct a review of the current Wounded Warrior Regiment contract to determine whether the contracting officer should rewrite the performance work statement to clarify expectations and deliverables that are measurable and comply with the DoD and Marine Corps requirements.

USMC RESPONSE: Concur

The Contracting Officer, in conjunction with the Wounded Warrior Regiment (WWR) Contracting Officer Representative (COR) shall review the Performance Work Statement (PWS) to ensure that it includes all requirements and that there are measurable deliverables that comply with Department of Defense (DoD) and Marine Corps requirements.

At the conclusion of this review, if it is determined that the PWS needs to be rewritten, it will be rewritten and the contract will be modified to reflect any in-scope changes. If it is determined that there are significant changes, the contract may have to be resolicited.

Estimated completion date: 1 December 2015

RECOMMENDATION 2B: Require that the contracting officer develop, in coordination with the Wounded Warrior Regiment officials, a quality assurance surveillance plan tailored specifically to the contract to ensure that the contractor creates effective Recovery Care Coordinator and quality assurance programs as required by the contract.

USMC RESPONSE: Concur

The Contracting Officer shall work with the COR to develop a well-defined quality assurance surveillance plan that will assist the COR in monitoring the contract to ensure that all requirements are being met. Any changes will be negotiated with the Contractor.

Estimated completion date: 1 December 2015

Office of the Director, Marine Corps Staff (cont'd)

RECOMMENDATION 2C: Verify that the Wounded Warrior Regiment contracting officer(s) and their contracting officer's representative(s) perform and document quality assurance and oversight in accordance with Federal Acquisition Regulation and Defense Federal Acquisition Regulation Supplement to ensure that contractor personnel developed and administered a Recovery Care Coordinator program that follows contractual requirements.

USMC RESPONSE: Concur

The Contracting Officer shall monitor the contract in accordance with all applicable Federal Acquisition Regulation (FAR); Defense Federal Acquisition Regulations Supplement (DFARS); and DFARS Procedures, Guidance, and Information (PGI) to ensure that the contract is monitored properly.

Additionally, the Contracting Officer will meet with the COR and ensure that the COR understands what his responsibilities are.

The Regional Contracting Office (RCO) Procedures, Policy, Quality, and Metrics (PPQM) Branch is currently writing Standard Operating Procedures (SOP) for CORs. This SOP will detail procedures on appointing CORs; monitoring CORs; and procedures for performing annual COR audits.

Estimated Completion Date: 1 November 15

RECOMMENDATION 2D: Initiate a performance review of the Wounded Warrior Regiment contracting officer(s) for the Recovery Care Coordinator contract to determine whether administrative actions are warranted.

USMC RESPONSE: Non-Concur

After review of the DODIG Report, it is determined that there was no indication of waste, fraud, abuse, or malice by the contracting officer (s) that would warrant administration actions at this time; however, a thorough review of the contracting file will be conducted by 1 January 2016 to determine if any further courses of action are warranted. The RCO and the Commanding Officer approved the following contributing factors and corrective actions to ensure the current contract and IG report are thoroughly reviewed and that current and new employees, as well as CORs, understand the lessons learned from these IG findings.

- Contributing Factors. High operational tempo that includes fiscal year funding requirements policies, critical staffing shortages, and under emphasis on COR procedures were major contributors to the deficiencies.

- Corrective actions. Critical billets are being advertised to fill (7 contracting specialists and 1 PPQM team lead). Implementing procedures and SOPs for contracting officers and CORs are being updated. Annual COR training and audits will receive additional emphasis. The Contracting Officer's Representative Tool (CORT) will mitigate deficiencies in the future. DOD policy (PGI 201.602-2(iii) dated (Mar 21, 2011) directs Services to manage COR nomination/delegation via CORT. However, at the time the task orders were conducted, the CORT tool was

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not fully operational and could not be utilized to its full capacity. That tool is now fully operational and included in current operations. This enables required oversight to prevent these kinds of deficiencies in the future. A complete review of the contracting file will be reviewed by the completion date and lessons learned conveyed to current and new employees at the RCO to prevent further deficiencies.

Estimated Completion Date: 1 January 2016

Acronyms and Abbreviations

COR	Contracting Officer's Representative
CRP	Comprehensive Recovery Plan
MCWIITS	Marine Corps Wounded Ill/Injured Tracking System
RCC	Recovery Care Coordinator
RCP-SS	Recovery Care Program-Support Solution
WWBn-E	Wounded Warrior Battalion—East
WWR	Wounded Warrior Regiment
QASP	Quality Assurance Surveillance Plan

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