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Command Policy

COMMANDER'S INSPECTION PROGRAM

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This instruction establishes the Commander's Inspection Program (CIP). The 43d Airlift Wing (AW) CIP is an overarching program that encompasses unit self-inspection, Special Interest Items (SIIs), and external inspections. It provides structure and guidance to the self-inspection program. The CIP provides a process for inspecting and correcting any deficiencies highlighted by SIIs. It provides the mechanism to track findings by external inspections and the implementation of corrective actions. In addition, the CIP provides a forum for collecting and disseminating lessons learned and best practices throughout the AW. It relies on the integrity and support of all commanders, office chiefs, and inspection monitors throughout the AW. The CIP applies to all 4AW activities, but not to tenant units at Pope AFB, NC. **Records Disposition:** Documentation created by this publication will be maintained and disposed of IAW AFMAN 37-123, *Management of Records*, AFMAN 37-139, *Records Disposition Schedule* and this instruction.

SUMMARY OF REVISIONS

This publication has been completely revised and must be reviewed in its entirety.

1. Philosophy. The AW CIP is established to provide an effective means of assessing mission performance and readiness, organizational effectiveness and efficiency, and regulatory compliance. It ensures we are prepared to effectively and efficiently conduct our assigned missions and are good stewards of the public trust and resources. A thorough inspection program gauges a unit's strengths and illuminates problem areas. Commanders should use their inspection results to thoroughly assess their units and to direct resources and energies to correct deficiencies. Lessons learned and best practices from other units provide commanders an opportunity to learn from the other units' mistakes and to benchmark other units' successes. With sufficient effort and a conscientious approach by commanders at all levels, the CIP should result in continuous improvement throughout the AW.

1.1. Well developed checklists and regular unit self-inspections are invaluable management tools to maintain internal quality control of the unit's effectiveness. Inspections using checklists mandated by

Higher Headquarter (HHQ) ensures unit compliance with changing regulations and policies. The AW CIP has five main goals, which all working levels should meet:

- 1.1.1. Provide early detection of deviations from required standards of performance.
- 1.1.2. Identify weaknesses, problems, and trends for management action.
- 1.1.3. Provide a process to effectively implement and track corrective actions.
- 1.1.4. Ensure AW-wide review, implementation of corrective actions, and reporting as required for HHQ and AW SIIs.
- 1.1.5. Identify, disseminate, and act on lessons learned and best practices from all sources.

1.2. This program will not add unnecessary workload to units with existing self-inspection programs, e.g. 43d Medical Group (MDG) with specific requirements mandated by the Health Services Inspection (HSI) and the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). These units are not required to follow all the self-inspection requirements and formats of this instruction. However, these units will comply with other requirements, e.g., SII inspection procedures. In addition, commanders of these units will annually certify their program complies with the self-inspection requirements of AFI 90-201, *Inspector General Activities* and AMCI 90-201, *The Inspection System*.

2. AW, Group, and Squadron Commanders' and Staff Agency Chiefs' Responsibilities.

- 2.1. Appoint, in writing, responsible personnel to execute the respective unit's CIP.
- 2.2. Ensure timely and thorough completion of all required inspections by qualified inspectors.
- 2.3. Certify any unit-developed, self-inspection checklists provide an accurate measure of required unit performance.
- 2.4. Correct or elevate all discrepancies identified by unit or subordinate unit's inspections.
- 2.5. Conduct monthly reviews of open discrepancies and corrective action results.
- 2.6. Provide status updates on critical findings and the progress of corresponding corrective actions to the next level up CIP manager.
- 2.7. Before closing any discrepancy, ensure corrective actions have been validated by a qualified individual or functional representative.
- 2.8. Encourage the discovery, review, and implementation of crosstell information, e.g., lessons learned and best practices from other units. Air Mobility Command (AMC) Inspector General (IG) website provides a wealth of information.
- 2.9. Conduct an annual review of the unit inspection program.

3. CIP Mangers' and Monitors' Responsibilities.

- 3.1. AW CIP Manager (CIPM)
 - 3.1.1. Administer the 43 AW CIP to include providing guidance beyond the scope of this instruction.

- 3.1.2. Direct AW units to complete self-inspections semi-annually every January and July and within six months of receiving a new AW commander. Ensure all functional areas are inspected during the semi-annual inspections.
 - 3.1.3. Direct all units to conduct inspections according to new or modified Air Force (AF) or AMC SII's.
 - 3.1.4. Validate, consolidate, and report SII findings to AW commander and/or HHQ. If necessary, appoint Office of Primary Responsibility (OPR) to validate unit responses and prepare the AW report.
 - 3.1.5. Ensure all internal and external inspection discrepancies are tracked until closed. Elevate and track discrepancies that require HHQ involvement for resolution.
 - 3.1.6. Where appropriate, request base, AW, or unit exercises verify corrective actions have fully resolved identified deficiencies.
 - 3.1.7. Brief the AW commander monthly on inspection results and corrective actions status. Prepare reports for 21 AF or AMC as required.
 - 3.1.8. Implement a AW-wide database for tracking CIP information, conducting trend analysis and producing reports.
 - 3.1.9. Accomplish trend analysis of discrepancies across the AW and within units.
 - 3.1.10. Develop a generic self-inspection checklist that can serve as a starting point for any unit that does not have a checklist. Include areas such as information management, personnel, safety, security, supply, and small computer management.
 - 3.1.11. Coordinate the distribution of functional checklists that apply to multiple units.
 - 3.1.12. Alert units well in advance to upcoming inspections. When available, assist preparations by providing timely inspection checklists, previous inspection reports, and/or crosstells from other units.
 - 3.1.13. Conduct annual checks of group and staff agency CIP binders and databases to evaluate their effectiveness, adequacy, and currency. Conduct random checks of squadron level CIP monitor binders and databases to evaluate their effectiveness, adequacy, and currency.
 - 3.1.14. Distribute items of interest, e.g., applicable AF Inspector General's magazine (*TIG Brief*) crosstells, lessons learned and other units' inspection reports to all CIP managers and monitors. Ensure all CIP managers and monitors are aware of the wealth of noteworthy management actions, laudatory comments, as well as significant process deficiencies found in reports on the AMC/IG website.
 - 3.1.15. Schedule and conduct training of SII OPRs and CIP monitors and managers. Initial training is required for all newly appointed SII OPRs and CIP managers and monitors. It is highly recommended for Functional Area Managers (FAMs) and Work Center Monitors (WCMs). Refresher training is accomplished on an "as-needed" basis.
 - 3.1.16. Maintain a continuity binder in accordance with (IAW) Paragraph 4. of this instruction.
- 3.2. Group CIP Managers (GCIPMs) and AW Staff CIP Manager (SCIPM)
 - 3.2.1. Lead the CIP for the group or staff agencies in accordance with this instruction.

- 3.2.2. Conduct group or AW staff level inspections as required in accordance with paragraphs 5. and 6.
- 3.2.3. Task subordinate units with required inspections and validate unit responses.
- 3.2.4. Ensure units use the most current checklist directed by HHQ, unit-tailored checklist, or unit-developed checklists if required. Review unit-developed or unit-tailored checklists for completeness and accuracy.
- 3.2.5. If requested by the AW CIPM and approved by the group commander or director of staff, serve as the AW OPR for an SII. Analyze unit responses and accomplish the AW-level SII report no later than the identified suspense date.
- 3.2.6. Following each inspection, generate a Summary Report and forward, through the group commander or director of staff, to the AW CIPM.
- 3.2.6.1. Document the following for each subordinate unit: inspection completion date and total number of open and closed discrepancies broken out into each of the four categories of discrepancies: Limiting Factor (LIMFAC), Critical Finding, Non-Critical Finding, and Improvement Items. Provide actionable information on LIMFACs. Completely explain all critical findings and the associated corrective actions plans. Include trend analysis results across the group or staff and for individual units.
 - 3.2.6.2. The report is due to the AW CIPM no later than one month after the suspense for unit reports.
- 3.2.7. Track all discrepancies resulting from internal or external inspections until closed. Ensure units take aggressive action to correct discrepancies, to include monthly commander reviews.
- 3.2.8. Report the status of correcting deficiencies and provide detailed status on all critical findings monthly to the AW CIPM.
- 3.2.9. Verify closed discrepancies were validated by a qualified individual and reviewed by unit commander or agency chief.
- 3.2.10. Accomplish trend analysis of discrepancies within the unit. As a minimum, identify common discrepancies among units and repeat discrepancies within units.
- 3.2.11. Maintain accurate CIP database of all discrepancies and corrective actions. Update database monthly.
- 3.2.12. Conduct annual staff assistance visits (SAVs) to the UCIPMs assigned to the group. The following items will normally be assessed as a minimum:
- 3.2.12.1. Effectiveness, adequacy, and currency of UCIPM continuity binder.
 - 3.2.12.2. Accuracy and effectiveness of the unit's self-inspection checklists.
 - 3.2.12.3. Adequacy and effectiveness of self-inspections.
 - 3.2.12.4. Adequacy, tracking, and timely completion of corrective actions.
 - 3.2.12.5. Adequacy and accuracy of unit's CIP database.
- 3.2.13. Brief group commander or director of staff monthly on open discrepancies, corrective actions, results of recent SAVs, and any trend analysis.

3.2.14. Maintain a continuity binder IAW Paragraph 4. of this instruction.

3.3. Unit CIP Monitor (UCIPM)

3.3.1. Maintain the respective squadron or staff agency inspection program in accordance with this instruction.

3.3.2. Conduct inspections as directed in accordance with paragraphs 5. and 6. of this instruction. Use WCMs and FAMs to assist in the inspections as available and as required.

3.3.3. Serve as the AW OPR for an SII if requested by the AW CIPM and approved by squadron and group commanders or agency chief and director of staff. Validate unit responses and accomplish the AW-level SII report no later than the suspense date set by the AW CIPM.

3.3.4. All discrepancies identified during through inspections are required to be reported, except those that are corrected on the spot.

3.3.5. Maintain the unit's CIP database of all discrepancies and corrective actions. Update unit database monthly.

3.3.6. Initiate and track corrective action for all discrepancies following each inspection. Assign an OPR to accomplish the corrective action. Brief the unit commander monthly on corrective action status for all discrepancies.

3.3.7. Accomplish trend analysis of discrepancies within the unit. As a minimum, identify common discrepancies among work centers and repeat discrepancies within work centers and for the unit.

3.3.8. For all inspections, generate and forward a Summary Report to the GCIPM or SCIPM through the unit commander.

3.3.8.1. The Summary Report will include inspection completion date and total number of open and closed discrepancies broken out into each of the four categories of discrepancies, LIMFAC, Critical Finding, Non-Critical Finding, and Improvement Item. Explain in detail all LIMFACs and critical findings. Provide corrective actions plans for critical findings. Provide trend analysis results.

3.3.8.2. Summary reports for semi-annual self-inspections are due in Jan and Jul and within six months of the receiving a new wing commander. Summary reports for HHQ Inspections are due within 1 month of receiving the report or detailed results of the inspection. Summary reports for all other inspections, e.g., SII Inspections, are due as tasked by the OPR.

3.3.9. Provide monthly status updates to the GCIPM or SCIPM on corrective actions for discrepancies. Provide detailed status on all critical findings.

3.3.10. Ensure discrepancies are validated by a qualified individual or functional representative and reviewed by unit commander before they are closed. Request external verification, e.g., exercise event, external expert review, SAV, when appropriate.

3.3.11. When HHQ inspection checklists, e.g., Unit Compliance Inspection checklists, are available before a pending inspection by HHQ, develop a binder that contains or cross-references all materials that substantiate unit assessment of compliance or corrective action for each item on the checklist. With this binder, the HHQ inspector should be convinced of every item in compliance or

understand the correction plan for every item not in compliance item and the associated corrective action.

3.3.12. Distribute appropriate inspection material, crosstells, lessons learned, and best practices to appropriate FAMs and WCMs. AMC/IG provides access on their website to inspection reports. These reports identify noteworthy management actions, laudatory comments, as well as significant process deficiencies. UCIPMs should find and apply these resources as appropriate to their unit.

3.3.13. Conduct annual SAVs of the work centers assigned to the unit.

3.3.14. Brief their unit commander/supervisor at least annually on the CIP. This should include, as a minimum:

3.3.14.1. Unit inspection program trends.

3.3.14.2. Work center SAV results.

3.3.14.3. Unit preparation plan for upcoming major inspections.

3.3.15. Maintain a continuity binder IAW Paragraph 4. of this instruction.

3.4. WCMs and FAMs

3.4.1. Develop local checklists or tailor AMC Checklists, as needed, in accordance with paragraph 5. of this instruction.

3.4.2. Along with UCIPM, and GCIPM as applicable, conduct inspections as directed in accordance with paragraph 6. of this instruction.

3.4.3. Serve as the AW OPR for an SII if designated requested by the AW CIPM and approved by squadron and group commanders or agency chief and director of staff. Validate unit responses and accomplish the wing-level SII report no later than the suspense date set by the AW CIPM.

3.4.4. Provide a report to the UCIPM of all discrepancies, date of discovery, recommended corrective actions, and estimated completion date. Discrepancies that can be corrected on the spot, need not be reported.

3.4.5. Initiate required corrective action following each inspection. Designate an OPR to accomplish each action. Provide monthly status updates to the UCIPM on open discrepancies.

3.4.6. As a minimum, maintain the following for review by the UCIPM, supervisor, or unit commander:

3.4.6.1. An up-to-date self-inspection checklist.

3.4.6.2. Information on open inspection discrepancies and corrective actions.

3.4.6.3. External inspection reports (or portions of reports) applicable to the work center.

3.4.7. If required by the UCIPM, maintain a continuity binder IAW Paragraph 4. of this instruction.

4. CIPM Continuity Binder Requirements. The CIPM continuity binder will normally include as a minimum the following sections and documentation unless another format is mandated by other organizations, e.g., AFIA or JCAHO:

- 4.1. SECTION 1 - Appointment Letter. Appointment Letters should be available for the manager/monitor and immediate subordinate monitors/managers, e.g., GCIPM has appointment letters for self and their UCIPMs.
- 4.2. SECTION 2 - Unit/Group/AW Commander's Policy Letters.
- 4.3. SECTION 3 - Directives (AFI 90-201, AMCI 90-201, AMCP 90-202, *Inspection Guide*, POPEAFBI 90-201).
- 4.4. SECTION 4 - Self-Inspection Checklists for unit and work centers as appropriate.
- 4.5. SECTION 5 - All inspection results to include SII inspections and inspections preparing for HHQ inspections.
- 4.6. SECTION 6 - Summary/Status Reports to next higher level of command inspection results, e.g., discrepancies, corrective action plans and monthly status reports on critical findings.
- 4.7. SECTION 7 - Trend analysis information.
- 4.8. SECTION 8 - Training Records. Training records should be available for the unit manager/monitor and immediate subordinate monitors/managers, e.g., GCIPM has training records for self and their UCIPMs.
- 4.9. SECTION 9 - Reports from audits, SAVs, or inspections of the unit conducted by external organizations, e.g., ORI, UCI, and ASEV.
- 4.10. SECTION 10 - Miscellaneous. HQ USAF and AMC Inspection Guides, *TIG Brief* extracts, Crosstells, local inspections, and inspection reports and trend analyses from other units.
- 4.11. Due to the amount of documentation, documents required in Sections 5, 9, and 10 can be stored in external files. Cross-reference the location in the continuity binder.
- 4.12. Retain continuity binder files and documentation in accordance with the following:
 - 4.12.1. AFI 90-201, AMCI 90-201, AMCP 90-202, and POPEAFBI 90-201. Maintain current versions and discard obsolete versions.
 - 4.12.2. HQ USAF and AMC inspection guides, TIG Brief extracts, crosstells, and other miscellaneous information: Purge six months after own comparable inspection report or when no longer needed, whichever is sooner.
 - 4.12.3. Local AW Inspection: Purge after completion of trend analysis with next comparable inspection and correction of all discrepancies, whichever is later.
 - 4.12.4. HHQ Inspections (ORI, UCI, ASEV, etc.): Purge one year after all corrective actions have been completed or after completion of trend analysis with next inspection, whichever is later.
 - 4.12.5. Audit Reports: Purge after two years of report date, provided corrective actions are completed.
 - 4.12.6. Self-Inspection Reports: Keep all reports for previous 12 months, earlier reports may be purged.
 - 4.12.7. SII Inspection Reports: Keep one year after SII becomes inactive, then purge.
 - 4.12.8. Trend Analysis Information: Keep current version, others may be purged.

4.12.9. Training: Keep training records for current personnel only, purge outdated training records.

5. Self-Inspection Checklist Guidance.

- 5.1. Use checklists as mandated by AMC or other appropriate HHQ.
- 5.2. Some functional area checklists can be downloaded from the AMC/IG website at (<https://www.amc.af.mil/checklists/index.cfm>). Checklists are found under the Functional Area and Inspections sections.
- 5.3. Tailor checklists as appropriate with functional area-specific, critical and non-critical inspection items. Tailor checklists by adding, deleting, highlighting, or modifying items as required.
- 5.4. Review crosstell items. If applicable, incorporate into the functional area or unit checklist.
- 5.5. If checklists are not available or cannot be tailored for your unit or work center, query similar units at other bases prior to developing your own develop your own checklist(s).
- 5.6. If there are no checklists for your unit, develop your own.
 - 5.6.1. Start with basic checklist provided by AW CIPM.
 - 5.6.2. List each checklist item as a single question, capable of being answered by either a "yes" or "no," followed by a reference to regulation or policy in parentheses.
 - 5.6.3. Do not duplicate checklist items.
 - 5.6.4. Divide checklist questions into two categories -- critical and non-critical -- using definitions of "critical findings" and "non-critical findings" provided in **Attachment 1** to this instruction. Critical questions should be bolded.
 - 5.6.5. FAMs may choose to subdivide a checklist into sub-functional parts with critical or non-critical questions for each sub-function. The amount of material and nature of the functional area will dictate a checklist's organization.
- 5.7. Coordinate draft local checklist with UCIPM and certifying official, usually the unit commander. Tailored, modified, or revised checklists will be forwarded for review by the appropriate UCIPM, GCIPM, or SCIPM prior to certification.
- 5.8. Commander should certify the checklist(s) will provide an accurate measure of required unit performance.

6. Inspection Process.

- 6.1. In preparation for each self-inspection, review all checklists for currency and all AFIs referenced in checklists to ensure that they are current.
- 6.2. Ensure only qualified individuals conduct the inspection.
- 6.3. Mark each checklist step with a check in either the YES, NO, or N/A column. Note that some HHQ checklists use columns titled IN COMPLIANCE, IN COMPLIANCE WITH COMMENTS, and NOT IN COMPLIANCE, in place of YES and NO.

6.4. Provide an explanation in paragraph format along with the location of documents supporting the answer to each checklist question immediately below the applicable checklist question or written on separate paper and referenced to the applicable checklist question.

6.5. If the answer to the checklist question is YES or IN COMPLIANCE, the written explanation and/or documentation should be sufficient to convince the reviewer that the unit is in compliance.

6.6. If the answer to the checklist question is N/A there should be sufficient written justification that this question does not apply.

6.7. If the answer to the checklist question is NO, NOT IN COMPLIANCE, or IN COMPLIANCE WITH COMMENTS, then fully document the discrepancy. The problem should be explained as well as what corrective action is being taken or identify the discrepancy as a LIMFAC to be forwarded to HHQ for resolution.

6.8. Checklist items answered YES will be considered CLOSED; items answered NO, NOT IN COMPLIANCE, or IN COMPLIANCE WITH COMMENTS will be considered OPEN and called a discrepancy (Improvement Item, Critical Finding, Non-Critical Finding, or LIMFAC). In the case of two-part questions, if either part is NO, the overall checklist item is OPEN.

7. OPSEC. Consider the AW, squadron, and functional area Critical Information List data in the development, marking, and coordination of all 43 AW inspection documentation. Ensure effective control of sensitive information at all levels of the inspection and review process. To prevent unauthorized disclosure of critical information, shred all 43 AW inspection documents and sensitive inspection documents from other units when no longer needed. All FOUO documents should be shredded when no longer needed.

WINFIELD W. SCOTT III, Brigadier General, USAF
Commander

Attachment 1**GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

AFPD 90-2, *Inspector General – The Inspection System*

AFI 90-201, *Inspector General Activities*

AMCI 90-201, *The Inspection System*

AMCP 90-202, *Inspection Guide*

Abbreviations and Acronyms

AMC—Air Mobility Command

ASEV—Aircrew Standardization/Evaluation Visit

ATSEV—Air Transportation Standardization/Evaluation Visit

AW—Airlift Wing

CIP—Commander's Inspection Program

CIPM—Commander's Inspection Program Manager

EORI—Expeditionary Operational Readiness Inspection

FAM—Functional Area Manager

FOUO—For Official Use Only

GCIPM—Group Commander's Inspection Program Manager

HHQ—Higher Headquarters

HSI—Health Services Inspection

IR—Initial Response

JCAHO—Joint Commission on Accreditation of Healthcare Organizations

LIMFAC—Limiting Factor

WCM—Work Center Manager

OI—Operating Instruction

ORI—Operational Readiness Inspection

SII—Special Interest Item

SCIPM—Staff Commander's Inspection Program Monitor

TIG—The Inspector General

UCI—Unit Compliance Inspection

UCIPM—Unit Commander's Inspection Program Monitor

Terms

Checklist:— An inspection guide used as a management tool. Checklists are available on the AMC/IG website, from HQ AMC Functional Managers, or can be developed using applicable AF and AMC regulations and policies. Unit CIP Monitors and Functional Area Managers use checklists to determine whether the unit or work center is performing to standards.

Discrepancy:— Any noncompliance with regulation or policy. There are four categories of discrepancies: Limiting Factor, Critical Finding, Non-Critical Finding, and Improvement Item.

Limiting Factor (LIMFAC):—A discrepancy that limits or impedes the unit's ability to accomplish its mission and is normally beyond the unit's ability to correct.

Finding:— A discrepancy, which does not comply with policy or other regulatory guidance and limits or impedes the unit's ability to perform its mission, but correction is within the unit's capability. Findings are divided into two categories: Critical and Non-Critical

Critical Finding:— These findings identify a serious breach of public law; safety, security, or fiscal responsibility regulations; or a significant impact or a high probability of significant impact to mission accomplishment.

Non-Critical Finding:— Other findings which, if not corrected, could impact the economy, efficiency, and effectiveness of the unit being inspected but would not result in serious impact to mission accomplishment or have a very low probability of significant impact on the mission.

Improvement Item:— A discrepancy, which does not comply with policy or other guidance, but does not affect the unit's ability to accomplish the mission nor violate public law, safety, security, or fiscal responsibility regulations.

Corrective Action:— Actions taken to correct a discrepancy. Once accomplished, corrective actions must be validated by a qualified individual and reviewed by the commander before the discrepancy is closed.

Special Interest Items:— SIIs are issued at AF and Major Command levels, and inspected by all AMC units and the AMC/IG. The purpose of an SII is to determine the extent and impact of known or suspected problems, identify specific deficiencies, or to confirm that a previously identified problem has been corrected.

Crosstells:— Lessons learned or best practices from other units that may help other units improve combat readiness and/or mission effectiveness. Crosstells are documented in inspection reports, TIG Brief magazine, on websites, or shared directly.