Audit of the Impact of Coronavirus Disease–2019 on Basic Training
Results in Brief

Audit of the Impact of Coronavirus Disease–2019 on Basic Training

March 31, 2021

Objective

The objective of this audit was to determine whether the DoD established and the Military Services implemented procedures to prevent and reduce the spread of coronavirus disease–2019 (COVID-19) at their basic training centers.

Background

COVID-19 is an infectious disease that can cause a wide spectrum of symptoms. On March 11, 2020, the World Health Organization declared the COVID-19 outbreak a pandemic, and on March 13, 2020, the President declared the COVID-19 pandemic a national emergency. COVID-19 can transmit from person to person within 6 feet when an infected person coughs, sneezes, or talks.

Basic training is the initial period of training for new military recruits. During basic training, recruits obtain instruction that teaches military principles while preparing them for their careers. Disease outbreaks, such as COVID-19, can occur while recruits live in close quarters during training.

Each Military Service develops and executes its own basic training program at training centers across the United States. To determine whether the Military Services followed guidance and implemented procedures to prevent and reduce the spread of COVID-19, we selected six basic training centers to review: the Army's largest basic training center and all of the basic training centers for the Marine Corps, Navy, and Air Force. The six basic training centers selected for review were:

- U.S. Army Training Center and Fort Jackson, South Carolina;
- Marine Corps Recruit Depots, Parris Island, South Carolina, and San Diego, California;
- Navy Recruit Training Command, Great Lakes, Illinois; and

Finding

Despite the challenges with the global pandemic, the DoD and Military Services established procedures to prevent and reduce the spread of COVID-19. However, we determined that the Military Services did not fully implement the procedures at six basic training centers. Specifically, the training personnel at the six locations reported that they had challenges with:

- implementing DoD and Military Service-specific guidance issued to prevent and reduce the spread of COVID-19;
- the screening and testing of training personnel;
- practicing preventive measures, such as wearing face masks, washing hands, cleaning common areas, and enforcing social distancing (6-feet); and
- maintaining the quality of recruit training due to basic training modifications.

As a result, the potential for positive COVID-19 cases among recruits and training personnel may increase.

From January through August 2020,
Results in Brief
Audit of the Impact of Coronavirus Disease–2019 on Basic Training

Finding (cont’d)

{CUI} of 99,106 recruits and 6,007 training personnel at the six basic training centers tested positive for COVID-19. Any positive COVID-19 case could impact the life and safety of military personnel and their families, as well as the DoD's ability to accomplish its mission.

Recommendations

We recommend that the U.S. Army Training and Doctrine Command, Marine Corps Training and Education Command, Naval Education and Training Command, Naval Service Training Command, and Air Education and Training Command develop procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

We recommend that the Marine Corps Training and Education Command and Air Education and Training Command develop procedures to ensure compliance with requirements for the screening and testing of recruits and training personnel.

We recommend that the U.S. Army Training and Doctrine Command develop procedures to ensure compliance with the proper use of personal protective equipment (PPE).

We recommend that the Marine Corps Training and Education Command, Naval Education and Training Command, Naval Service Training Command, and Air Education and Training Command develop procedures to ensure compliance with proper use of cleaning supplies necessary for basic training.

We recommend that the Naval Education and Training Command, Naval Service Training Command, and Air Education and Training Command assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures and take appropriate action.

Management Actions Taken

In response to the draft report, the Military Services’ training commands provided documentation that outlined actions taken during the audit that addressed several recommendations made in a draft of this report. If the documentation showed that the Military Services’ training commands took action before the issuance of a draft of this report, December 7, 2020, we considered those actions as actions taken during the audit. Specifically, the Army developed procedures to ensure compliance with the screening and testing of recruits and training personnel and the use of cleaning supplies necessary for basic training. In addition, the Army and Marine Corps identified additional training personnel requirements needed to support COVID-19 procedures. The Navy developed screening and testing procedures for recruits and training personnel. The Marine Corps, Navy, and Air Force used lessons learned to ensure compliance with the use of personal protective equipment.

Management Comments and Our Response

As a result of management comments and supporting documentation, we revised and renumbered the recommendations to acknowledge management actions taken during the audit. We deleted the U.S. Army Training and Doctrine Command, Marine Corps Training and Education Command, Naval Education and Training Command, Naval Services Training Command, and Air Education and Training Command from Draft Report Recommendations 1.b, 1.c, and 1.d, and renumbered these recommendations as Recommendations 2, 3, 4, and 5.
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Comments (cont’d)

The Commanding General, U.S. Army Center of Initial Military Training, U.S Army Training and Doctrine Command, agreed with the recommendation to ensure proper use of PPE and partially agreed with the recommendation to implement COVID-19 guidance at basic training centers. The Commanding General’s comments addressed both recommendations and provided documentation of the actions taken to implement them. Both recommendations are closed.

The Audit Coordination and Liaison Head, Marine Corps, responding for the Executive Deputy, Marine Corps Training and Education Command, agreed with the recommendations to implement COVID -19 procedures at basic training centers, ensure compliance with screening and testing, and ensure compliance with proper use of cleaning supplies. The comments addressed all recommendations. The recommendations are resolved but will remain open. We will close those recommendations once management provides documentation that the actions have been completed.

The Inspector General, Naval Education and Training Command, responding for the Commander, Naval Education and Training Command, agreed with the recommendation to assess manpower requirements. The comments addressed the recommendation. The recommendation is resolved but will remain open. We will close this recommendation once management provides documentation that the actions have been completed. The Inspector General did not agree with the recommendation to implement COVID-19 procedures at basic training centers but the comments addressed the recommendation and management provided documentation of actions taken. Therefore, the recommendation is closed.

The Deputy Commander, Air Education and Training Command, partially agreed with the recommendations to implement COVID -19 procedures at basic training centers, ensure compliance with screening and testing, ensure compliance with proper use of cleaning supplies, and assess manpower training personnel requirements. However, the comments addressed the recommendations and management provided documentation of actions taken. Therefore, the recommendations to implement COVID-19 guidance and screen and test recruits and training personnel are closed. The two remaining recommendations are resolved, but will remain open. We will close the recommendations once management provides documentation that the actions have been completed.

Please see the Recommendations Table on the next page for the status of recommendations.
### Recommendations Table

<table>
<thead>
<tr>
<th>Management</th>
<th>Recommendations Unresolved</th>
<th>Recommendations Resolved</th>
<th>Recommendations Closed</th>
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<tr>
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<td>Commander, Air Education and Training Command</td>
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</tr>
</tbody>
</table>

**Note:** The following categories are used to describe agency management’s comments to individual recommendations.

- **Unresolved** – Management has not agreed to implement the recommendation or has not proposed actions that will address the recommendation.
- **Resolved** – Management agreed to implement the recommendation or has proposed actions that will address the underlying finding that generated the recommendation.
- **Closed** – The DoD OIG verified that the agreed upon corrective actions were implemented.
MEMORANDUM FOR AUDITOR GENERAL, DEPARTMENT OF THE ARMY
AUDITOR GENERAL, DEPARTMENT OF THE NAVY
AUDITOR GENERAL, DEPARTMENT OF THE AIR FORCE

SUBJECT: Audit of the Impact of Coronavirus Disease-2019 on Basic Training
(Report No. DODIG-2021-069)

This final report provides the results of the DoD Office of Inspector General’s audit. We previously provided copies of the draft report and requested written comments on the finding. We considered management’s comments on the draft report when preparing the final report. These comments are included in the report.

The Commanding General, U.S. Army Center of Initial Military Training, U.S Army Training and Doctrine Command, agreed to address the recommendations presented in the report. Management comments and documentation that was provided to support the associated actions taken by the Commanding General addressed the recommendations in this report, and we consider those recommendations closed. The Deputy Commander, Air Education and Training Command, and Commander, Naval Education and Training Command, management comments and the documentation provided to support the associated actions taken addressed one recommendation in this report, and we consider that recommendation closed. The Deputy Commander management comments and the documentation provided to support the associated actions taken addressed another recommendation in this report, and we consider that recommendation closed. In addition, the Deputy Commander and Commander agreed to address the remaining recommendations presented in the report; therefore, we consider those recommendations resolved and open. The Executive Deputy, Marine Corps Training and Education Command, agreed to address the recommendations presented in the report, therefore, we consider those recommendations resolved and open.

As described in the Recommendations, Management Comments, and Our Response sections of this report, we will close the recommendations when you provide us documentation showing that all agreed-upon actions to implement the recommendations are completed. Please provide us, within 90 days, your response concerning specific actions in process or completed on the recommendations. Send your response to either followup@dodig.mil if unclassified or rfunet@dodig.smil.mil if classified SECRET.

If you have any questions, please contact me at Richard B. Vasquez
Assistant Inspector General for Audit
Readiness and Global Operations
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Introduction

Objective
The objective of this audit was to determine whether the DoD established and the Military Services implemented procedures to prevent and reduce the spread of coronavirus disease–2019 (COVID-19) at their basic training centers. See Appendix A for our scope and methodology and prior audit coverage.

Background

Basic Training
Basic training is the initial period of training for new military recruits. During basic training, recruits obtain instruction that teaches the history, organization, tactics and methods for their respective branch of the military (Army, Marine Corps, Navy, and Air Force). Basic training includes marksmanship, combat, lifesaving, leadership skills, and the rules of the Uniform Code of Military Justice. After successfully completing basic training, the recruit graduates and becomes a military service member, reports to their assigned unit, or advances to the next level of training.

Each Military Service develops and executes a service-specific basic training program at training centers across the United States.

- **Army Basic Combat Training Centers**
  - Fort Jackson, Columbia, South Carolina
  - Fort Sill, Lawton, Oklahoma
  - Fort Leonard Wood, St. Robert, Missouri

- **Marine Corps Recruit Depots**
  - Marine Corps Recruit Depot San Diego, California (MCRD SD)
  - Marine Corps Recruit Depot Parris Island, South Carolina (MCRD PI)

- **Navy Recruit Training Command** (RTC), Great Lakes, Illinois

- **Air Force Basic Training Center**, Joint Base San Antonio (JBSA)–Lackland, San Antonio, Texas

Basic Training Centers Selected for Review
To determine whether the DoD established and the Military Services implemented procedures to prevent and reduce the spread of COVID-19 at basic training centers, we selected the Army’s main basic training center and all of the basic training centers for the Marine Corps, Navy, and Air Force.
**U.S. Army Training Center and Fort Jackson, South Carolina**

The U.S. Army Training Center and Fort Jackson (Fort Jackson), Columbia, South Carolina, is the largest of the Army’s three basic training centers. Each year, 40,000 recruits, 50 percent of all Soldiers entering the Army each year, train at Fort Jackson. The Army basic training program lasts 10 weeks, covering physical and classroom training. The first 3 weeks include physical fitness and classroom work focusing on fundamentals, laws, nutrition, and warfare. Weeks 4 through 6 focus primarily on the skills and knowledge needed to become a qualified rifleman, including passing the rifle qualification. Weeks 7 through 10 bring together all the skills learned, including how to employ different weapons, work as a team, and complete operations, which include a field test and long march.

**Marine Corps Recruit Depots, Parris Island, South Carolina, and San Diego, California**

The Marine Corps has two basic training centers at MCRD SD, California, and MCRD PI, South Carolina. Each year, approximately 37,000 recruits complete the 13-week basic training course at the MCRDs. During the first 4 weeks of basic training, Marine Corps recruits receive physical, martial arts, and classroom training that includes Marine Corps history and first aid. During weeks 5 through 9, recruits undergo gas chamber training, help in supply warehouses, and relocate to the Weapons and Field Training Battalions. At the Weapons and Field Training Battalions, recruits learn combat skills, and marksmanship. During weeks 10 through 13, recruits are tested on their knowledge of Marine Corps history, performance of drill and inspections, participate in a final field training exercise, and prepare for graduation.

**Navy Recruit Training Command, Great Lakes, Illinois**

RTC Great Lakes, located in Great Lakes, Illinois, is the Navy’s only basic training center. Each year, approximately 35,000 recruits complete the 8-week basic training course. During the first 7 weeks, Navy recruits learn the fundamentals of small arms marksmanship, seamanship, water survival, line handling, and firefighting, and receive classroom instruction on Navy tradition, customs, and discipline. During the last week of training, recruits undergo a final evaluation before graduation.
Air Force Basic Training Center at Joint Base San Antonio–Lackland, Texas

JBSA-Lackland, located in San Antonio, Texas, is the Air Force’s only basic training center. Each year, 35,000 recruits train at JBSA-Lackland for 8 weeks. Air Force recruit training includes classroom instruction, drills, small arms training, and physical training. During the first 3 weeks, recruits are assigned to their unit, receive their weapons, and begin classroom training. The topics covered during classroom training include entry control procedures, Air Force history, weapon handling and maintenance, comprehensive fitness, laws of armed conflict, and anti-terrorism techniques. Beginning in the first week, recruits start drill and physical conditioning, which continue throughout the course of basic training. Weeks 4 and 5 include combat training. During week 6, recruits undergo their physical training evaluation, take written tests, and continue additional coursework. Recruits graduate during week 7 and transition to technical training in their specialization in week 8, before joining their assigned squadrons.¹

Coronavirus Disease–2019

Coronavirus disease–2019 (COVID-19) is an infectious disease that can cause a wide spectrum of symptoms. On March 11, 2020, the World Health Organization declared the COVID-19 outbreak a pandemic, and on March 13, 2020, the President declared the COVID-19 pandemic a national emergency.² Under the Coronavirus Aid, Relief, and Economic Security Act (CARES Act) enacted on March 27, 2020, the DoD received $10.5 billion to prevent, prepare for, and respond to COVID-19, domestically and internationally. According to the Centers for Disease Control and Prevention (CDC), COVID-19 can spread mainly from person to person when an infected person coughs, sneezes, or talks. Spread can occur when people are in close contact with one another, within about 6 feet. Symptoms include fever, chills, cough, sore throat, shortness of breath, and body aches. Symptoms of COVID-19 may appear in as few as 2 days or as long as 14 days after exposure. Ways to prevent and reduce the spread of COVID-19 include washing hands; avoiding close contact and practicing social distancing; covering the mouth and nose with a cloth face mask in public settings or when social distancing is difficult; covering coughs and sneezes; cleaning and disinfecting surfaces; and monitoring health.³

¹ Beginning April 7, 2020, to alleviate the high number of recruits at JBSA-Lackland, the Air Force sent 60 recruits to Keesler Air Force Base in Biloxi, Mississippi, which restructured how recruits enter the training pipeline at JBSA-Lackland.
² A pandemic is a global outbreak of a disease that occurs when a new virus emerges to infect people and can spread between people sustainably.
³ Social distancing is the practice of staying at least 6 feet apart to prevent and reduce the spread of COVID-19.
Secretary of Defense COVID-19 Response for Basic Training

In January 2020, the Office of the Under Secretary of Defense for Personnel and Readiness (OUSD[P&R]) began issuing guidance on behalf of the DoD, in response to COVID-19 (see Appendix B for a listing of OUSD(P&R) guidance). As the pandemic continued to progress, OUSD(P&R) issued supplemental guidance with updated preventive measures to prevent and reduce the spread of COVID-19. Preventive measures outlined in OUSD(P&R) guidance include:

- screening with temperature and visual checks for signs and symptoms of COVID-19 exposure;⁴
- testing in mission essential or high risk settings, such as training commands, to assess the risk of COVID-19;⁵
- developing and implementing Restriction of Movement procedures to prevent the spread of COVID-19 and minimize the risk of COVID-19 exposure;⁶
- hand washing with soap and water or using hand sanitizer when soap and water are unavailable;
- cleaning and disinfecting common areas;
- practicing social distancing; and
- wearing face masks when unable to practice social distancing.⁷

On April 3, 2020, the Secretary of Defense issued a memorandum that authorized the Secretaries of the Military Departments to pause basic training for 2 weeks effective April 6, 2020, if they determined that time was required to plan, adjust protocols, and secure materials in response to the COVID-19 pandemic.⁸ The memorandum outlined that the Military Departments should base their decisions on whether to continue processing recruits for basic training that accounts for:

- the spread of the virus,
- the ability to protect and treat personnel,
- the effectiveness of the training,

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• the ability to generate substitutes for any training personnel who may become infected,
• the risk (near- and long-term) to the force of either a continuation or a pause; and
• the appropriate force health protection measures, to ensure the training pipeline does not reduce significantly.

**Military Service Response to COVID-19 for Basic Training**

The Military Services require recruits to train together in large numbers, often in tight spaces, under physical stress, and at minimal personal distance, which can aid the spread of disease. To prevent and reduce the spread of COVID-19, the Military Services established and implemented procedures including:

- Stop Movement orders;\(^9\)
- Restriction of Movement;\(^{10}\)
- Social distancing; and
- Suspending public graduations.

See Appendix B for a listing of the Military Services’ guidance related to basic training, COVID-19 and pandemic response.

**Army**

On March 16, 2020, the Army issued a Stop Movement order to restrict travel to and from Fort Jackson through May 11, 2020. On April 6, 2020, the Army temporarily suspended sending new recruits to basic training at Fort Jackson, for 2 weeks. Beginning April 20 through May 25, 2020, Fort Jackson began receiving recruits at a reduced capacity of 50 percent, then 75 percent, and finally 100 percent on May 25, 2020. As of August 2020, Fort Jackson continued to practice social distancing and did not allow guests to attend graduation ceremonies.

**Marine Corps**

On March 30, 2020, the Marine Corps temporarily stopped processing new Marine Corps recruits at MCRD Parris Island (MCRD PI) after 20 recruits and drill instructors tested positive for COVID-19. In April 2020, MCRD PI resumed accepting new recruits and implemented a 14-day Restriction of Movement, which required recruits to be quarantined, initially in a staging area on the MCRD run by a contractor

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\(^9\) A Stop Movement order is a temporary change in DoD policy regarding travel for military members and family members, and transfer regulations for Temporary Duty, Permanent Change of Station, or other official moves.

\(^{10}\) Restriction of Movement is defined as the limitation of personal liberty for the purpose of ensuring health.
before relocating off base at The Citadel in May 2020, before entrance to the MCRD.\textsuperscript{11} As of July 20, 2020, the Marine Corps started sending Marine Corps recruits to hotels in Atlanta, Georgia, for the 14-day Restriction of Movement, to accommodate incoming students attending The Citadel. As of August 2020, MCRD PI continued to practice social distancing, and did not allow guests to attend graduation ceremonies.

As of April 9, 2020, MCRD SD continued to process new recruits but screened all recruits for COVID-19 when they arrived in San Diego, issued a 14-day Restriction of Movement requiring recruits to be quarantined off base in area hotels, and tested recruits again once they reached MCRD SD. As of August 2020, MCRD SD continued to practice social distancing, and did not allow guests to attend graduation ceremonies.

**Navy**

On March 30, 2020, in response to detecting their first positive case of COVID-19, RTC Great Lakes leadership isolated the individual from other recruits and delayed the arrival of new Navy recruits by 1 week. That delay extended until April 19, 2020, to ensure the Navy took appropriate steps to keep recruits, recruit division commanders, and other personnel safe. Starting on April 20, 2020, new recruits arriving at RTC Great Lakes were subject to the 14-day Restriction of Movement policy and, as of August 2020, the Navy continued to quarantine recruits off base at a hotel prior to entry into the RTC. RTC Great Lakes suspended large-scale graduation ceremonies in March 2020.

**Air Force**

On March 10, 2020, the Air Force closed graduation ceremonies to the public. On March 18, 2020, the Air Force began isolating recruits on base in a 14-day Restriction of Movement upon arrival at JBSA-Lackland. Modified training began the first day of the Restriction of Movement period. Beginning April 3, 2020, to alleviate the number of recruits at JBSA-Lackland, the Air Force sent 60 recruits to Keesler Air Force Base (AFB) in Biloxi, Mississippi. On May 26, 2020, the Air Force announced that it would continue to send 60 recruits per week to Keesler AFB for basic training.

\textsuperscript{11} The Citadel is a military college located in Charleston, South Carolina.
Review of Internal Controls

DoD Instruction 5010.40 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.\textsuperscript{12} We identified internal control weaknesses related to the Military Services’ implementation of procedures to prevent and reduce the spread of COVID-19 at six basic training centers selected for review. We will provide a copy of the final report to the senior official responsible for internal controls in each service.

Finding

The Military Services Did Not Fully Implement Procedures to Prevent and Reduce the Spread of COVID-19

Despite the challenges of a global pandemic, the DoD and Military Services established procedures to prevent and reduce the spread of COVID-19. However, the Military Services did not fully implement the procedures at six basic training centers. Specifically, the six basic training centers training personnel had challenges with:

- implementing DoD and Military Service specific guidance issued to prevent and reduce the spread of COVID-19;
- the screening and testing of training personnel;
- practicing preventive measures such as wearing cloth face masks, washing hands frequently, cleaning common areas, and enforcing social distancing due to limited supplies and resources; and
- maintaining the quality of recruit training due to basic training modifications.

As a result, the potential for additional recruits and training personnel testing positive for COVID-19 may increase. Between January and August 2020, for the six basic training centers we selected for review, the DoD received 99,601 recruits. Out of the 99,601 recruits, tested positive for COVID-19, while at the basic training centers. In addition, 6,007 training personnel reported to the basic training centers selected for review. Out of 6,007 training personnel, tested positive for COVID-19. Any positive COVID-19 cases have the potential to impact the life and safety of military personnel and their families as well as the DoD’s ability to accomplish its mission.
The DoD and Military Services Established Procedures and Safeguards to Prevent and Reduce the Spread of COVID-19

Despite the challenges of a global pandemic, the DoD and the Military Services established procedures and safeguards for Military Services to implement to help reduce and prevent the spread of COVID-19 throughout the DoD. In addition, the Military Services established additional procedures and safeguards at the basic training centers to prevent and reduce the spread of COVID-19. The procedures and safeguards established by DoD and the Military Services included:

- issuing guidance based on CDC recommendations;
- conducting multiple screenings (temperature and visual checks for signs and symptoms of COVID-19 exposure) for COVID-19 symptoms;
- testing in mission essential or high-risk settings, such as training commands;
- developing and implementing Restriction of Movement procedures to prevent the spread of COVID-19 and minimize the risk of COVID-19 exposure;
- requiring preventive measures such as cloth face masks, frequent hand-washing, cleaning common areas, and social distancing; and
- modifying basic training requirements.

The OUSD(P&R) issued Force Health Protection Guidance with 11 supplements between January 30, 2020, and June 11, 2020. For example, Force Health Protection Guidance Supplement 7 required preventive measures such as:

- handwashing with soap and water or using hand sanitizer when soap and water is unavailable;
- cleaning and disinfecting common areas;
- practicing social distancing; and
- wearing face masks when unable to practice social distancing.\(^{13}\)

In addition, the Military Services established additional procedures and safeguards at the basic training centers to prevent and reduce the spread of COVID-19. The following documents are one example from each Military Service describing some of the additional COVID-19 procedures and safeguards they implemented.\(^\text{14}\)

- **(FOUO)** The Army issued [Footnote link](#)
- The Marine Corps issued MCRD/Western Recruiting Region, Depot Bulletin 5100, “Preparation and Response to Infectious Disease Novel Coronavirus (COVID-19),” March 2020, which synchronizes efforts to prepare for, mitigate, respond to, stabilize, and recover from the effects of COVID-19 such as hand washing with soap and water for at least 20 seconds or using 60 percent alcohol-based sanitizer.\(^\text{16}\)
- The Navy issued Commander, Navy Installations Command, Fragmentary Order to PLANORD [Planning Order] for COVID-19 Response, Naval Station Great Lakes, March 2020, which outlines quarantine procedures such as identifying buildings and transportation to be used for quarantined individuals.\(^\text{17}\)
- The Air Force’s JBSA-Lackland issued JBSA-Lackland Guidance memorandum 19, “Social Distancing,” March 27, 2020, that outlines social distance requirements such as avoiding individual interactions at distances closer than 6 feet for more than 10 minutes’ duration for non-household members.\(^\text{18}\)

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\(^{14}\) Each Military Service issued guidance in addition to the examples listed. For more examples of the guidance issued by each Military Service, see Appendix B.

\(^{15}\) *(FOUO)*


\(^{17}\) Commander, Navy Installations Command, Fragmentary Order to PLANORD for COVID-19 Response, Naval Station Great Lakes, March 12, 2020.

Table 1 summarizes procedures and safeguards established by the Military Services in an effort to prevent or reduce COVID-19 at basic training centers.

**Table 1. Military Service COVID-19 Basic Training Procedures**

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Arrival at Basic Training</strong></td>
<td>100% testing</td>
<td>100% testing prior to arrival; Symptomatic testing after arrival only</td>
<td>Symptomatic testing only</td>
<td>Symptomatic testing (until May 21, 2020) 100% testing (as of May 2020)</td>
</tr>
<tr>
<td><strong>Restriction of Movement Once at Basic Training</strong></td>
<td>On-Site: 100% testing after Restriction of Movement</td>
<td>On-site: MCRD PI (April through May 2020) Off-site: MCRD SD-hotel and MCRD PI-The Citadel (May through July 2020); hotels in Atlanta (as of August 2020) 100% testing after Restriction of Movement</td>
<td>Off-site at Hotel: 100% testing after Restriction of Movement</td>
<td>On Site: 100% testing after Restriction of Movement</td>
</tr>
<tr>
<td><strong>Modified Basic Training</strong></td>
<td>Length: No change</td>
<td>Length: No change</td>
<td>Length: as of March 2020, 7 weeks Post-ROM Training versus 8 weeks</td>
<td>Length: as of April 2020, 7.5 versus 8.5 weeks</td>
</tr>
<tr>
<td><strong>Preventative Measures During Basic Training</strong></td>
<td>Cloth face masks, frequent hand washing, common area cleaning, social distancing</td>
<td>Cloth face masks, frequent hand washing, common area cleaning, social distancing</td>
<td>Cloth face masks, frequent hand washing, common area cleaning, social distancing; daily temperature screenings</td>
<td>Cloth face masks, frequent hand washing, common area cleaning, social distancing</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.
Figure 1 shows an example of the Air Force practicing social distancing by converting a dormitory into a classroom and the recruits’ desks spaced apart.

Figure 1. Air Force Dormitory Converted Into Classroom for Social Distancing
Source: Air Force Basic Training Center, JBSA-Lackland.

Figure 2 shows an example of the Navy practicing social distancing while setting up a dormitory by creating at least 6 feet between each bunk bed.

Figure 2. Navy Dormitory Set Up for Social Distancing
Source: Recruit Training Command, Great Lakes.
To help reduce and prevent the spread of COVID-19 throughout the DoD, the DoD and the Military Services established procedures and safeguards for the Military Services to implement. In addition, the Military Services established additional procedures and safeguards at the basic training centers to prevent and reduce the spread of COVID-19.

The Military Services Did Not Fully Implement Procedures to Prevent and Reduce the Spread of COVID-19 at Basic Training Centers

Although the DoD and the Military Services established procedures to prevent and reduce the spread of COVID-19, the Military Services did not fully implement the procedures at the six basic training centers. Specifically, the six basic training centers training personnel reported challenges with:

- implementing DoD and Military Service guidance issued to prevent and reduce the spread of COVID-19;
- the screening and testing of training personnel;
- practicing preventive measures such as wearing cloth face masks, washing hands frequently, cleaning common areas, and enforcing social distancing due to limited supplies and resources; and
- maintaining the quality of recruit training due to basic training modifications.

During the audit, we conducted a survey between July 24 and August 7, 2020 of first line training personnel (training personnel) such as drill instructors, military training instructors, recruit division commanders, and drill sergeants at six basic training centers regarding their experiences with the COVID-19 pandemic. The audit team sent the survey to the six basic training centers, which identified a potential respondent pool of 3,549 training personnel. We received 2,030 surveys, a 57 percent response rate, to identify which COVID-19 procedures and safeguards were implemented at the basic training centers.19 Table 2 shows the potential number of respondents and the actual number of responses received for each Military Service.

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19 Although we received 2,030 surveys, not all 2,030 participants responded to every question, and as a result, the total number of participants responding to each question may differ. Appendix C contains full survey results.
Table 2. Potential Number of Respondents and Number of Responses Received by Military Service

<table>
<thead>
<tr>
<th>Participants</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>No Military Service Provided</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Potential Number of Respondents</td>
<td>935</td>
<td>1,215</td>
<td>780</td>
<td>619</td>
<td>N/A</td>
<td>3,549</td>
</tr>
<tr>
<td>Number of Responses Received</td>
<td>895* (96%)</td>
<td>545 (45%)</td>
<td>227 (29%)</td>
<td>278 (45%)</td>
<td>85*</td>
<td>2,030</td>
</tr>
</tbody>
</table>

*One Army respondent did not identify their Military Service but identified their training center location and, as a result, this individual has been included in the total Army respondents, bringing the number of responses received from the Army up to 895 and reducing the number of responses with no Military Services provided by 1.

Source: The DoD OIG.

The survey responses represent the experience and perspective of the training personnel who answered the survey. We also reviewed COVID-19 guidance distributed to basic training centers from January through July 2020, and interviewed basic training personnel other than first line training personnel, such as commanders, chief training officers, and medical personnel for the basic training centers. We used the survey results, interviews of basic training personnel, and CDC, DoD, and Military Service guidance to determine whether the established procedures to prevent and reduce the spread of COVID-19, were implemented once recruits started attending basic training.

**Basic Training Center Personnel Described Challenges With Implementing COVID-19 Guidance**

In January 2020, the DoD and Military Services established procedures and safeguards to prevent and reduce the spread of COVID-19. However, basic training center personnel identified challenges with implementing COVID-19 procedures and safeguards. Specifically, training personnel at the six basic training centers reported that they had difficulty complying with aspects of DoD and Military Service COVID-19 procedures and safeguards due to the close proximity in which recruits live and train. Out of 1,899 respondents who discussed the COVID-19 guidance they received,

- 874 (46 percent) reported that COVID-19 guidance, procedures, and safeguards were clear;
- 818 (43 percent) reported that the guidance was timely;
• 444 (23 percent) reported that the guidance was accurate; and
• 145 (8 percent) reported that no guidance was received.20

Additionally, basic training center personnel at all six centers expressed concerns with DoD and Military Service guidance.

• “Guidance did not take into account all aspects of BMT (basic military training). Guidance was slow to be implemented compared to civilian community.”
• “6 ft. distance is difficult in regard to formations and drill, not to mention recruit living areas.”
• “Quarantine guidance is not the same for staff members as it is for recruits. We had staff members contract the disease, and it was deemed ‘an acceptable risk’ but one recruit would be positive and the whole division would be ROM’d (Restriction of Movement).”

Training personnel at the six basic training centers reported that they had difficulty complying with aspects of DoD and Military Service COVID-19 procedures and safeguards to prevent and reduce the spread of COVID-19. Therefore, the U.S. Army Training and Doctrine Command; Marine Corps Training and Education Command; Naval Education and Training Command; Naval Service Training Command; and Air Education and Training Command should develop procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

**Basic Training Center Personnel Described Challenges With Screening and Testing of Training Personnel**

DoD guidance requires DoD Components to perform COVID-19 testing of those personnel in high risk settings such as training commands.21 In addition, DoD guidance requires components to ensure that Military Service members who are tested receive their test results.22 However, we found that basic training centers did not screen and test all training personnel before they came into contact with recruits. Out of 1,804 respondents (training personnel), 813 (45 percent) reported that they were screened for COVID-19 symptoms before contact with recruits and other personnel, while 991 (55 percent) reported that they were not screened before contact with recruits and other personnel.

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20 Respondents answering the survey question, “Was the guidance you received: clear, timely, accurate, or no guidance received?” were instructed to choose all of the options that applied, allowing each survey participant to select more than one response. Therefore, the numbers will not add up to the total of 1,899 respondents.
In addition, the survey results showed that when the six basic training centers were administering COVID-19 tests to training personnel during the training cycle, 1,213 out of 1,804 (67 percent) respondents reported that they were tested for COVID-19 with:

- 377 (31 percent) reporting they were tested before contact with recruits;
- 866 (71 percent) tested after having contact with recruits; and
- 187 (15 percent) were tested only after exhibiting symptoms.\(^\text{23}\)

Furthermore, basic training center personnel at the training centers expressed the following concerns with receiving test results.

- “I never received results, but I also was never told I was positive so I would assume that I tested negative. So I have no idea how long it took for the results to come back, but I wasn’t tested until at least a month or so after being locked on base. They should have tested everyone before the lock down in order to ensure that this place was a safe and clean environment, but it wasn’t.”
- “5 days (to receive results). I was told the test was negative and 2 days later received a call that it was positive.”
- “I personally never received results. Trainees that tested positive were notified within 96 hours, but at that point there is no telling how far they could have spread COVID.”
- “Tested once after being around trainees for a week. Their (recruits’) tests had been received within the next day showing positive tests. We still continued to work around them without receiving our (cadre) results. Finally after about five days we got them after every trainee had received theirs.”

Even though training centers are testing training personnel and recruits, our survey results showed that the six training centers were not providing test results in a timely or consistent manner. Specifically, 55 percent of the respondents reported that they were not screened before contact with recruits and other personnel. In addition, 67 percent of respondents reported that they were tested for COVID-19, but expressed concerns about not receiving their test results.

\(^{23}\) The 1,213 respondents who indicated that they had been tested for COVID-19 were asked to indicate when the test was administered when answering the follow-up survey question, “At which point were you administered a COVID-19 test?” and were instructed to choose all of the options that applied, allowing each survey participant to select more than one response. Therefore, the numbers will not add up to the total of 1,213 respondents.
Therefore, the Marine Corps Training and Education Command; and Air Education and Training Command should develop procedures to ensure compliance with the requirement for screening and testing of recruits and training personnel, including procedures for timely testing and delivery of results.

**Basic Training Center Personnel Described Challenges With Enforcing Preventive Measures Due to Supplies and Resources**

In an effort to prevent and reduce the spread of COVID-19, the Military Services provided personal protective equipment (PPE) (such as cloth face masks and gloves) and cleaning supplies to basic training centers. However, training personnel at the six training centers reported having challenges with implementing COVID-19 preventive and safeguard measures such as training personnel and recruits wearing cloth face masks, washing hands frequently, cleaning common areas, and enforcing social distancing required by DoD guidance. In addition, while PPE and cleaning supplies were available at the basic training centers, there were challenges with staff availability to ensure compliance with COVID-19 procedures.

**Personal Protective Equipment and Cleaning Supplies Availability**

The Military Services provided PPE to basic training centers in an effort to prevent and reduce the spread of COVID-19. However, training personnel reported that there were challenges in enforcing preventive measures such as training personnel and recruits wearing cloth face masks, washing hands frequently, cleaning common areas, and enforcing social distancing required by DoD guidance. DoD guidance requires:

- handwashing with soap and water or using hand sanitizer when soap and water are unavailable;
- cleaning and disinfecting common areas;
- practicing social distancing; and
- wearing face masks when unable to practice social distancing.

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24 PPE includes protective clothing, helmets, goggles, or other garments or equipment designed to protect the wearer’s body from injury or infection.


Figure 3 shows an Army recruit sanitizing equipment at Fort Jackson.

According to the training personnel who responded to our survey, PPE and cleaning supplies were available to prevent and reduce the spread of COVID-19. Specifically, 1,450 (79 percent) of 1,847 respondents stated that PPE, such as gloves and face masks, were available at the basic training centers. Table 3 summarizes training personnel answers to the survey question on what PPE the basic training centers received from the Military Services.
Table 3. Survey Responses to PPE Received at Basic Training Centers by Military Service

<table>
<thead>
<tr>
<th></th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloves</td>
<td>378 (59%)</td>
<td>122 (27%)</td>
<td>59 (37%)</td>
<td>39 (21%)</td>
<td>598 (41%)</td>
</tr>
<tr>
<td>Masks</td>
<td>598 (93%)</td>
<td>453 (98%)</td>
<td>138 (87%)</td>
<td>176 (93%)</td>
<td>1,365 (94%)</td>
</tr>
<tr>
<td>Respirators</td>
<td>10 (2%)</td>
<td>2 (&lt;1%)</td>
<td>2 (1%)</td>
<td>0</td>
<td>14 (1%)</td>
</tr>
<tr>
<td>None</td>
<td>15 (2%)</td>
<td>1 (&lt;1%)</td>
<td>7 (4%)</td>
<td>6 (3%)</td>
<td>29 (2%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>641</strong></td>
<td><strong>460</strong></td>
<td><strong>158</strong></td>
<td><strong>190</strong></td>
<td><strong>1,449</strong>*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service. In addition, the 1,449 respondents who indicated that PPE has been available for the training environment were asked to indicate the types of PPE provided when answering the followup survey question, “What PPE Have You Received?” and were instructed to choose all of the options that applied, allowing each survey participant to select more than one response. Therefore, the numbers will not add up to the total of 1,449 respondents and the percentages will not add up to 100 percent.

Source: The DoD OIG.

Additionally, 1,569 (86 percent) of 1,825 respondents stated that various different cleaning supplies, such as soap, cleaning wipes or disinfectant spray, and hand sanitizer were available for basic training. Table 4 summarizes survey responses that stated cleaning supplies were received at basic training centers by Military Service.

Table 4. Survey Responses to Supplies Received at Basic Training Centers by Military Service

<table>
<thead>
<tr>
<th></th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soap</td>
<td>559 (79%)</td>
<td>343 (76%)</td>
<td>142 (74%)</td>
<td>172 (78%)</td>
<td>1,216 (78%)</td>
</tr>
<tr>
<td>Cleaning Wipes and Disinfectant Spray</td>
<td>615 (87%)</td>
<td>327 (73%)</td>
<td>127 (66%)</td>
<td>150 (68%)</td>
<td>1,219* (78%)</td>
</tr>
<tr>
<td>Hand Sanitizer</td>
<td>660 (93%)</td>
<td>372 (83%)</td>
<td>168 (88%)</td>
<td>209 (95%)</td>
<td>1,409 (90%)</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>706</strong></td>
<td><strong>449</strong></td>
<td><strong>192</strong></td>
<td><strong>221</strong></td>
<td><strong>1,568</strong>*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service. In addition, the 1,568 respondents who indicated that cleaning supplies have been available for basic training were asked to indicate the types of cleaning supplies provided when answering the followup survey question, “What Supplies Have You Received?” and were instructed to choose all of the options that applied, allowing each survey participant to select more than one response. Therefore, the numbers will not add up to the total of 1,568 respondents and the percentages will not add up to 100 percent.

Source: The DoD OIG.
Training personnel reported experiencing challenges in enforcing preventive measures such as wearing cloth face masks and sanitizing commonly touched surfaces. Basic training personnel made the following comments to outline these challenges.

- “How can I make a recruit wear a mask that has been destroyed, ruined, or is filthy without having a replacement readily accessible. The alternative is the neck gaiter and it is summer.”
- “You want (things) sanitized yet give us very limited cleaning supplies.”
- “(We receive) supplies but not nearly as much as needed for the cleaning schedules with COVID-19.”
- “Wearing masks on the gun range causes safety glasses to fog, creating an unsafe training environment.”
- “(It’s) not feasible to wear a mask for 18 hours in 100 degree weather with 100 percent humidity.”
- “Masks are significantly hindering physical training. Wearing gloves is prohibitive as well for some training.”

While the six basic training centers had PPE and cleaning supplies, the training personnel reported there were challenges enforcing preventive measures to ensure compliance with COVID-19 procedures required by DoD guidance. Therefore, the U.S. Army Training and Doctrine Command should develop procedures to ensure compliance with the use of PPE necessary for basic training, including defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments. Therefore, the Marine Corps Training and Education Command; Naval Education and Training Command; Naval Service Training Command; and Air Education and Training Command should develop procedures to ensure compliance with the use of cleaning supplies necessary for basic training.

**Challenges With Staff Availability to Ensure Compliance With COVID-19 Procedures and Safeguards**

The Military Services provided additional personnel to basic training centers to assist with implementing COVID-19 procedures and safeguards. For example, the Army utilized the U.S. Army Reserves to assist with COVID-19 screening and testing requirements and the Navy increased and filled additional administrative, instructor, and recruit division commander positions. At the same time, the Military Services continued to accept and train recruits, only decreasing FY 2020 recruiting goals by 13,579 recruits (8 percent). Table 5 shows FY 2020 recruiting goals for the Military Services.
Table 5. FY 2020 Recruiting Goals by Military Service as of August 2020

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Recruiting Goal as of January 2020</th>
<th>Recruiting Goal as of August 2020</th>
<th>Difference</th>
<th>Percent of Recruiting Goal Adjusted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>69,000</td>
<td>62,000</td>
<td>7,000</td>
<td>10%</td>
</tr>
<tr>
<td>Marine Corps</td>
<td>31,000</td>
<td>28,421</td>
<td>2,579</td>
<td>8%</td>
</tr>
<tr>
<td>Navy</td>
<td>40,800</td>
<td>39,600</td>
<td>1,200</td>
<td>3%</td>
</tr>
<tr>
<td>Air Force</td>
<td>29,068</td>
<td>26,268</td>
<td>2,800</td>
<td>10%</td>
</tr>
<tr>
<td>Total</td>
<td>169,868</td>
<td>156,289</td>
<td>13,579</td>
<td>8%</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

However, training personnel reported that there were challenges with having enough staff to ensure compliance with COVID-19 procedures. Training personnel from the basic training centers noted the following challenges.

- “[There is] significantly low manpower to support new requirements with social distancing and additional quarantine duties.”
- “Manning shortfalls are destroying the morale and mental [health] of Sailors every day. Families are suffering because of this to the point of frustration and mental breakdowns.”
- “Undermanned for the scope of our operations in the COVID-19 environment. Decisions to quarantine initial accessions off-site has led to a significant increase in manning requirements. As it stands, the command does not have adequate resources to continue to function without significant support from outside facilities. No command has been structured in a way to deal with a pandemic, which is a major failing on our part as a military force.”
- “Additional manning or allowing current instructors to extend to fulfill some of the manpower shortage. Additionally, we should not have a significant amount of recruits report for basic training every week. The fewer amount of recruits and flights we have each week will free up instructors for additional coverage. It will also allow a break for instructors actively training recruits.”
- “The need for more manpower is a must! We are so concerned about the Recruits, but what about the haul it has on our Instructors? How do we take care of them? Allowing more non-accession weeks will allow each squadron to sanitize the squadrons and allow the Field Training facilities to sanitize thoroughly.”
Even though the Military Services provided additional personnel to basic training centers to assist with implementing COVID-19 procedures, training personnel reported challenges with having enough staff to ensure compliance with COVID-19 procedures. Therefore, the Naval Education and Training Command; Naval Service Training Command; and Air Education and Training Command should assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance and take appropriate action based on that assessment.

**Basic Training Center Personnel Described Challenges In Maintaining the Quality of Recruit Training**

The Military Services suspended various basic training events at the six basic training centers in an effort to prevent and mitigate COVID-19 spread among recruits. Examples of some suspended basic training events included:

- hand-to-hand combat exercises;
- fire and movement;
- fitness tests required for graduation; and
- chemical, biological, radiological, and nuclear training.

Military Service leadership and training personnel expect that recruits will complete the suspended training events either at their assigned unit or in advanced training.

The Military Services suspended various basic training events in an effort to prevent and reduce the spread of COVID-19; however, training personnel at the six basic training centers reported concerns about the quality of service members who graduated basic training (referred to as graduates) because of the suspended events. Out of 1,767 respondents, 1,266 (72 percent) reported having concerns that basic training provided under COVID-19 procedures and safeguards was not producing quality graduates. Table 6 summarizes survey responses related to whether suspended basic training had an impact on the quality of basic training centers graduates.
Finding

Table 6. Survey Responses to Expressing Concerns About the Quality of Basic Training Center Graduates by Military Service

<table>
<thead>
<tr>
<th></th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Knowledge</strong></td>
<td>265</td>
<td>96 (26%)</td>
<td>98</td>
<td>101</td>
<td>560</td>
</tr>
<tr>
<td><strong>Physical Fitness</strong></td>
<td>432</td>
<td>295 (79%)</td>
<td>116</td>
<td>147</td>
<td>990</td>
</tr>
<tr>
<td><strong>Tactical/Field Skills</strong></td>
<td>350</td>
<td>148 (40%)</td>
<td>70</td>
<td>140</td>
<td>708</td>
</tr>
<tr>
<td><strong>Military Skills and Discipline</strong></td>
<td>480</td>
<td>334 (90%)</td>
<td>118</td>
<td>170</td>
<td>1,102</td>
</tr>
<tr>
<td><strong>Working in Teams</strong></td>
<td>423</td>
<td>233 (63%)</td>
<td>101</td>
<td>125</td>
<td>882</td>
</tr>
<tr>
<td><strong>Total Respondents</strong></td>
<td>559</td>
<td>372</td>
<td>145</td>
<td>189</td>
<td>1,265</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service. In addition, the 1,265 respondents who indicated that they are concerned that the modified COVID-19 basic training schedule will not produce the same quality of graduates as before the COVID-19 pandemic were asked to indicate what aspects they felt were missing when answering the follow-up survey question, “What Aspects of Basic Training are Recruits Missing?” and were instructed to choose all of the options that applied, allowing each survey participant to select more than one response. Therefore, the numbers will not add up to the total of 1,265 respondents and the percentages will not add up to 100 percent.

Source: The DoD OIG.

While the Military Services suspended various training events in an effort to prevent and mitigate the pandemic’s spread among recruits, training personnel reported they were concerned about the impact of suspending the training events on the quality of basic training graduates. As the recruits arrive for basic training, the Military Services plan to monitor basic training requirements, assessing which training to suspend and making adjustments while ensuring compliance with COVID-19 procedures. In addition, Military Services leadership plans for recruits to complete suspended training events either at their assigned unit or in advanced training. Therefore, we are not making a recommendation relating to training requirements.

**Additional Recruits and Training Personnel May Test Positive for COVID-19**

( gücü) Although the DoD and Military Services established procedures and safeguards to prevent and reduce the spread of COVID-19, we determined that training personnel at the six basic training centers reviewed did not fully implement the procedures and safeguards. From January 1, 2020, through August 31, 2020,  recruits and training personnel tested positive for COVID-19
at the six basic training centers selected. If training personnel at the six basic training centers continue to not fully implement the procedures and safeguards to prevent and reduce the spread of COVID-19, the potential for additional recruits and training personnel testing positive for COVID-19 may increase.

From January 1, 2020, through August 31, 2020, the Military Services processed a combined total of 117,815 new recruits through basic training. The six basic training centers we selected for review, processed 99,601 recruits. Out of 99,601 recruits, tested positive for COVID-19 after arriving at one of the six basic training centers, with recruits requiring hospitalization. Table 7 shows the total number of recruits by Military Service who attended one of the six basic training centers we selected for review compared to the number of recruits who tested positive for COVID-19 from January 1, 2020, through August 31, 2020, for each Military Service.

Table 7. Recruits Who Attended the Six Basic Training Centers Selected for Review and Recruits Who Tested Positive for COVID-19 at the Six Basic Training Centers by Military Service

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Total Number of Recruit</th>
<th>Number of Recruits Testing Positive for COVID-19</th>
<th>Number of Recruits Hospitalized for COVID-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>28,662</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marine Corps</td>
<td>20,405</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Navy</td>
<td>27,354</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Air Force</td>
<td>23,180</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>99,601</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

In addition to the recruits who tested positive for COVID-19, from January 1, 2020, through August 31, 2020, of the 6,007 training personnel assigned to the six basic training centers also tested positive for COVID-19 during this period. Table 8 shows the number of training personnel assigned to the six basic training centers we reviewed compared to the number who tested positive for COVID-19 from January 1, 2020, through August 31, 2020.
Table 8. Training Personnel Who Tested Positive for COVID-19 at the Six Basic Training Centers Selected for Review by Military Service

<table>
<thead>
<tr>
<th>Military Service</th>
<th>Total Number of Training Personnel</th>
<th>Number of Training Personnel Testing Positive for COVID-19</th>
<th>Number of Training Personnel Hospitalized for COVID-19</th>
</tr>
</thead>
<tbody>
<tr>
<td>Army</td>
<td>1,731</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marine Corps</td>
<td>2,548</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Navy</td>
<td>774</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Air Force</td>
<td>954</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>6,007</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

Any positive COVID-19 cases have the potential to impact the life and safety of military personnel and their families, as well as the DoD’s ability to accomplish its mission. Therefore, it is critical that training personnel assigned to the six basic training centers reviewed fully implement established procedures and safeguards to prevent and reduce the spread of COVID-19.

Management Actions Taken During Audit

In the draft report, we recommended that the Military Services develop procedures to ensure compliance with:

- implementing COVID-19 guidance at basic training centers;
- screening and testing of recruits and training personnel, including procedures for timely testing and delivery of results; and
- using PPE and cleaning supplies necessary for basic training, including defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.

In addition, we recommended that the Military Services assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance and take appropriate action based on that assessment.
In response to the draft report, the Military Services’ training commands provided documentation that outlined actions taken during the audit that addressed several recommendations made in a draft of this report. If the documentation showed that the Services’ training commands took action before the issuance of a draft of this report, December 7, 2020, we considered those actions as actions taken during the audit.

**U.S. Army Training and Doctrine Command Actions Taken**

TRADOC updated procedures to ensure compliance with screening and testing of recruits and training personnel and the use of cleaning supplies; as well as assessed manpower requirements for training personnel to ensure compliance with COVID-19 procedures and safeguards. TRADOC personnel provided the Army Processing Plan, dated November 2020, which detailed COVID-19 screening and testing procedures for recruits and training personnel. We determined that the plan supported that the Army has procedures to ensure screening and testing of recruits and training personnel, including procedures for timely testing and delivery of results. We determined that those procedures supported that the Army has procedures to ensure compliance with the use of cleaning supplies necessary for basic training. We determined that the document supported that the Army assessed manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance and took appropriate action based on that assessment.

**Marine Corps Training and Education Command Actions Taken**

During the audit, the U.S. Marine Corps Training and Education Command participated in the COVID-19 Pandemic Council on Recruit Basic Training to identify lessons learned and implemented procedures to ensure compliance with the use of PPE during basic training; as well as assessed manpower requirements for training personnel to ensure compliance with COVID-19 procedures. U.S. Marine Corps Training and Education Command personnel provided COVID-19 Pandemic Council on Recruit Basic Training Lessons Learned, dated December 3, 2020, which

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28 (FOUO)
29 (FOUO)
detailed procedures to ensure compliance with the use of PPE necessary for basic training, including defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.\textsuperscript{30} We determined that the lessons learned document supported that the Marine Corps has procedures to ensure compliance with the use of PPE as necessary for basic training. U.S. Marine Corps Training and Education Command personnel provided the Marine Corps Request for Personnel Augmentation document, dated November 2020, which detailed the manpower assessment for training personnel needed to support COVID-19 procedures.\textsuperscript{31} We determined that the request for augmentation supported that the Marine Corps assessed manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance and took appropriate action based on that assessment.

**Naval Education and Training Command and Naval Service Training Command Coordinated Actions Taken**

During the audit, the U.S. Naval Service Training Command updated procedures to ensure compliance with screening and testing of recruits and training personnel; as well as participated in the COVID-19 Pandemic Council on Recruit Basic Training to identify lessons learned and implemented procedures to ensure compliance with the use of PPE during basic training. U.S. Naval Service Training Command personnel provided the Navy COVID-19 Testing Memorandum, dated June 2020, which detailed the COVID-19 screening and testing procedures for Navy recruits and training personnel.\textsuperscript{32} We determined that the memorandum supported that the Navy has procedures to ensure the screening and testing of recruits, including procedures for timely testing and delivery of results. We received the COVID-19 Pandemic Council on Recruit Basic Training Lessons Learned, dated December 3, 2020, which detailed procedures to ensure compliance with the use of PPE necessary for basic training, including defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.\textsuperscript{33} We determined that the lessons learned document supported that the Navy has procedures to ensure compliance with the use of PPE necessary for basic training.

\textsuperscript{30} On February 9, 2021, a Marine Corps Training and Education Command official provided the COVID-19 Pandemic Council on Recruit Basic Training, “Initial Lessons Learned from the COVID-19 Pandemic,” December 3, 2020. The lessons learned applied to the Army, Navy, Marine Corps, and Air Force, and as a result, we applied the document to more than one Service.


\textsuperscript{33} On February 9, 2021, a Marine Corps Training and Education Command official provided the COVID-19 Pandemic Council on Recruit Basic Training, “Initial Lessons Learned from the COVID-19 Pandemic,” December 3, 2020. The lessons learned applied to the Army, Navy, Marine Corps, and Air Force, and as a result, we applied the document to more than one Service.
Finding

**Air Education and Training Command Actions Taken**

During the audit, the Air Force participated in the COVID-19 Pandemic Council on Recruit Basic Training to identify lessons learned and implemented procedures to ensure compliance with the use of PPE during basic training. We received the COVID-19 Pandemic Council on Recruit Basic Training Lessons Learned, dated December 3, 2020, which detailed procedures to ensure compliance with the use of PPE necessary for basic training, including defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.\(^{34}\) We determined that the lessons learned supported that the Air Force has procedures to ensure compliance with the use of PPE as necessary for basic training.

As a result of comments and additional supporting documentation received from the Commanding General, U.S. Army Center of Initial Military Training, U.S. Army Training and Doctrine Command; the Audit Coordination and Liaison Head, Marine Corps, responding for the Executive Deputy, Marine Corps Training and Education Command; the Inspector General, Naval Education and Training Command, responding for the Commander, Naval Education and Training Command; and the Deputy Commander, U.S. Air Education and Training Command, we deleted their commands from Draft Report Recommendations 1.b, 1.c, and 1.d. We renumbered Recommendations 1.b, 1.c, and 1.d as Recommendations 2, 3, 4, and 5.

**Recommendations, Management Comments, and Our Response**

**Revised and Renumbered Recommendations**

As a result of management comments, we revised and renumbered:

- Recommendation 1.a as Recommendation 1;
- Recommendation 1.b as Recommendation 2 and removed TRADOC, Naval Education and Training Command and Naval Service Training Command;

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\(^{34}\) On February 9, 2021, a Marine Corps Training and Education Command official provided the COVID-19 Pandemic Council on Recruit Basic Training, “Initial Lessons Learned from the COVID-19 Pandemic,” December 3, 2020. The lessons learned applied to the Army, Navy, Marine Corps, and Air Force, and as a result, we applied the document to more than one Service.
• Recommendation 1.c as:
  o Recommendation 3 to ensure compliance with the use of PPE and removed Marine Corps Training and Education Command, Naval Education and Training Command, Naval Service Training Command, and Air Education and Training Command;
  o Recommendation 4 to ensure compliance with the use of cleaning supplies and removed TRADOC; and

• Recommendation 1.d as Recommendation 5 and removed TRADOC and Marine Corps Training and Education Command.

**Recommendation 1**

We recommend that the Commanders of the U.S. Army Training and Doctrine Command; Marine Corps Training and Education Command; Naval Education and Training Command; Naval Service Training Command; and Air Education and Training Command develop procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

**U.S. Army Training and Doctrine Command Comments**

The Commanding General, U.S. Army Center of Initial Military Training, U.S. Army Training and Doctrine Command, partially agreed with the recommendation, stating that TRADOC had procedures in place to ensure compliance with the implementation of COVID-19 guidance at its Army Training Centers, but would continue to incorporate new procedures when required. Specifically, TRADOC and the Center for Initial Military Training leadership and medical personnel looked at compliance with COVID-19 guidance during all visits to Army Training Centers/Centers of Excellence. In addition, Army Training Center/Center of Excellence, brigade, and battalion leadership assessed compliance with COVID-19 guidance when they looked at their subordinate units. Whenever a unit is non-compliant, the unit takes corrective action or retrains to get back in compliance.

**Our Response**

Comments from the Commanding General addressed the specifics of the recommendation; therefore, the recommendation is closed. We reviewed documentation provided in response to a draft of this report. Specifically, we reviewed Army leadership assessment summaries, dated February 2021, which
detailed examples of corrective actions taken for instances of non-compliance with COVID-19 guidance.\(^{35}\) We determined that the documentation supported that the Army has procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

**Marine Corps Training and Education Command Comments**

The Audit Coordination and Liaison Head, Marine Corps, responding for the Executive Deputy, Marine Corps Training and Education Command, agreed with the recommendation, stating that the Marine Corps developed and continually reassessed procedures to ensure compliance with COVID-19 mitigation guidance. The Training and Education Command had an extensive amount of COVID-19 lessons learned that resulted in best practices to be maintained. The Training and Education Command’s efforts extended beyond the Marine Corps by leveraging best practices identified by the Armed Services Council on Recruit Basic Training, which includes senior leaders from each Service’s basic training centers.

**Our Response**

Comments from the Executive Deputy met the intent of the recommendation and further reinforced compliance with the implementation of COVID-19 guidance at basic training centers; therefore, the recommendation is resolved but will remain open. We will close the recommendation when the Executive Deputy provides documentation to support that the Marine Corps has formalized procedures to assess compliance with the implementation of COVID-19 guidance and to hold personnel accountable for non-compliance as appropriate at basic training centers.

**Naval Education and Training Command and Naval Service Training Command Coordinated Comments**

The Inspector General, Navy Education and Training Command, responding for the Commander, Naval Education and Training Command, did not agree with the recommendation, stating that the Naval Education and Training Command continually reviewed and updated the U.S. Navy’s Recruit Training Manual regularly including the most recent COVID-19 guidance. The Commander stated that the RTC Commanding Officer regularly provided guidance to the trainers, instructors, and staff on the Navy’s COVID-19 policy. Along with providing regular continuous training on the latest COVID-19 protocols, the Fleet Quality Assurance Department inspected personnel and spaces to ensure compliance.

**Our Response**

Comments from the Commander addressed the specifics of the recommendation; therefore, the recommendation is closed. We reviewed documentation provided in response to a draft of this report. Specifically, we reviewed the January 7, 2021 update to the Recruit Training Manual, which detailed the most recent COVID-19 guidance. In addition, we reviewed inspection schedules, inspection reports, and COVID Observation Walkthrough Reports, which detailed inspections performed by the Fleet Quality Assurance Department and Navy personnel inspections for instances of non-compliance with COVID-19 guidance. We determined that the documentation supported that the Navy has procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

**Air Education and Training Command Comments**

The Deputy Commander partially agreed with the recommendation, stating that because COVID-19 guidance is constantly evolving, additional oversight to facilitate full compliance at basic training centers is necessary. The Deputy Commander stated that the Air Force has had robust, aggressive public safety measures in place since March 2020. In addition, the Air Force added additional training personnel and provided additional training space to facilitate social distancing. The Deputy Commander stated that the responsibility for ensuring compliance with CDC and DoD guidance is inherent in their commanders’ authorities and their success, to date, is due to the effective execution of mission command at the lowest levels. The Deputy Commander also stated that the Air Force had procedures in place to facilitate compliance with COVID-19 guidance and to hold personnel accountable for non-compliance. Finally, the Deputy Commander stated that the Air Force will continue to adjust guidance as updates are received from the CDC and the DoD.

**Our Response**

Comments from the Deputy Commander addressed the specifics of the recommendation; therefore, the recommendation is closed. We reviewed documentation provided in response to a draft of this report. Specifically, we reviewed the

We determined that the documentation supported that the Air Force has procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

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37 **(CUT)**
**Recommendation 2**

We recommend that the Commanders of Marine Corps Training and Education Command and Air Education and Training Command develop procedures to ensure compliance with screening and testing of recruits and training personnel, including procedures for timely testing and delivery of results.

**Marine Corps Training and Education Command Comments**

The Audit Coordination and Liaison Head, Marine Corps, responding for the Executive Deputy, Marine Corps Training and Education Command, agreed with the recommendation, stating that the Marine Corps was proactive in the screening and testing of recruits and training personnel and maintaining the maximum number of COVID-19 tests available. The Marine Corps screened recruits before arrival, on arrival, and multiple times throughout their restriction of movement. In addition, the Marine Corps tested recruits at the end of the prescribed restriction of movement. As an example of screening and testing of personnel, the Marine Corps participated in the COVID-19 Health Action Response for Marines sponsored by the Naval Medical Research Center. This Naval Medical Research Center effort provided an estimated 18,000 tests that would not otherwise have been available to Marine Corps personnel.

**Our Response**

Comments from the Executive Deputy met the intent of the recommendation and further reinforced compliance with screening and testing of recruits and training personnel; therefore, the recommendation is resolved but will remain open. We will close the recommendation when the Executive Deputy provides documentation to support that the Marine Corps has formalized procedures to ensure compliance with screening and testing of recruits and training personnel, including procedures for timely testing and delivery of results.

**Air Education and Training Command Comments**

The Deputy Commander, Air Education and Training Command, partially agreed with the recommendation, stating that the Air Education and Training Command implemented procedures to comply with the requirement for screening and testing of recruits and training personnel, including timely delivery of results. The Air Education and Training Command refined procedures as revised policy and procedures from the CDC and DoD and test kits, supplies, and laboratory support became available. The Air Force also participated in the Council on Recruit Basic Training with other Military Services to share lessons learned and implement
best practices for testing, restriction of movement, and quarantine for training personnel and supporting staff. Finally, the Air Education and Training Command stated that procedures are in place to facilitate compliance and hold personnel accountable for non-compliance as appropriate.

**Our Response**

Comments from the Deputy Commander addressed the specifics of the recommendation; therefore, the recommendation is closed. We reviewed documentation provided in response to a draft of this report. Specifically, we determined that the documentation supported that the Air Force has procedures to ensure screening and testing of recruits and training personnel, including procedures for timely testing and delivery of results.

**Recommendation 3**

We recommend that the Commander of the U.S. Army Training and Doctrine Command develop procedures to ensure compliance with the use of personal protective equipment necessary for basic training, including defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.

**U.S. Army Training and Doctrine Command Comments**

The Commanding General, U.S. Army Center of Initial Military Training, U.S. Army Training and Doctrine Command, agreed with the recommendation, stating that there had been confusion on the use of masks on the part of basic combat training units, and as a result, in January 2021, TRADOC published updated mask policy. In addition, the Commanding General stated that leadership at the Army Training Centers/Centers of Excellence reinforced TRADOC’s procedures to ensure compliance with the use of PPE and cleaning supplies during assessments of their subordinate units and took corrective action or conducted retraining when a unit was not in compliance.

**Our Response**

Comments from the Commanding General addressed the specifics of the recommendation; therefore, the recommendation is closed. We reviewed documentation provided in response to a draft of this report. Specifically, we determined that the documentation supported that the Air Force has procedures to ensure screening and testing of recruits and training personnel, including procedures for timely testing and delivery of results.
We determined that the documentation supported that the Army has procedures to ensure compliance with the use of PPE necessary for basic training, including defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.

**Recommendation 4**

*We recommend that the Commanders of the Marine Corps Training and Education Command; Naval Education and Training Command; Naval Service Training Command; and Air Education and Training Command develop procedures to ensure compliance with the use of cleaning supplies necessary for basic training.*

**Marine Corps Training and Education Command Comments**

The Audit Coordination and Liaison Head, Marine Corps, responding for the Executive Deputy, Training and Education Command, agreed with the recommendation, stating that the off-site and non-invasive data collection method used by the audit team failed to highlight the extreme measures the Marine Corps put in place to safeguard recruits and training personnel. Examples of the measures the Marine Corps put in place include using Government-owned and civilian-contracted restriction of movement isolation facilities, smaller groups, increased spacing in barracks, and cancellation of family events and public graduation ceremonies.

**Our Response**

Comments from the Executive Deputy met the intent of the recommendation and further reinforced compliance with the use of cleaning supplies necessary for basic training; therefore, the recommendation is resolved but will remain open. We will close the recommendation when the Executive Deputy provides documentation to support that the Marine Corps has formalized procedures to ensure compliance with the use of cleaning supplies necessary for basic training.
**Naval Education and Training Command and Naval Service Training Command Comments**

The Inspector General, Naval Education and Training Command responding for the Commander, Naval Education and Training Command, agreed with the recommendation, stating that the RTC required the use of masks when proper social distancing cannot be maintained. In addition, the RTC thoroughly sanitized training spaces, barracks, and classrooms regularly. Cleaning supplies and PPE were restocked daily.

**Our Response**

Comments from the Commander met the intent of the recommendation and further reinforced compliance with the use of cleaning supplies necessary for basic training; therefore, the recommendation is resolved but will remain open. We will close the recommendation when the Commander provides documentation to support that the Navy has formalized procedures to ensure compliance with the use of cleaning supplies necessary for basic training.

**Air Education and Training Command Comments**

The Deputy Commander, Air Education and Training Command, partially agreed with the recommendation, stating that the Air Force implemented procedures to comply with the requirements to use PPE and conducted the cleaning of facilities and equipment at basic training. The Air Force is working with the DoD to increase contract funding necessary to increase standards of cleanliness and implement necessary public health measures. They are also working with the DoD to ensure PPE is available to fully mitigate risk while continuing basic training. The Deputy Commander also stated that there were procedures put in place to facilitate compliance and hold personnel accountable for non-compliance as appropriate.

**Our Response**

Comments from the Deputy Commander met the intent of the recommendation and further reinforced compliance with the use of cleaning supplies necessary for basic training; therefore, the recommendation is resolved but will remain open. We will close the recommendation when the Deputy Commander provides documentation to support that the Air Force has formalized procedures to ensure compliance with the use of cleaning supplies necessary for basic training.
**Recommendation 5**

We recommend that the Commanders of the Naval Education and Training Command; Naval Service Training Command; and Air Education and Training Command assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance and take appropriate action based on that assessment.

**Naval Education and Training Command and Naval Service Training Command Comments**

The Inspector General, Naval Education and Training Command, responding for the Commander, Naval Education and Training Command, agreed with the recommendation, stating that the RTC assessed the manpower requirements at the beginning of the pandemic. The RTC assessment identified a requirement for 259 additional training personnel and 15 medical personnel. The Chief of Naval Personnel validated the results of the assessment and the Navy is currently filling the identified training and medical personnel positions.

**Our Response**

Comments from the Commander met the intent of the recommendation to assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance, and that appropriate action was taken based on that assessment. Therefore, the recommendation is resolved but will remain open. We will close the recommendation when the Commander provides documentation to support that the Navy has assessed manpower requirements for training personnel to ensure compliance with COVID-19 procedures and has taken appropriate action based on that assessment.

**Air Education and Training Command Comments**

The Deputy Commander, Air Education and Training Command, partially agreed with the recommendation, stating that the Air Force has assessed manpower requirements for compliance with the CDC and DoD guidance and has taken appropriate action based on the assessment. These actions include expanding basic training operations to Keesler AFB and Camp Shelby, Mississippi, and another squadron in an attempt to relieve the strain on personnel and infrastructure at JBSA-Lackland. In addition, the Air Force recalled training personnel and used reservists on multiple occasions to augment the training personnel at JBSA-Lackland. The Air Force will continue to evaluate the need for using additional Reserve personnel to augment training personnel.
Our Response

Comments from the Deputy Commander met the intent of the recommendation to assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance, and that appropriate actions, such as augmenting training personnel and expanding basic training operations to additional Air Force bases, were taken. Therefore, the recommendation is resolved but will remain open. We will close the recommendation when the Deputy Commander provides documentation to support that the Air Force has formalized assessments of manpower requirements for training personnel to ensure compliance with COVID-19 procedures.
Appendix A

Scope and Methodology

We conducted this performance audit from May 2020 through March 2021 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 audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

We initiated this audit to determine how the Military Services conducted basic training while managing COVID-19 at their centers. This audit included telephone interviews with Military Service officials, review of documents produced by the DoD and the Military Services related to the management of COVID-19, the results of a DoD OIG survey issued to training personnel, and analysis of survey results.

The scope of our audit focused on DoD procedures to prevent and reduce the spread of COVID-19 at basic military training centers. We reviewed processes and procedures implemented since January 2020 intended to prevent, protect against, and reduce the spread of COVID-19 in the recruit population while they completed basic training at various training centers throughout the United States. We determined whether the Military Services followed DoD guidance, implemented preventive measures, and how the measures affected the Military Services’ ability to conduct basic training.

To determine whether the DoD and Military Services issued guidance and implemented procedures to prevent and reduce the spread of COVID-19 at basic training centers, we selected the Army’s largest basic training center and all of the basic training centers for the Marine Corps, Navy, and Air Force. The audit included the following basic training centers.

- U.S. Army Training Center and Fort Jackson, South Carolina
- Marine Corps Recruit Depot, Parris Island, South Carolina
- Marine Corps Recruit Depot, San Diego, California
- Navy Recruit Training Command, Great Lakes, Illinois
- Air Force Basic Military Training, Joint Base San Antonio–Lackland, Texas
- Air Force Basic Military Training, Keesler AFB, Biloxi, Mississippi

Beginning April 7, 2020, to alleviate the number of recruits at JBSA-Lackland, the Air Force sent 60 recruits to Keesler AFB in Biloxi, Mississippi, which restructured how recruits enter the training pipeline at JBSA-Lackland.
**Work Performed**

The audit team identified and reviewed criteria from the CDC, the DoD, and the Military Services that would be relevant to achieving our audit objective. Specifically, the audit team identified Military Service guidance specific to a pandemic or COVID-19 issued from January 2020 through December 2020 to prevent and reduce the spread of COVID-19, and how the Military Services disseminated the information to recruits. In addition, we requested and reviewed documentation from January 2020 through August 2020, relevant to the total number of:

- recruits and training personnel;
- recruits and training personnel who tested positive for COVID-19; and
- recruits and training personnel who were hospitalized for COVID-19.

The audit team conducted telephone interviews with each Military Service to understand DoD and the Military Services’ guidance and implementation of the processes and procedures related to the prevention and reduction of the spread of COVID-19 at basic training centers. We conducted interviews with the following DoD leadership and Military Service organizations.

- Office of the Under Secretary of Defense for Personnel and Readiness, Arlington, Virginia
- U.S. Military Entrance Processing Command, North Chicago, Illinois
- TRADOC, including personnel from:
  - TRADOC Headquarters, Fort Eustis, Virginia;
  - U.S. Army Center for Military Initial Training, Fort Eustis, Virginia;
  - U.S. Army Training Center and Fort Jackson, South Carolina;
  - Maneuver Center of Excellence, Fort Benning, Georgia; and
  - Fires Center of Excellence, Fort Sill, Oklahoma
- U.S. Marine Corps Training and Education Command, including personnel from:
  - U.S. Marine Corps Training and Education Command Headquarters, Quantico, Virginia;
  - MCRD, Parris Island, South Carolina;
  - MCRD, San Diego, California
• Naval Education Training Command, including personnel from:
  o Naval Education and Training Command Headquarters, Pensacola, Florida;
  o Chief of Naval Personnel, COVID-19 Crisis Action Team, Arlington, Virginia;
  o Naval Service Training Command, Great Lakes, Illinois;
  o Navy RTC, Great Lakes, Illinois; and
  o Naval Installations Command, Washington, D.C.
• Air Education and Training Command, including personnel from:
  o Air Education and Training Command Headquarters, JBSA-Randolph, Texas;
  o 59th Medical Wing, JBSA-Lackland, Texas;
  o 737th Training Group, Air Force Basic Military Training, JBSA-Lackland, Texas;
  o Second Air Force, Keesler AFB, Mississippi

Survey of Training Personnel
With input from the DoD OIG’s Quantitative Methods Division, we developed a 39-question electronic survey to determine the experiences of training personnel, such as drill instructors, military training instructors, recruit division commanders, and drill sergeants, with the COVID-19 pandemic. The survey included questions on COVID-19 guidance; supplies, including PPE and cleaning supplies provided to prevent and reduce the spread of COVID-19 during basic training; screening and testing of training personnel for COVID-19; aspects of basic training affected by modifications to basic training during COVID-19; and the challenges of operating in a COVID-19 environment. See Appendix C for the list of survey questions.

To conduct the survey, we obtained the universe of basic training personnel assigned to the six basic training centers from the Army, Marine Corps, Navy, and Air Force. For the universe, we identified a potential respondent pool of 3,549 training personnel - 935 Army, 1,215 Marine Corps, 780 Navy, and 619 Air Force. However, we could not verify that the 3,549 personnel only comprised the training personnel for basic training.

We sent the survey to our point of contact for the six basic training centers on July 24, 2020, as an electronic link to provide to training personnel on the same day. We conducted the survey for 2 weeks.
We stopped the survey on August 7, 2020, and received a total of 2,030 surveys out of 3,549 training personnel, for a 57 percent response rate. Specifically, 895 Army, 545 Marine Corps, 227 Navy, and 278 Air Force training personnel completed the survey, while another 85 training personnel who completed the survey did not indicate their branch of Military Service or basic training center. See Appendix C for a breakdown of results from the survey analysis. Table 9 shows the potential number of respondents and the actual number of responses received for each Military Service.

Table 9. Potential Number of Respondents and Actual Number of Responses Received by Military Service

<table>
<thead>
<tr>
<th>Participants</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>No Response Provided</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Potential Number of Respondents</td>
<td>935</td>
<td>1,215</td>
<td>780</td>
<td>619</td>
<td>N/A</td>
<td>3,549</td>
</tr>
<tr>
<td>Number of Responses Received</td>
<td>895* (96%)</td>
<td>545 (45%)</td>
<td>227 (29%)</td>
<td>278 (45%)</td>
<td>85*</td>
<td>2,030 (57%)</td>
</tr>
</tbody>
</table>

*One Army respondent did not identify their Military Service but identified their training center location and as a result, this individual has been included in the total Army respondents, bringing the number of responses received from the Army up to 895 and reducing the number of responses with no Military Services provided by 1.

Source: The DoD OIG.

Use of Computer-Processed Data
We did not use computer-processed data for this audit.

Use of Technical Assistance
The Quantitative Methods Division assisted us with developing the survey questions and presenting the results in this report.

Prior Coverage
During the last 5 years, the Government Accountability Office (GAO), the DoD Office of Inspector General (DoD OIG), and the Army Audit Agency issued seven reports discussing pandemics; coronaviruses, including COVID-19; Army in-processing procedures for new soldiers; and Army retention of soldiers.


Naval Audit Service reports are not available over the Internet.

Unrestricted Air Force Audit Agency reports can be accessed from [https://www.afaa.af.mil/](https://www.afaa.af.mil/) by clicking on Freedom of Information Act Reading Room and then selecting audit reports.

**GAO**


This report found that Government-wide contract obligations in response to the COVID-19 pandemic totaled $17.8 billion as of June 11, 2020. Four agencies accounted for 85 percent of total COVID-19 contract obligations. This report provided available baseline data on COVID-19 Federal contract obligations. Federal agencies procured a variety of critical goods and services in response to the COVID-19 pandemic. About $11 billion, or 62 percent of total obligations, were reported in the Federal Procurement Data System—Next Generation as procuring goods, like medical equipment and supplies. According to the contract description in the Federal Procurement Data System—Next Generation, obligations on contracts within the top five products included:

- $3 billion for ventilators;
- $1.3 billion for N95 respirators;
- $1.2 billion for PPE like surgical gowns, coveralls, and gloves; and
- $737 million for drugs and biologicals, including pharmaceuticals to treat COVID-19 patients and reagents used for administering COVID-19 tests.

In addition to goods, agencies obligated $2.1 billion on contracts for advanced, basic, and commercial biomedical research and development for vaccination development. Agencies have also obligated $513 million on contracts for financial management support services, including $500 million by the Small Business Administration for data analysis and loan recommendation services, according to the contract description in Federal Procurement Data System—Next Generation. Government-wide, $8.3 billion, or 47 percent, of contract obligations in response to COVID-19 were identified as competitively awarded as of June 11, 2020. The agencies awarded $9.4 billion in contracts without competition, often citing urgency as the reason.
This report found that in response to the national public health and economic threats caused by COVID-19, four relief laws were enacted as of June 2020, including the Coronavirus Aid, Relief, and Economic Security (CARES) Act, in March 2020. These laws have appropriated $2.6 trillion across the government. The following six areas—Paycheck Protection Program; Economic Stabilization and Assistance to Distressed Sectors; unemployment insurance; economic impact payments; Public Health and Social Services Emergency Fund; and Coronavirus Relief Fund—account for 86 percent of the appropriations. For the six largest spending areas, the GAO found obligations totaled $1.3 trillion and expenditures totaled $643 billion. The majority of the difference was due to the Paycheck Protection Program, for which the Small Business Administration obligated $521 billion.

The GAO identified several challenges related to the Federal response to the crisis, as well as recommendations to help address the following challenges.

- viral testing
- distribution of supplies
- Paycheck Protection Program
- economic impact payments
- unemployment insurance
- contract obligations

The GAO found that the Small Business Administration processed over $512 billion in guaranteed small business loans, but is not ready to address fraud risks and has not said how the Small Business Administration planned to oversee the loans. Additionally, the Internal Revenue Service and the Department of the Treasury made 160.4 million payments worth $269 billion to taxpayers as of April 30, 2020 – including payments to more than a million deceased individuals.

The special publication identifies the opportunities social distancing offers to mitigate infectious disease spread, including the following examples.

- Social distancing is readily deployable because it mainly requires authorities to disseminate directives and instructions. It does not require special equipment or medication to be distributed.
• It does not require special qualifications or extensive training for the public to do.
• It can be particularly important when no treatment or vaccine is available.
• It can be used to buy time for manufacturing and distributing protective supplies.

The special publication also identifies the following challenges presented by social distancing.
• People may be reluctant or unable to practice social distancing, as it may be impossible for them to do, or adversely affect their daily routine and livelihood. Certain settings, such as onboard cruise ships or military vessels, can preclude some social distancing practices.
• There may be psychological impacts due to interruption of services such as mental health care to vulnerable populations, among other impacts.
• If implemented for long periods, social distancing may lead to large-scale disruptions in the economy, social cohesiveness, and the distribution of goods and services, which need to be considered in the context of public health assessments.
• Scientific studies to determine which distancing strategies are effective can be challenging, expensive, and risky, in part because some studies may test conditions that result in the spread of infection.


This special publication states that recent high-profile coronavirus outbreaks have raised new concern because of high mortality rates relative to the coronaviruses that cause the common cold. In addition, severe coronaviruses can cause both upper- and lower-respiratory-tract infections, including pneumonia. The special publication identifies the following opportunities.
• Identification of common targets in coronaviruses to develop vaccines against all coronaviruses.
• Increased coordination by industry, academia, and government could improve awareness of treatment options for future outbreaks.
• Advances in predictive infectious disease modelling to better inform decisions about interventions in future outbreaks.

The special publication also identifies the following challenges.
• For rapid deployment, potential treatments need to be prepared prior to an outbreak despite limited information and incentives.
• Development of vaccines for ribonucleic acid viruses requires frequent evaluation and reformulation. It is complex, costly, and time consuming.

• Outbreak detection requires constant monitoring and coordination among nations, which can be impeded by more closed societies.

• The global economic consequences of such outbreaks can be serious. According to multiple economic forecasting models, the Severe Acute Respiratory Syndrome outbreak cost the global economy $30-100 billion.

**DoD OIG**


This report provides the actions that the Defense Health Agency has planned or taken to control costs for health care claims related to COVID-19. The Defense Health Agency issued several letters to Managed Care Support Contractors providing guidance on claims processing for COVID-19 related claims. The letters included clarifying guidance and various new requirements for Managed Care Support Contractors to implement related to:

• eliminating co-payments and cost shares for COVID-19 diagnostic testing;

• clarifying access to behavioral health services via telehealth;

• eliminating co-payments and cost shares for COVID-19 serology testing; and

• implementing temporary TRICARE regulation changes in response to COVID-19.

As a result, Managed Care Support Contractors deferred or manually paid claims pending system and pricing updates and created dashboards to share information and perform data analytics on health care claims related to COVID-19.


This report provides the best practices and lessons learned as identified in 52 audit reports related to disaster responses from 2006 to 2020. The DoD OIG analyzed the audit reports and determined several best practices and lessons learned related to contracting from the DoD's previous disaster relief responses. In addition, this special report provides potential procurement fraud schemes and tips to avoid potential fraudulent activity. The report stated that the DoD provides disaster relief for situations such as COVID-19 through Defense
Support of Civil Authorities operations. The report also stated that DoD officials are under increased pressure to provide goods and services in a fast-paced, ever-changing environment under the COVID-19 pandemic, which is similar to the pressures that were present during past disaster response and relief efforts. The report contains a list of best practices and lessons learned that DoD officials should consider following to minimize opportunities for fraud, waste, or abuse in awarding and overseeing the large amount of contracts needed to respond to the COVID-19 pandemic.


This report shares the lessons learned and best practices that the DoD OIG identified during its previous work related to the security and protection of patient health information at military medical treatment facilities. This report states that as medical facilities manage the increased demands associated with administering patient care during the COVID-19 pandemic, medical administrators should seek to ensure that they also identify and mitigate cybersecurity risks and threats posed by malicious actors attempting to take advantage of the Nation’s focus on caring for the sick. Therefore, military medical treatment facilities should ensure that they are implementing security controls to protect patient information.
Appendix B

Criteria

We used the following criteria to determine whether the DoD implemented procedures and safeguards to prevent and reduce the spread of COVID-19 at Military Service basic training centers.40

DoD

- DoD Instruction 6200.03, “Public Health Emergency Management (PHEM) Within the DoD,” March 28, 2019, establishes policy, assigns responsibilities, and provides direction to ensure mission assurance and readiness for public health emergencies. Among the responsibilities, the instruction outlines the military installation commander’s public health emergency health powers, roles, and responsibilities, including the authority to restrict movement.

- Secretary of Defense memorandum, “Policy on Accessions and Accessions Training During the COVID-19 Outbreak,” April 3, 2020, provides additional guidance to the Military Departments for modifying the processing of recruits into the military and into basic training with the appropriate force health protection measures, to ensure the training pipeline (number of recruits) does not reduce significantly.

- Secretary of Defense memorandum, “Department of Defense Guidance on the Use of Cloth Face Coverings,” April 5, 2020, encourages military personnel, DoD civilian employees, their family members, and DoD contractors to follow CDC guidelines recommending that individuals wear cloth face masks in public settings when it is difficult to maintain other social distancing measures.

- DoD Instruction 6130.03, “Medical Standards for Appointment, Enlistment, or Induction into the Military Services,” May 6, 2018, establishes policy, assigns responsibilities, and prescribes procedures for physical and medical standards for individuals appointed, enlisted, or induced into the Military Services.


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40 Although additional guidance was issued, this section contains only the guidance necessary for our review.
• OUSD(P&R) memorandum, “Force Health Protection Guidance (Supplement 1) – Department of Defense Guidance for Monitoring Personnel Returning from China During the Novel Coronavirus Outbreak,” February 7, 2020, provides guidance, developed in accordance with CDC recommendations, for Military Service members, DoD civilian employees and contractor personnel, and family members returning from China.

• OUSD(P&R) memorandum, “Force Health Protection Guidance (Supplement 2) – Department of Defense Guidance for Military Installation Commanders’ Risk-Based Measured Responses to the Novel Coronavirus Outbreak,” February 25, 2020, is a COVID-19-specific supplement to DoD Instruction 6200.03 and outlines a risk-based framework to guide planning, posture, and actions needed to protect DoD personnel and support mission assurance.

• OUSD(P&R) memorandum, “Force Health Protection Guidance (Supplement 3) – Department of Defense Guidance for the Use of Personal Protective Equipment and Non-Pharmaceutical Interventions during the Coronavirus Disease 2019 Outbreak,” March 10, 2020, revises and supplements requirements in DoD Instruction 6200.03 for the use of personal protective equipment and provides risk reduction interventions that can be implemented at all levels for COVID-19. Supplement 7 rescinded this supplement.


• OUSD(P&R) memorandum, “Force Health Protection Guidance (Supplement 5) – Department of Defense Guidance for Movement and Medical Treatment of COVID-19 Patients, Symptomatic Persons Under Investigation, or Potentially Exposed COVID-19 Persons,” April 7, 2020, provides DoD medical personnel with the best practices for the evaluation, treatment, and management of COVID-19 and DoD medical and other personnel with COVID-19 patient movement guidance to protect the transportation crew and other patients, as well as post-transport management of contaminated vehicles.

• OUSD(P&R) memorandum, “Force Health Protection (Supplement 6) – Department of Defense Guidance for Coronavirus Disease 2019 Laboratory Diagnostic Testing Services,” April 7, 2020, provides DoD laboratory testing guidance to supplement force health protection guidance for COVID-19 pandemic response, incorporating aspects of CDC testing
guidance for DoD use. The preventive measures in this memorandum include testing individuals in mission essential or high risk settings, such as training commands, to assess the risk of COVID-19.

- OUSD(P&R) memorandum, “Force Health Protection Guidance (Supplement 7) – Department of Defense Guidance for the Use of Cloth Face Coverings, Personal Protective Equipment, and Non-Pharmaceutical Interventions During the Coronavirus Disease 2019 Pandemic,” April 8, 2020, implements the Secretary of Defense memorandum, “DoD Guidance on the Use of Cloth Face Coverings,” April 5, 2020. The memorandum also rescinds Supplement 3 and replaces it with new guidance on cloth face masks and updated guidance on personal protective equipment and non-pharmaceutical interventions. The preventive measures in this memorandum include hand washing with soap and water or using hand sanitizer when soap and water are unavailable; cleaning and disinfecting common areas; practicing social distancing; and wearing face masks when unable to practice social distancing.

- OUSD(P&R) memorandum, “Force Health Protection Guidance (Supplement 8) – Department of Defense Guidance for Protecting Personnel in Workplaces during the Response to the Coronavirus Disease 2019 Pandemic,” April 13, 2020, further supplements requirements regarding COVID-19 in accordance with DoD Instruction 6200.03, describing procedures to protect all personnel from disease transmission in DoD workplaces. The preventive measures in this memorandum include temperature screening and visual checks for signs and symptoms of COVID-19 exposure.

- OUSD(P&R) memorandum, “Force Health Protection (Supplement 9) – Department of Defense Guidance for Deployment and Redeployment of Individuals and Units during the Novel Coronavirus Disease 2019 Pandemic,” May 26, 2020, provides force health protection deployment and redeployment guidance for service members (including Reserve Component and National Guard members in a title 10 or title 32 duty status) and DoD civilian employees deploying within and outside the United States during the COVID-19 pandemic.

• OUSD(P&R) memorandum, “Force Health Protection Guidance (Supplement 11) – Department of Defense Guidance for Coronavirus Disease 2019 Surveillance and Screening with Testing,” June 11, 2020, outlines the DoD surveillance strategy for the COVID-19 pandemic response, including health surveillance activities, screening, asymptomatic testing, and sentinel surveillance testing. The preventive measures in this memorandum include developing and implementing Restriction of Movement procedures to prevent the spread of COVID-19 and minimize the risk of COVID-19 exposure.

**Army**

• TRADOC Regulation 350-6, “Enlisted Initial Entry Training Policies and Administration,” August 9, 2019, describes the guidance, policies, procedures, and responsibilities for managing and conducting enlisted Initial Entry Training, including basic combat training. Among the policies and procedures in TRADOC Regulation 350-6, are the initial entry training requirements and graduation standards, the treatment procedures for trainees and Soldiers, the integration procedures of Soldiers, and procedures for entry training. Additionally, TRADOC Regulation 350-6 includes policies and procedures for training in a safe environment, such as preventing communicable illnesses, managing communicable illness outbreaks, and personal health and hygiene.


• “Barracks Layout to Prevent Disease Transmission,” not dated, identifies the individual measures to take to prevent disease transmission and outlines the tasks leadership should carry out to aid in preventing respiratory diseases among service members, including designing a barracks layout to maximize space while reducing the potential spread of illnesses.

• “COVID-19: Guidance for Quarantine and Isolation,” April 9, 2020, provides guidance for quarantine and isolation facilities for exposed or ill service members who typically live in a barracks, dormitory, or other congregate living setting. These service members will not be able to remain in group housing during the quarantine or isolation period.
• “U.S. Army Response to SARS-CoV-2 Coronavirus Pandemic 2019: What We Learned in the First 30 Days,” not dated, summarizes the lessons and best practices the Army implemented during the first 30 days of the COVID-19 pandemic.

• Fragmentary Order 14 to Operation Order 20-03-003 (“Operation Victory Gouge - Fort Jackson Response to COVID-19”), March 9, 2020, provides changes to Operation Order 20-03-003, including the requirement for personnel to wear face masks in all public facilities on Fort Jackson.

• “Victory 6 Guidance on Face Coverings,” April 6, 2020, provides the Fort Jackson Commanding General’s direction on wearing face masks, directing Fort Jackson personnel to comply with the Secretary of Defense’s guidance on face masks when using Fort Jackson facilities.

• Fragmentary Order 20 to Operation Order 20-03-003 (“Operation Victory Gouge - Fort Jackson Response to COVID-19”), April 20, 2020, provides changes to Operation Order 20-03-003, adding to the 193rd Infantry Brigade’s tasks for testing new recruits for COVID-19 symptoms.

• General Order Number 2, “Prohibited Activities for Fort Jackson Personnel during the COVID-19 National Emergency,” June 12, 2020, identifies conduct that is prejudicial to the good order and discipline, health, and safety of all personnel present on Fort Jackson, describing prohibited activities; directives, including complying with appropriate orders and guidance and preventive measures for COVID-19; and travel restrictions during the COVID-19 pandemic.
• Fort Jackson Health Emergency Action Plan, not dated, applies to and addresses actions to be taken by all personnel working or living on Fort Jackson during public health emergencies, enabling Fort Jackson to conduct operations to minimize the effects of a public health emergency on the installation’s mission, and to protect the command.

**Marine Corps**

• Marine Corps Order 6220.1, “United States Marine Corps Pandemic Influenza Response Plan,” November 6, 2009, seeks to prevent or inhibit an overwhelming epidemic within the Marine Corps by providing sufficient personnel, equipment, facilities, materials, and pharmaceuticals to care for forces, civilian personnel, dependents, and beneficiaries.

• Marine Corps Depot Order 1510.32A, “Recruit Training Order,” August 22, 2019, establishes policy for the conduct of recruit training at MCRD SD.

• Marine Corps Depot Order 1513.6G, “Recruit Training Order,” January 9, 2019, establishes policy for the conduct of recruit training at MCRD PI.

• MCRD PI/Eastern Recruiting Region, “Disease Containment Response Plan for Pandemic Influenza,” April 20, 2012, defines the nature and scope of pandemic influenza response planning, setting forth operational procedures and providing guidance for pandemic influenza preparedness and pandemic influenza operations within the MCRD PI/Eastern Recruiting Region.

• MCRD SD/Western Recruiting Region, Depot Bulletin 5100, “Preparation and Response to Infectious Disease Novel Coronavirus (COVID-19),” March 13, 2020, provides guidance for the MCRD/Western Recruiting Region on synchronizing efforts to prepare for, mitigate, respond to, stabilize, and recover from the effects of a COVID-19 outbreak in order to preserve the force, prevent the spread of COVID-19, and enable continued mission execution and accomplishment.

**Navy**

• Bureau of Medicine and Surgery Instruction 3500.5, “Pandemic Influenza Planning Policy,” September 7, 2010, issues policy, outlines procedures, and identifies roles and responsibilities to support prevention, mitigation, preparedness, response, and recovery from an outbreak of Pandemic Influenza.


• Office of the Chief of Naval Operations Instruction 3500.41A, “Pandemic Influenza and Infectious Disease Policy,” November 19, 2018, issues policy, identifies responsibilities, and sets standards for pandemic influenza and infectious disease planning within the Navy as required.


• Commander, Navy Installations Command, “Fragmentary Order to PLANORD for COVID-19 Response, Naval Station Great Lakes,” March 12, 2020, provides a COVID-19 specific framework of actions and considerations to be utilized as a springboard to enact essential tasks immediately upon a positive confirmation of COVID-19 on a Navy installation. It also forms the foundation for follow-on actions and operations if an outbreak expands throughout an installation.

**Air Force**

• Air Force Instruction 10-2604, “Disease Containment Planning Guidance,” April 6, 2007, prepares the Air Force to respond to and mitigate biological events of operational significance, whether naturally occurring or the result of a deliberate attack, while enabling mission recovery and sustainment. Specifically, this instruction provides policy and guidance for disease containment planning, outlines roles and responsibilities, and discusses planning considerations, including the basic assumptions that must be considered in order to understand the unique aspects of negating or mitigating the effects of a contagious disease outbreak.

• Air Force Instruction 48-105, “Surveillance, Prevention, and Control of Disease and Conditions of Public Health or Military Significance,” July 15, 2014, implements provisions contained in DoD Instruction 6200.03 and explains the procedures for surveillance, prevention, and control of diseases and conditions of public health or military significance.
• Air Force Instruction 10-2519, “Public Health Emergencies and Incidents of Public Health Concern,” December 10, 2019, provides guidance to protect Air Force-led installations, assets, personnel, and base populations in the event of a public health emergency or incident of public health concern. The instruction specifies the authority of installation commanders and assigns responsibilities for declaring, reporting, and managing a public health emergency or incident of public health concern.


• 737th Training Group Operating Instruction 36-3, “Basic Military Training (BMT),” December 1, 2019, (published by 737th Training Group, JBSA-Lackland, Texas), to establish policies, procedures, and responsibilities for Air Force Basic Military Training.

• JBSA Guidance memorandum 19: “Social Distancing,” March 27, 2020, provides social distancing guidelines across JBSA.
Appendix C

Survey Results

This appendix provides a breakdown of responses to questions in the survey. The survey contained a total of 39 questions—34 multiple-choice and yes-no questions and 5 open-ended questions. For the 34 multiple-choice and yes-no questions, tables summarizing the responses are listed below. For the multiple-choice questions, we provide selected responses based on our initial interviews with the Military Services on the impact of COVID-19 at their basic training centers. Responses to the 5 open-ended questions and comments to multiple-choice questions were too lengthy for inclusion; therefore, we included examples of representative responses throughout the report.

We provided the survey to 3,549 first line training personnel (drill instructors, military training instructors, recruit division commanders, and drill sergeants) at the six basic training centers included in our review. Of the 3,549 potential participants, we received responses from 2,030 individuals. However, not all 2,030 participants responded to every question, and as a result, the total number of participants responding to each question may differ.

Demographic Information

Table 10. What is Your Military Branch of Service? (Survey Question 1)

<table>
<thead>
<tr>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>No Response</th>
<th>Not completed</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>894</td>
<td>545</td>
<td>227</td>
<td>278</td>
<td>10</td>
<td>76</td>
<td>2,030</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

Table 11. What is Your Basic Training Center Location? (Survey Question 2)

<table>
<thead>
<tr>
<th>U.S. Army Training Center and Fort Jackson, South Carolina</th>
<th>MCRD Parris Island, South Carolina</th>
<th>MCRD SD, San Diego, California</th>
<th>Navy RTC, Great Lakes, Illinois</th>
<th>Air Force Basic Military Training, JBSA, Texas</th>
<th>Air Force Basic Military Training, Keesler AFB, Mississippi</th>
<th>No Response</th>
<th>Not Completed</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>895</td>
<td>292</td>
<td>253</td>
<td>227</td>
<td>270</td>
<td>8</td>
<td>9</td>
<td>76</td>
<td>2,030</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.
Implementation of COVID-19 Specific Guidance

Table 12. Has the Guidance You Received for COVID-19 Been: (Survey Question 3)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clear</td>
<td>406</td>
<td>290</td>
<td>111</td>
<td>66</td>
<td>873*</td>
</tr>
<tr>
<td>Timely</td>
<td>372</td>
<td>255</td>
<td>98</td>
<td>93</td>
<td>818</td>
</tr>
<tr>
<td>Accurate</td>
<td>178</td>
<td>138</td>
<td>71</td>
<td>57</td>
<td>444</td>
</tr>
<tr>
<td>No Guidance Received</td>
<td>83</td>
<td>23</td>
<td>15</td>
<td>24</td>
<td>145</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.

Table 13. How Often are You Being Briefed by Your Command on COVID-19? (Survey Question 4)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily</td>
<td>289</td>
<td>297</td>
<td>73</td>
<td>52</td>
<td>711</td>
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<tr>
<td>Weekly</td>
<td>273</td>
<td>175</td>
<td>80</td>
<td>110</td>
<td>638*</td>
</tr>
<tr>
<td>Bi-Weekly</td>
<td>97</td>
<td>45</td>
<td>38</td>
<td>19</td>
<td>199</td>
</tr>
<tr>
<td>Ad hoc Basis</td>
<td>198</td>
<td>51</td>
<td>38</td>
<td>64</td>
<td>351</td>
</tr>
<tr>
<td>Not Briefed</td>
<td>50</td>
<td>13</td>
<td>6</td>
<td>12</td>
<td>81</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.

Table 14. Are There Aspects of the Guidance Received on COVID-19 That You Find Difficult to Adhere to? (Survey Question 5)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>526</td>
<td>294</td>
<td>136</td>
<td>195</td>
<td>1,151*</td>
</tr>
<tr>
<td>No</td>
<td>336</td>
<td>230</td>
<td>81</td>
<td>64</td>
<td>711</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.
Table 15. What Aspects of the COVID-19 Guidance Do You Find Difficult to Adhere to (Answer if Response to Question 5 was Yes)? (Survey Question 6)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practicality in the Basic Training Environment</td>
<td>449</td>
<td>262</td>
<td>104</td>
<td>172</td>
<td>987*</td>
</tr>
<tr>
<td>Insufficient Resources (Supplies, Personnel, Facilities)</td>
<td>373</td>
<td>187</td>
<td>92</td>
<td>129</td>
<td>781</td>
</tr>
<tr>
<td>Conflicting Guidance</td>
<td>358</td>
<td>162</td>
<td>90</td>
<td>133</td>
<td>743</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.

Table 16. What Challenges Have You Been Experiencing in Implementing Changes to Your Training Environment to Adhere to COVID-19 Guidance? (Survey Question 7)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insufficient Time</td>
<td>344</td>
<td>169</td>
<td>89</td>
<td>103</td>
<td>705</td>
</tr>
<tr>
<td>Lack of Resources (Manpower, Supplies, Infrastructure, Funding)</td>
<td>632</td>
<td>325</td>
<td>162</td>
<td>186</td>
<td>1,305</td>
</tr>
<tr>
<td>Conflicting Guidance</td>
<td>476</td>
<td>235</td>
<td>106</td>
<td>155</td>
<td>972*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.

**PPE and Cleaning Supplies**

Table 17. Has PPE Been Available for the Training Environment? (Survey Question 8)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>641</td>
<td>460</td>
<td>158</td>
<td>190</td>
<td>1,449*</td>
</tr>
<tr>
<td>No</td>
<td>210</td>
<td>54</td>
<td>58</td>
<td>58</td>
<td>380</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.
### Table 18. What PPE Have You Received (Answer if Response to Question 8 was Yes)? (Survey Question 9)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloves</td>
<td>378</td>
<td>122</td>
<td>59</td>
<td>39</td>
<td>598</td>
</tr>
<tr>
<td>Masks</td>
<td>598</td>
<td>453</td>
<td>138</td>
<td>176</td>
<td>1,365*</td>
</tr>
<tr>
<td>Respirators</td>
<td>10</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>14</td>
</tr>
<tr>
<td>None</td>
<td>15</td>
<td>1</td>
<td>7</td>
<td>6</td>
<td>29</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.

### Table 19. Have Cleaning Supplies Been Available for Basic Training? (Survey Question 10)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>706</td>
<td>449</td>
<td>192</td>
<td>221</td>
<td>1,568*</td>
</tr>
<tr>
<td>No</td>
<td>142</td>
<td>64</td>
<td>24</td>
<td>26</td>
<td>256</td>
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</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.

### Table 20. What Supplies Have You Received (Answer if Response to Question 10 was Yes)? (Survey Question 11)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soap</td>
<td>559</td>
<td>343</td>
<td>142</td>
<td>172</td>
<td>1,216</td>
</tr>
<tr>
<td>Cleaning Wipes and Disinfectant Spray</td>
<td>615</td>
<td>327</td>
<td>127</td>
<td>150</td>
<td>1,219*</td>
</tr>
<tr>
<td>Hand Sanitizer</td>
<td>660</td>
<td>372</td>
<td>168</td>
<td>209</td>
<td>1,409</td>
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</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.
Table 21. Did You Receive Instruction on the Proper Use of the Provided PPE? (Survey Question 12)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>668</td>
<td>450</td>
<td>196</td>
<td>185</td>
<td>1,499*</td>
</tr>
<tr>
<td>No</td>
<td>179</td>
<td>60</td>
<td>19</td>
<td>61</td>
<td>319</td>
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</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Table 22. Are You Required to Reuse Provided PPE? (Survey Question 13)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>427</td>
<td>402</td>
<td>131</td>
<td>168</td>
<td>1,128</td>
</tr>
<tr>
<td>No</td>
<td>420</td>
<td>111</td>
<td>83</td>
<td>76</td>
<td>690*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Table 23. What PPE Requires Reuse (Answer if Response to Question 13 was Yes)? (Survey Question 14)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloves</td>
<td>120</td>
<td>19</td>
<td>30</td>
<td>14</td>
<td>183</td>
</tr>
<tr>
<td>Masks</td>
<td>416</td>
<td>396</td>
<td>125</td>
<td>162</td>
<td>1,099</td>
</tr>
<tr>
<td>Goggles</td>
<td>27</td>
<td>9</td>
<td>27</td>
<td>7</td>
<td>70</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

Table 24. How Often (Answer if Response to Question 13 was Yes)? (Survey Question 15)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily</td>
<td>362</td>
<td>363</td>
<td>111</td>
<td>149</td>
<td>985</td>
</tr>
<tr>
<td>Weekly</td>
<td>60</td>
<td>30</td>
<td>13</td>
<td>7</td>
<td>110</td>
</tr>
<tr>
<td>Bi-Weekly</td>
<td>17</td>
<td>10</td>
<td>2</td>
<td>2</td>
<td>31</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.
Table 25. Was the PPE Provided Effective in the Basic Training Environment? (Survey Question 16)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>553</td>
<td>321</td>
<td>141</td>
<td>139</td>
<td>1,154</td>
</tr>
<tr>
<td>No</td>
<td>292</td>
<td>191</td>
<td>72</td>
<td>104</td>
<td>659*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Table 26. What PPE is Ineffective in a Basic Training Environment (Answer if Response to Question 16 was No)? (Survey Question 17)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloves</td>
<td>114</td>
<td>20</td>
<td>14</td>
<td>22</td>
<td>170</td>
</tr>
<tr>
<td>Masks</td>
<td>256</td>
<td>184</td>
<td>61</td>
<td>87</td>
<td>588*</td>
</tr>
<tr>
<td>Goggles</td>
<td>37</td>
<td>10</td>
<td>6</td>
<td>14</td>
<td>67</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Table 27. Have There Been Challenges With Replacing the PPE When Needed? (Survey Question 18)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>501</td>
<td>286</td>
<td>90</td>
<td>109</td>
<td>986</td>
</tr>
<tr>
<td>No</td>
<td>346</td>
<td>226</td>
<td>123</td>
<td>134</td>
<td>829*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Table 28. How Long did it Take to Get the PPE Replaced (Answer if Response to Question 18 was Yes)? (Survey Question 19)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less Than a Day</td>
<td>19</td>
<td>8</td>
<td>6</td>
<td>2</td>
<td>35</td>
</tr>
<tr>
<td>2 to 7 Days</td>
<td>177</td>
<td>90</td>
<td>39</td>
<td>37</td>
<td>343</td>
</tr>
<tr>
<td>8 to 21 Days</td>
<td>154</td>
<td>65</td>
<td>13</td>
<td>24</td>
<td>256</td>
</tr>
<tr>
<td>22 Days or More</td>
<td>66</td>
<td>32</td>
<td>4</td>
<td>3</td>
<td>105</td>
</tr>
<tr>
<td>Never Replaced</td>
<td>76</td>
<td>88</td>
<td>24</td>
<td>38</td>
<td>226</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.
### Screening for and Testing of Recruits and Training Personnel for COVID-19

Table 29. Were You Screened for COVID-19 Symptoms Prior to Contact With Recruits and Other Personnel? (Survey Question 20)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>297</td>
<td>310</td>
<td>149</td>
<td>56</td>
<td>812*</td>
</tr>
<tr>
<td>No</td>
<td>544</td>
<td>197</td>
<td>63</td>
<td>187</td>
<td>991</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.

Table 30. What Questions Were You Asked During the Screening (Answer if Response to Question 20 was Yes)? (Survey Question 21)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is the purpose of your visit today?</td>
<td>81</td>
<td>154</td>
<td>25</td>
<td>18</td>
<td>278</td>
</tr>
<tr>
<td>Have you traveled to an area with widespread or sustained community transmission of COVID-19 (within the last 14 days)?</td>
<td>193</td>
<td>262</td>
<td>144</td>
<td>25</td>
<td>624</td>
</tr>
<tr>
<td>Have you been in contact with a person that has confirmed COVID-19?</td>
<td>262</td>
<td>277</td>
<td>148</td>
<td>38</td>
<td>725*</td>
</tr>
<tr>
<td>Have you had or currently have a fever (greater or equal to 100.4° within the last 48-72 hours)?</td>
<td>215</td>
<td>273</td>
<td>141</td>
<td>36</td>
<td>665</td>
</tr>
<tr>
<td>Do you have a new or worsening cough or shortness of breath or both?</td>
<td>154</td>
<td>247</td>
<td>136</td>
<td>31</td>
<td>568</td>
</tr>
<tr>
<td>Do you have any flu-like symptoms (such as nasal congestion, sore throat, or headache)?</td>
<td>201</td>
<td>259</td>
<td>142</td>
<td>40</td>
<td>642</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.
Table 31. How Often are You Screened for COVID-19 Symptoms (Answer if Response to Question 20 was Yes)? (Survey Question 22)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Daily</td>
<td>187</td>
<td>101</td>
<td>114</td>
<td>9</td>
<td>411*</td>
</tr>
<tr>
<td>Weekly</td>
<td>20</td>
<td>43</td>
<td>11</td>
<td>2</td>
<td>76</td>
</tr>
<tr>
<td>Before Each Training Cycle</td>
<td>78</td>
<td>171</td>
<td>20</td>
<td>31</td>
<td>300</td>
</tr>
<tr>
<td>After Each Training Cycle</td>
<td>12</td>
<td>35</td>
<td>3</td>
<td>19</td>
<td>69</td>
</tr>
<tr>
<td>Not Screened</td>
<td>15</td>
<td>24</td>
<td>5</td>
<td>2</td>
<td>46</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Table 32. Have You Been Tested for COVID-19? (Survey Question 23)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>532</td>
<td>255</td>
<td>200</td>
<td>226</td>
<td>1,213</td>
</tr>
<tr>
<td>No</td>
<td>307</td>
<td>253</td>
<td>14</td>
<td>17</td>
<td>591*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Table 33. At What Point Were You Administered a COVID-19 Test (Answer if Response to Question 23 was Yes)? (Survey Question 24)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prior to Contact with Recruits</td>
<td>88</td>
<td>152</td>
<td>103</td>
<td>34</td>
<td>377</td>
</tr>
<tr>
<td>After Contact with Recruits</td>
<td>438</td>
<td>107</td>
<td>120</td>
<td>201</td>
<td>866</td>
</tr>
<tr>
<td>After Exhibiting Symptoms</td>
<td>68</td>
<td>68</td>
<td>33</td>
<td>18</td>
<td>187</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.
Table 34. How Long Did it Take to Receive the Results (Answer if Response to Question 23 was Yes)? (Survey Question 25)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less Than 24 Hours</td>
<td>114</td>
<td>30</td>
<td>12</td>
<td>31</td>
<td>187</td>
</tr>
<tr>
<td>24 to 48 Hours</td>
<td>177</td>
<td>121</td>
<td>47</td>
<td>148</td>
<td>493</td>
</tr>
<tr>
<td>48 to 72 Hours</td>
<td>193</td>
<td>86</td>
<td>101</td>
<td>45</td>
<td>425</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

Table 35. Were You Required to Quarantine Until Receipt of Your Test Results (Answer if Response to Question 23 was Yes)? (Survey Question 26)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>136</td>
<td>167</td>
<td>105</td>
<td>24</td>
<td>432</td>
</tr>
<tr>
<td>No</td>
<td>395</td>
<td>88</td>
<td>94</td>
<td>202</td>
<td>779</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

Table 36. Are Personnel Able to Return to Their Duties After Recovering From COVID-19? (Survey Question 27)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>790</td>
<td>487</td>
<td>205</td>
<td>233</td>
<td>1,715*</td>
</tr>
<tr>
<td>No</td>
<td>46</td>
<td>18</td>
<td>6</td>
<td>4</td>
<td>74</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.

Table 37. What Conditions Must Be Met to Return to Duty (Answer if Response to Question 27 was Yes)? (Survey Question 28)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Negative COVID-19 Result</td>
<td>436</td>
<td>255</td>
<td>106</td>
<td>119</td>
<td>916</td>
</tr>
<tr>
<td>Not Allowed to Return</td>
<td>8</td>
<td>3</td>
<td>4</td>
<td>0</td>
<td>15</td>
</tr>
<tr>
<td>Medically Cleared</td>
<td>532</td>
<td>393</td>
<td>147</td>
<td>132</td>
<td>1,204*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.
Source: The DoD OIG.
### Table 38. Have You Been in Contact with Recruits Who Have Tested Positive for COVID-19? (Survey Question 29)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>511</td>
<td>288</td>
<td>121</td>
<td>166</td>
<td>1,086</td>
</tr>
<tr>
<td>No</td>
<td>328</td>
<td>220</td>
<td>90</td>
<td>76</td>
<td>714*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

### Table 39. How Many (Answer if Response to Question 29 was Yes)? (Survey Question 30)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 5</td>
<td>148</td>
<td>73</td>
<td>32</td>
<td>63</td>
<td>316</td>
</tr>
<tr>
<td>Between 6 and 20</td>
<td>161</td>
<td>107</td>
<td>54</td>
<td>71</td>
<td>393</td>
</tr>
<tr>
<td>Over 20 but Under 50</td>
<td>120</td>
<td>78</td>
<td>21</td>
<td>20</td>
<td>239</td>
</tr>
</tbody>
</table>

Source: The DoD OIG.

Open-Ended Question - What training events have not been structured to accommodate social distancing? (Survey Question 31)

**Modifications to Basic Training Events**

### Table 40. Are You Concerned That the Modified COVID-19 Basic Training Schedule Will Not Produce the Quality of Recruits as Before? (Survey Question 32)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>559</td>
<td>372</td>
<td>145</td>
<td>189</td>
<td>1,265*</td>
</tr>
<tr>
<td>No</td>
<td>263</td>
<td>125</td>
<td>67</td>
<td>46</td>
<td>501</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.
Table 41. What Aspects of Basic Training Are Recruits Missing (Answer if Response to Question 32 was Yes)? (Survey Question 33)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Knowledge</td>
<td>265</td>
<td>96</td>
<td>98</td>
<td>101</td>
<td>560</td>
</tr>
<tr>
<td>Physical Fitness</td>
<td>432</td>
<td>295</td>
<td>116</td>
<td>147</td>
<td>990</td>
</tr>
<tr>
<td>Tactical/Field Skills</td>
<td>350</td>
<td>148</td>
<td>70</td>
<td>140</td>
<td>708</td>
</tr>
<tr>
<td>Military Skills and Discipline</td>
<td>480</td>
<td>334</td>
<td>118</td>
<td>170</td>
<td>1,102</td>
</tr>
<tr>
<td>Working in Teams</td>
<td>423</td>
<td>233</td>
<td>101</td>
<td>125</td>
<td>882*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Impact on Training Personnel

Table 42. What Challenge(s) Have You Faced Operating in a COVID-19 Environment? (Survey Question 34)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Limited Resources (such as Manpower, Supplies, Infrastructure)</td>
<td>642</td>
<td>344</td>
<td>165</td>
<td>189</td>
<td>1,340</td>
</tr>
<tr>
<td>Psychological/Mental Impact</td>
<td>422</td>
<td>216</td>
<td>158</td>
<td>139</td>
<td>935*</td>
</tr>
<tr>
<td>Insufficient Guidance</td>
<td>385</td>
<td>179</td>
<td>84</td>
<td>128</td>
<td>776</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Table 43. Have You Had to Assume Additional Roles and Responsibilities as a Direct Result of COVID-19? (Survey Question 35)

<table>
<thead>
<tr>
<th>Response Options</th>
<th>Army</th>
<th>Marine Corps</th>
<th>Navy</th>
<th>Air Force</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>382</td>
<td>221</td>
<td>145</td>
<td>134</td>
<td>882</td>
</tr>
<tr>
<td>No</td>
<td>442</td>
<td>274</td>
<td>64</td>
<td>95</td>
<td>875*</td>
</tr>
</tbody>
</table>

*The total does not include one respondent who did not identify their Military Service.

Source: The DoD OIG.

Open-Ended Question - What additional roles and responsibilities have you assumed? (Survey Question 36)
Proposed Strategies for Mitigating the Impact of COVID-19 on Basic Training

Open-Ended Question - What are your suggestions for improving processes in dealing with the impact of COVID-19, as it relates to basic training? (Survey Question 37)

Open-Ended Question - How could the DoD best support COVID-19 response, as it relates to basic training? (Survey Question 38)

Open-Ended Question - Do you feel there are adequate resources in place to allow you to perform your duties in the COVID-19 environment? (Survey Question 39)
Management Comments

U.S Army Training and Doctrine Command

DEPARTMENT OF THE ARMY
OFFICE OF THE DEPUTY CHIEF OF STAFF, G-3/5
400 ARMY PENTAGON
WASHINGTON, DC 20310-0660

DAMO-TR

21 JAN 21

SUBJECT: Task 201208-ZSJT: Audit of the Impact of the Coronavirus Disease–2019 on Basic Training

1. I have reviewed the findings, conclusions, and recommendations contained in the DoDIG draft report "Audit of the Impact of the Coronavirus Disease–2019 on Basic Training" and concur with the report and with TRADOC's input without comment.

STEVEN E. LAMPKINS
COL, GS
Chief, Institutional Training
U.S Army Training and Doctrine Command (cont’d)

MEMORANDUM FOR Department of Defense Inspector General, 4800 Mark Center Drive, Alexandria, Virginia 22350-1500

SUBJECT: Command Reply to DODIG’s Draft Report on the Audit of the Impact of Coronavirus Disease—2019 on Basic Training (Project D2020-D002RL-0118.000)


2. Headquarters, U.S. Army Training and Doctrine Command’s (TRADOC’s) reply to the subject draft report is enclosed. We partially concur with recommendations 1a and 1b and concur with comment with recommendations 1c and 1d as addressed to Commander, TRADOC.

Encl

[Signature]
PAUL E. FUNK II
General, U.S. Army Commanding
MEMORANDUM FOR Department of Defense Inspector General, 4800 Mark Center Drive, Alexandria, Virginia 22350-1500

SUBJECT: Command Reply to DODIG’s Draft Report on the Audit of the Impact of Coronavirus Disease—2019 on Basic Training (Project D2020-D000RL-0113.000)

1. U.S. Army Training and Doctrine Command’s (TRADOC’s) reply to the subject draft report is enclosed. We partially concur with Recommendations 1.a and 1.b and concur with comment with Recommendations 1.c and 1.d as addressed to Commander, TRADOC.

Encl

CONNIE G. HIBBARD
Major General, U.S. Army
Commanding
Response to Draft Audit Report Recommendation

Draft Report, DODIG’s Audit of the Impact of the Coronavirus Disease—2019 on Basic Training (Project D2020-D000RL-0118.000)

Recommendation 1: The DODIG recommended that the Commander, U.S. Army Training and Doctrine Command:

1.a. Develop procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

TRADOC Response: Partially concur.

TRADOC already has robust procedures in place to ensure compliance with the implementation of COVID-19 guidance at its Army Training Centers (ATCs) but will continue to adapt procedures when required. In March 2020, the Commanding General (CG), TRADOC directed leaders at all levels to intensely supervise all COVID-19 risk reduction measures to ensure strict adherence to standards. This was codified in Fragmentary Order (FRAGORD) 4 to TRADOC Operations Order (OPORD) 20-006, Resumption of TRADOC Training Base Operations, which was provided to the DODIG audit team. The CG, TRADOC and Deputy Commanding General (DCG), TRADOC regularly reinforce this requirement during weekly TRADOC Commander’s Update Briefs (CUBs) with Army Training Center (ATC) and Center of Excellence (CoE) commanders. Additionally, TRADOC and Center for Initial Military Training (CIMT) leadership and medical personnel look at compliance with COVID-19 guidance during all visits to ATCs/CoEs. Finally, ATC/CoE, brigade, and battalion leadership assess compliance with COVID-19 guidance when they look at their subordinate units. Whenever a unit is found not in compliance, corrective action is taken and/or retraining is conducted to get the unit back in compliance. TRADOC has worked with various entities, to include Army Public Health Center, to evaluate TRADOC and ATC response to COVID and to identify areas for improvement that are rooted in evidence-based medical and public health guidelines.

1.b. Develop procedures to ensure compliance with screening and testing of recruits and training personnel, to include procedures for timely testing and delivery of results.

TRADOC Response: Partially concur.

TRADOC does not own the personnel or equipment used to conduct testing within U.S. Food and Drug Administration guidelines. TRADOC relies on the U.S. Army Medical Command (MEDCOM) for all COVID testing capabilities. TRADOC has worked closely with MEDCOM and relevant DoD agencies to ensure each ATC has rapid, high volume testing capabilities and supplies within the limits of supply and national guidelines. Test results can occasionally take longer than desired when demand is very high, but results are still timely enough for TRADOC and the ATCs to meet the basic combat training...
U.S Army Training and Doctrine Command (cont’d)

(BCT) mission. All trainees are tested at least twice: once upon arrival at the ATC, and again before the end of their 2-week restriction of movement (ROM). Trainees cannot leave ROM and continue with BCT until their negative test results are received or Centers for Disease Control and Prevention (CDC) guidelines for quarantine or isolation have been fulfilled. Training personnel are tested when conditions warrant and within CDC and Defense Health Agency (DHA)/MEDCOM guidelines. Training personnel remain in isolation/quarantine until they fulfill CDC/DHA/MEDCOM guidelines for quarantine or isolation.

FRAGORD 4 to TRADOC OPORD 20-006 directed a daily screening of training personnel upon reporting to work and for drill sergeants to screen trainees daily. We acknowledge units can become complacent in their screening regimen when the vast majority of those who have tested positive in the training base are asymptomatic and those who are symptomatic do not wait until they are screened to bring it to someone’s attention. We will continue to reinforce screening requirements during CG, TRADOC CUBs, senior leader and medical personnel visits at ATCs/CoEs, and during ATC/CoE, brigade, and battalion assessments of their subordinate units; and to take corrective action and/or conduct retraining when a unit is found not in compliance.

1.c. Develop procedures to ensure compliance with the use of personal protective equipment and cleaning supplies necessary for basic training, to include defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.

TRADOC Response: Concur with comment.

TRADOC acknowledges there has been some confusion on the part of BCT units as to the use of masks, especially when trainees are in the barracks. It has come to TRADOC’s attention that some commanders incorrectly told trainees BCT barracks are their “living space” and therefore, under CDC guidelines at the time, they did not have to wear their masks when they were in the barracks. This was incorrect since BCT barracks are open bay (communal living) configurations. Action has been taken to correct this issue, and TRADOC recognizes it needs to continue to message this mask guidance to ensure minimal confusion on the part of units. Updated mask guidance will be published no later than 22 January 2021, and a copy will be provided to the DODIG audit team.

As with the previous recommendations, TRADOC’s procedures to ensure compliance with the use of protective equipment and cleaning supplies is the reinforcement of requirements during CG, TRADOC CUBs, senior leader and medical personnel visits at ATCs/CoEs, and during ATC/CoE, brigade, and battalion assessments of their subordinate units; and to take corrective action and/or conduct retraining when a unit is found not in compliance. This is how we identified the confusion with masks in the barracks and that it was more widespread than just one or two units and requires TRADOC to update its mask policy.
1.d. Assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance and take appropriate action based on that assessment.

TRADOC Response: Concur with comment.

Manpower requirements for training personnel are continually assessed by the ATCs to ensure compliance with COVID-19 procedures required by DoD, Army, TRADOC, and local guidance. When training personnel shortages arise that cannot be resolved by the ATC internally, the ATC coordinates with TRADOC to either shift BCT load to another ATC that has capacity and manpower available or to submit a request for forces to augment the ATC on a temporary basis. Both options have been used at ATC Fort Jackson during the COVID-19 pandemic to address potential training personnel shortages.

TRADOC has taken action to ensure ATCs have the training personnel they need. Early in the pandemic, TRADOC extended 449 Drill Sergeants (DSs) for 6 months to ensure the ATCs would have sufficient DSs through the summer surge under COVID-19 conditions. Headquarters, Department of the Army (HQDA) authorized assignment incentive pay (AIP) to compensate those DSs for their extended time on the trail. HQDA has also authorized AIP through calendar year 2021 for DSs who volunteer to extend for a third year of DS duty. Additionally, the DS Course at the Drill Sergeant Academy (DSA) was modified from a 9-week resident course to a 2-week distance learning plus 5.5-week resident course. The modified 2+5.5-week DS Course will continue through fiscal year 2021 (FY21) to ensure the DSA produces the number of DSs needed. HQDA also initiated the COVID Voluntary Recall Program to support units with additional manning requirements as a result of COVID-19. To support the training base, TRADOC requested 76 former DSs for assignment to the four ATCs. As of 8 December 2020, TRADOC has 11 Retiree Recall DSs on active duty orders supporting the ATCs.

TRADOC also recognized early in the pandemic that additional BCT capacity would be needed to meet BCT throughput while staying in compliance with COVID-19 guidance. TRADOC worked with HQDA to retain the five BCT companies it would lose at Fort Leonard Wood, MO due to the programmed deactivation of the 1-58th Infantry Battalion at the end of FY20. HQDA approved the retention of 1-58th’s five companies through FY21, giving TRADOC greater BCT capacity.

Finally, the Army approved training personnel manpower increases pre-COVID that had not been realized and/or filled yet when COVID-19 struck. The number of DSs in each BCT company will increase 33%, from 12 DSs to 16 DSs per company. One-half of the increase was realized in FY20, and the other half was realized early in FY21. The U.S. Army Human Resources Command is on track to fill all DS increases across the training base by the end of FY21, and TRADOC will closely monitor this. HQDA also approved an increase in the number of training support personnel for BCT battalions. The
U.S Army Training and Doctrine Command (cont’d)

increase in training support personnel will be fully realized by the end of FY22, and TRADOC will closely monitor this.

While this recommendation addresses manpower requirements for training personnel, TRADOC relies heavily on support from enterprise partners such as the U.S. Army Installation Management Command and MEDCOM to meet its reception and basic training mission. These enterprise partners have gone to extraordinary lengths to support TRADOC during this pandemic, but the level of support they have provided is probably not sustainable as installations and medical facilities/clinics gradually reopen and personnel return to their “normal” duties. TRADOC does not have the authority to direct/conduct manpower assessments of its enterprise partners.
From: Head, Audit Coordination and Liaison, Office of the Staff Director
To: Program Director for Audit Readiness and Global Operations, Office of Inspector General, U.S. Department of Defense


Ref: (a) DODIG Memorandum on subject dated December 7, 2020

Encl: (1) Commander, Training and Education Command Responses

1. Reference (a) provided the subject audit report for review and comment.

2. Responding for the Commander, Marine Corps Training and Education Command, enclosure (1) provides official responses from the Executive Deputy, Marine Corps Training and Education Command.

3. We appreciate the opportunity to respond to the report.

[Redacted text]

Copy to:
NAVAUDSVC (ALRJ)
IGMC
CL
DC, P&R (MCMICP)
CG, TECOM

CHARLES K. DOVE
RECOMMENDATION 1.a.: DODIG recommends that the Commander of the Marine Corps Training and Education Command:

Develop procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

USMC RESPONSE: Concur with comment. The Marine Corps has developed and continually reassesses procedures to ensure compliance with COVID-19 mitigation guidance at both Marine Corps Recruit Depots such as outlining social distance requirements and quarantine procedures, travel limitations, operating procedures and risk mitigation measures. Training and Education Command has conducted an extensive COVID-19 lessons learned collection effort resulting in a compilation of best practices to be maintained throughout this, and any future, pandemic response. This effort extended beyond the USMC by leveraging the Armed Services Council on Recruit Basic Training (CORBT) which is comprised of senior leaders of each Service’s entry-level training community of practice. It is important to note, that any deviations from policy identified by the DODIG team are a result of the rapidly evolving environment related to the pandemic and the need to balance mission accomplishment, risk to recruits and training personnel, and available resources.

RECOMMENDATION 1.b.: DODIG recommends that the Commander of the Marine Corps Training and Education Command:

Develop procedures to ensure compliance with screening and testing of recruits and training personnel, to include procedures for timely testing and delivery of results.

USMC RESPONSE: Concur with comment. The USMC has remained highly proactive in the screening and testing of recruits and training personnel as well as securing the maximum number of COVID-19 tests available in accordance with Department of Defense priorities and allocations. Recruits are screened before arrival, upon arrival, and multiple times throughout their Restriction of Movement (ROM) period at the Marine Corps Recruit Depots before being tested one final time at the end of the prescribed ROM. As an example of our efforts in the screening and testing of personnel, the USMC participated in the COVID-19 Health Action Response for Marines (CHARM) study sponsored by the Naval Medical Research Center. This Naval Medical Research Center effort will not only inform a larger body of research work in
Marine Corps Training and Education Command (cont’d)

combatting COVID-19 but also provided an estimated 18,000 tests that would not otherwise be available for USMC use.

RECOMMENDATION 1.c.: DODIG recommends that the Commander of the Marine Corps Training and Education Command:

Develop procedures to ensure compliance with the use of personal protective equipment and cleaning supplies necessary for basic training, to include defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.

USMC RESPONSE: Concur with comment. The off-site and non-invasive data collection methods used by the DODIG team, to include the use of surveys of training personnel, fails to highlight the extreme measures put in place to achieve the safety and security of recruits and training personnel while continuing to achieve the mission of providing initially trained Marines to the fleet. Examples of these measures include: the use of government-owned and civilian contracted Restriction of Movement isolation facilities to prevent the introduction of COVID-19 in the training environment, implementation of “Protected Movement” as a means to maintain a non-COVID-19 environment for the recruits as they progress from station to station throughout the United States, smaller platoon size and increased spacing in barracks, and the cancellation of family events and public graduation ceremonies as a means to prevent the introduction of COVID-19 from external sources.

RECOMMENDATION 1.d.: DODIG recommends that the Commander of the Marine Corps Training and Education Command:

Assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance and take appropriate action based on that assessment.

USMC RESPONSE: Concur with comment. Training and Education Command continually assesses and refines our manpower augmentation requirements in support of our initial entry training mission. Additionally, the USMC has, and will continue throughout the pandemic response, to meter our throughput rates commensurate with our ability to maintain a safe environment for both recruits and training personnel.
Naval Education and Training Command and Naval Service Training Command

From: Commander, Naval Education and Training Command
To: Office of the Inspector General, Department of Defense


Ref: (a) DoDIG Draft Report (Project No. D2020-D000RL-0118.000)

Encl: (1) NETC/NSTC Coordinated Management Response to Recommendation 1 from the DoDIG Draft Report for “Audit of the Impact of Coronavirus Disease–2019 on Basic Training (Project No. D2020-D000RL-0118.000)”

1. In response to reference (a), Enclosure (1) is submitted.

2. NETC has no recommended changes to the Security Markings of the Draft Report.

Very respectfully,

A. F. JOHNSON

Signed by: JOHNSON, ALAN FRANCIS

A. F. JOHNSON
By direction

Copy to:
Naval Audit Service
Naval Service Training Command
NETC/NSTC COORDINATED RESPONSE TO DoD OIG DRAFT REPORT, “AUDIT OF THE IMPACT OF COVID-19 ON BASIC TRAINING”  
Project No. (D2020-D000RL-0118.000)

1. Recommendation 1.a: Develop procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

Response: Non-concur.

The U. S. Navy's Recruit Training Manual, NAVCRUITRACOM M-1552.1A, is continually reviewed and updated to include the most recent COVID-19 guidance. The Commanding Officer regularly provides guidance to the trainers, instructors, and staff on the Department of the Navy's COVID-19 policy. Additionally, continuous training is held regarding the latest COVID-19 protocols. A specific department within Recruit Training Command (RTC), "Fleet Quality Assurance (FQA)" routinely conducts thorough inspections of personnel and spaces to ensure compliance with DoD, DoN, COVID-19 guidance.

2. Recommendation 1.b: Develop procedures to ensure compliance with the requirement for screening and testing of recruits and training personnel, to include procedures for timely testing and delivery of results.

Response: Non-concur.

RTC executes an off-site 14-day quarantine period, known by DoD as Restricted Onward Movement (ROM), for all new accessions, prior to beginning training. ROM is currently conducted offsite at the Ft. McCoy U. S. Army Reserve base, in Wisconsin. COVID-19 testing is conducted on 100% of the new accessions in offsite ROM. A "negative" test is required prior to leaving ROM and beginning training. Testing results are routinely returned within 96 hours. Positive recruits are identified and managed by a Preventive Medicine (PREVMED) team, permanently assigned to the offsite ROM location.

Sentinel testing for all trainers, instructors and support staff at Recruit Training Command is conducted on a weekly basis, on a 10-week cycle. In other words, 100% of the training cadre is tested every 10 weeks. These results are also available within 96 hours (or less).

During basic training, recruits are continuously monitored and evaluated daily by the training cadre and PREVMED technicians. An on-site respiratory technician quickly identifies and diagnoses symptomatic recruits and training cadre. PREVMED has a robust and highly effective program of identifying close contacts of infected personnel, as well containing identified infection clusters.

3. Recommendation 1.c: Develop procedures to ensure compliance with the use of PPE and cleaning supplies necessary for basic training, including defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.

Response: Concur.

Enclosure (1)
In accordance with the Centers for Disease Control (CDC) and the Navy Bureau of Medicine and Surgery (BUMED), RTC defines proper social distancing as a minimum of 6 ft. When this distance cannot be maintained, the use of masks is required regardless both indoors and outdoors. Barracks, classrooms, training facilities, and sanitary spaces are “deep cleaned” regularly. Additionally, training spaces are thoroughly sanitized throughout the day and after training event/evolution. Cleaning supplies/sanitizing materials and PPE are re-stocked daily.

4. Recommendation 1.d: Assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance and take appropriate action based on that assessment.

Response: Concur.

RTC completed an assessment of its manning requirements at the onset of the pandemic. This assessment identified a requirement for 259 additional trainers/instructors and 15 medical support personnel. These requirements have been validated by the Chief of Naval Personnel and these assignments are currently being filled.
Air Education and Training Command

13 January 2021

MEMORANDUM FOR DEPARTMENT OF DEFENSE INSPECTOR GENERAL

FROM: HQ AETC/CID
1 F Street, Suite 1
Randolph TX 78150-4324

SUBJECT: Response to Distribution of Discussion Draft Report, "Audit of the Impact of the Coronavirus Disease–2019 on Basic Training" (DOD-020-D000RL-0118.000)

1. A review of the DoD IG Draft Report, "Audit of the Impact of the Coronavirus Disease–2019 on Basic Training" was conducted by HQ AETC. Information that is either factually inaccurate or omissions considered relevant are identified in Attachment 1, AETC Comment Resolution Matrix (CRM). The requested security markings review is provided in Attachment 2. AETC’s formal response to the recommendations contained within the report is as follows:

RECOMMENDATION #1: The DoD IG recommends that the Air Force develop procedures to ensure compliance with the implementation of COVID-19 guidance at basic training centers.

AIR FORCE RESPONSE: The Air Force partially concurs in this recommendation. Because COVID-19 guidance is constantly evolving as we receive updates from the Center for Disease Control (CDC) and the Department of Defense (DoD), we acknowledge that additional oversight to facilitate full compliance at basic training centers is necessary. However, we have had robust, aggressive public safety measures in place since March 2020, to include extensive oversight of the execution of basic training and its supporting services. We will continue to augment the 37th Training Wing with additional Military Training Instructors (MTIs) and provide additional training space to facilitate physical separation until such time as we’re no longer required to implement COVID-19 mitigation measures; or until we are able to maintain the same level of oversight using our baseline manpower and facilities, should decreased production requirements and/or the effects of the vaccination program indicate it’s safe to do so.

The responsibility for ensuring compliance with CDC and DoD guidance is inherent in our Commanders’ authorities and our success, to date, is due in large part to effective execution of mission command at the lowest levels, as embodied by our MTIs and close partnership with our public health teams to implement a targeted and robust testing process. Since our implementation of robust public health measures and a culture of safety on 17 March 2020, we’ve trained 23,032 recruits (an on-time rate of 97%) with 880 total positive COVID-19 tests at entry and exit of their 14-day restriction of movement for an overall 4.5% prevalence rate in our Basic Military Training (BMT) population. None of our trainees, or MTIs, have required care at a Military Treatment Facility. We have procedures in place to facilitate compliance and hold personnel accountable for non-compliance as appropriate. While we will continue to adjust our guidance as we receive updates from the CDC and DoD, we consider our actions to implement this recommendation complete and welcome the DoD IG’s continued oversight of execution.

RECOMMENDATION #2: The DoD IG recommends that the Air Force develop procedures to ensure compliance with the requirement for screening and testing of recruits and training personnel, to include procedures for timely testing and delivery of results.
AIR EDUCATION AND TRAINING COMMAND (cont’d)

AIR FORCE RESPONSE: The Air Force partially concurs in this recommendation. In March 2020, the Air Force implemented robust procedures to comply with the requirement for screening and testing of recruits and training personnel, to include procedures for timely testing and delivery of results. We continue to refine these procedures as we receive revised policy and procedures from the CDC and DoD and as test kits, associated supplies, and laboratory support become more widely available. We are fully engaged with our sister Service counterparts through the Council on Recruit Basic Training (CORBT) to share lessons learned and implement “best practices” for surveillance testing, restriction of movement and quarantine across our training personnel and supporting staffs. An overview of Air Force procedures from recruitment to accession and within the BMT pipeline is provided at Tab 1. The responsibility for ensuring compliance with CDC and DoD guidance is inherent in our Commanders’ authorities and our success to date is due in large part to effective execution of mission command at the lowest levels, as embodied by our MTIs, our Recruiters, and the medical personnel embedded in our BMT operations to ensure proper implementation of public health measures and rigorous testing. We have procedures in place to facilitate compliance and hold personnel accountable for non-compliance as appropriate. We ask for the Department’s continued efforts to improve supply chain resiliency to ensure adequate resources are available for us to fully implement our screening and testing programs. While we will continue to adjust our procedures as we receive updates from the CDC and DoD, we consider our actions to implement this recommendation complete and welcome the DoD IG’s continued oversight of execution.

RECOMMENDATION #3: The DoD IG recommends that the Air Force develop procedures to ensure compliance with the use of personal protective equipment and cleaning supplies necessary for basic training, including defining social distancing requirements with additional emphasis on the use of masks for indoor and outdoor environments.

AIR FORCE RESPONSE: The Air Force partially concurs in this recommendation. In March 2020, the Air Force implemented robust procedures to comply with requirements to use personal protective equipment and to conduct enhanced cleaning of facilities and equipment at BMT. We seek the Department’s continued support for the increased levels of funding associated with contract modifications necessary to increase standards of cleanliness and implement necessary public health measures. We further request the Department’s continued persistent efforts to improve supply chain resiliency to ensure adequate stores of personal protective equipment are available for us to fully implement the enhanced public health measures and robust culture of safety necessary to successfully mitigate risk while continuing BMT operations. The responsibility for ensuring compliance with CDC and DoD guidance is inherent in our Commanders’ authorities and our success to date is due in large part to effective execution of mission command at the lowest levels, as embodied by our MTIs, support staff, and the medical personnel embedded in our BMT operations to ensure proper implementation of public health measures. We have procedures in place to facilitate compliance and hold personnel accountable for non-compliance as appropriate. While we will continue to adjust our procedures as we receive updates from the CDC and DoD, we consider our actions to implement this recommendation complete and welcome the DoD IG’s continued oversight of execution.

RECOMMENDATION #4: The DoD IG recommends that the Air Force assess manpower requirements for training personnel to ensure compliance with COVID-19 procedures required by DoD guidance and take appropriate action based on that assessment.

AIR FORCE RESPONSE: The Air Force partially concurs in this recommendation. Since the implementation of COVID-19 mitigation measures in March 2020, the Air Force has continuously assessed manpower requirements required for compliance with CDC and DoD guidance and taken appropriate actions based upon our assessment. This includes our decision to execute contingency BMT operations at Keesler Air Force Base and Camp Shelby, Mississippi, and the stand-up of an eighth squadron to optimize
Air Education and Training Command (cont’d)

our existing organizational structure and to relieve the strain on personnel and infrastructure in the Joint Base – San Antonio area of operations while continuing to generate the force necessary to sustain Air Force operations more broadly. Our manpower assessment drove us to recall MTIs who had served in the 37th Training Wing in the past two years for 179-days, and utilize our Reserve component MTIs to augment the training cadre at Lackland AFB, Texas, to ensure that we not only had the appropriate level of oversight of compliance with public health measures and a strong culture of safety, but to prepare for the potential impact of an outbreak of COVID-19 within the training pipeline. Our initial tranche of MTIs who were recalled to Lackland AFB returned to their assigned duty stations by 31 Dec 2020. With the cessation of contingency BMT operations at Keesler AFB in November 2020, the MTIs and support personnel assigned to that operation have been reconstituted, with the MTIs returned to Lackland AFB and supporting staff returning to their home stations across Air Education and Training Command. A second tranche of MTIs has been identified to augment BMT operations at Lackland AFB for 179-days and is projected to be in place NLT 31 January 2021 to ensure we have sufficient oversight of the implementation of CDC and DoD guidelines and to ensure we have the depth necessary to withstand an outbreak of COVID-19 within the training pipeline, should it occur. We will evaluate the need to recall a third augmentation force in April 2021 and will continue to supplement the MTI-corps at Lackland AFB as COVID-19 conditions dictate. Similarly, we will continue to evaluate the need for additional Reserve personnel to help augment our active-duty MTI workforce. Based upon our current projections for vaccination timelines and the potential for the Food and Drug Administration to deliver full approval of a vaccine, we believe continuous assessment of manpower requirements will be necessary through 31 December 2021. (ECD: December 2021)

WILLIAM A. SPANGENTHAL
Major General, USAF
Deputy Commander, Air Education and Training Command

2 Attachments:
1. AETC CRM
2. Security Markings Review
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U.S. Department of Defense

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For more information about DoD OIG reports or activities, please contact us:

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