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**IG Complaints Resolution Program, AFI 90-301**

**Policy:** The Air Force IG Complaints Resolution Program (CRP) is a leadership tool that indicates where commander involvement is needed to correct systemic, programmatic, or procedural weaknesses and ensures resources are used effectively and efficiently; resolves problems affecting the Air Force mission promptly and objectively; creates an atmosphere of trust in which issues can be objectively and fully resolved without retaliation or the fear of reprisal; assists commanders in instilling confidence in Air Force leadership.

**Mission Focus**

The primary charge of the IG is to sustain a credible Air Force IG system by ensuring the existence of responsive complaint investigations, and fraud, waste, and abuse (FWA) programs through objectivity, integrity, and impartiality. The IG ensures the concerns of complainants and the best interests of the Air Force are addressed through objective fact-finding.

**Authority for IG Access to Air Force Records:**

To carry out their responsibilities, IGs, IG staff members and Investigating Officers (IOs) must have expeditious and unrestricted access to, and copies of, all Air Force records, reports, investigations, audits, reviews, documents, papers, recommendations or other relevant material authorized by law and policy. Inspectors General are authorized access to all documents and all other evidentiary materials needed to discharge their duties to the extent allowed by law and policy. **No** Air Force member or employee may deny an IG or a properly appointed IO such access. (AFI 90-301, para. 1.10)

**AFGSC/IG Local Contact Numbers:**

Commercial: (318) 456-4869/DSN 781-4869

**Commander and IG Partnership**

The Chain of Command is the primary, preferred avenue for resolving complaints. The IG always asks complainants if they have sought relief through their Chain of Command. If the complainant has not gone through their Chain of Command and the allegation is within the commander’s purview to address, the IG will
normally contact the Squadron Commander and refer the issue to him/her for action.

The following are matters normally referred to the commander for resolution.

a. Landlord or tenant disputes (AFI 32-6001)
b. Support of dependents and private indebtedness (AFI 36-2906)
c. LOC, LOR, or Art 15 (other than discrimination/reprisal)
d. Allegations of homosexual conduct (AFI 36-3208-Enlisted)
(afi 36-3207-Officers)
e. Misuse or abuse of government vehicles (AFI 24-301)
f. Unprofessional relationships/adultery (AFI 36-2909)
g. Any issue concerning good order and discipline

If a complaint falls in the IG’s purview to investigate, the Squadron Commander will be notified and asked to do the following:

a. Summon witnesses
b. Provide documents required as evidence
c. Prevent the coaching of or interference with witnesses
d. Receive or appoint a responsible official to receive the hand-off of subjects following their interview
e. Take corrective action on substantiated allegations

**IG ISSUES REPORTED TO AFGSC/IG, SAF/IG AND DoD/IG**

**Reprisal**

**Definition:** Reprisal is taking or threatening to take an unfavorable personnel action or withholding or threatening to withhold a favorable personnel action on a military member for making or preparing a **Protected Communication** (PC).

A broad definition of a protected communication is one where the disclosing member reasonably believes he or she has evidence of a violation of law or regulation, including laws or regulations prohibiting sexual harassment or unlawful discrimination, gross mismanagement, a gross waste of funds, an abuse of authority, or a substantial and specific danger to public health or safety. The member then discloses this evidence to a member of Congress, the IG, IG staff, EO, Family Advocacy, law
enforcement organizations, inspection or audit personnel, Squadron Commander, Flight Commander, Command Chief Master Sergeant, First Sergeant or civilians leading an organization designated as a unit IAW AFI 38-101.

An adverse personnel action is any action taken on a member of the armed forces that affects or has the potential to affect (for example a threat) that military member’s current position or career. Such actions include (but are not limited to):

1. A demotion
2. A disciplinary or other corrective action
3. A transfer or reassignment
4. A performance evaluation
5. A decision on pay, benefits, awards, or training
6. Referral for mental health evaluation
7. And/or any other significant change in duties or responsibilities inconsistent with the military member’s rank.

Many times the squadron commander or other senior officer/enlisted leaders will find themselves subjects of an IG investigation even though they were not identified as subjects by the complainant.

The IG is required to identify and investigate all Responsible Management Officials (RMO) that had involvement with the adverse personnel action.

Responsible Management Officials are:

1. Officials who influenced or recommended to the deciding official that he/she take, withhold, or threaten a management action.
2. Officials who decide to take, withhold, or threaten the management/personnel action.
3. Any other official who approved, reviewed, or endorsed the management/personnel action.

**Examples of potential reprisal**

1. A military member goes to EO and files a complaint of sexual harassment/racial discrimination against his/her supervisor. The member then receives an LOC or LOR from a supervisor in his/her chain (rater, First Sergeant, Commander etc.). The LOC or LOR states the member embarrassed the squadron by going outside the chain of command with his/her issue and for that he/she is receiving the LOC or LOR.

2. A military member files a complaint against her Flight Commander to the Squadron Commander alleging a violation of a law or
regulation. The Flight Commander takes action against the complainant by removing her from the flight and asking the member’s previous supervisors to write adverse MFRs about the member for her PIF, resulting in the member being “not recommended” for re-enlistment.

**Restricted Access**

**Definition:** To place boundaries or barriers upon military members through the use of direct or indirect means.

According to Title 10 USC 1034, “No person may restrict a member of the armed forces in communicating with a Member of Congress or an Inspector General.”

We recommend commanders and members of their organizations who supervise encourage their people to use the chain of command. Leave it at that! Never say, “If you have a problem or issue, you must use your immediate chain of command before you go to outside agencies such as the IG.” Why? Because you are opening yourself and your organization up to a potential allegation of restriction!

The better way to state this is to say, “If you have a problem or issue, I would like you to give the chain of command an opportunity to resolve it; however you are always free to go to the IG or another helping agency.”

**Examples of Restriction include but are not limited to:**

1. Telling someone you will drop the LOR being processed against them if they withdraw their IG complaint.
2. Telling someone that by filing a congressional complaint they have poisoned the atmosphere for their future within the unit.
3. Telling unit personnel that all issues must be worked within the chain of command.
4. Preventing someone from going to the IG.
5. Flight Superintendent makes a comment that all issues will go through me before you can discuss them with anyone else outside this flight.
Improper Mental Health Evaluation Referral

Definition of a Mental Health Evaluation (MHE) per AFI 90-301: A clinical assessment of a service member for a mental, physical, or personality disorder to determine the member’s mental health status and fitness for duty. It does not include interviews under family advocacy programs or Air Force drug and alcohol abuse rehabilitation programs.

There are two types of Commander Directed Evaluations (CDEs): Non-Emergency and Emergency.

Only a member’s commanding officer can refer a member for a Mental Health Evaluation. Commanding officer actions for each type CDE are as follows:

1. Non-Emergency Mental Health Evaluation: The commanding officer shall ensure the service member is provided a written memorandum at least two business days before a non-emergency referral for a mental health evaluation. The memorandum shall include at a minimum:
   a. A brief factual description of the behaviors and/or verbal communications that led to
   b. The name or names of the mental healthcare provider(s) with whom the commanding officer consulted before making the referral. If a consultation with a mental healthcare provider was not possible, the memorandum shall state the reason(s) why.
   c. Notification of the service member’s Statement of Rights.
   d. The date, time and place the mental health evaluation is scheduled and the name and rank of the mental healthcare provider who will conduct the evaluation.
   e. The titles and telephone numbers of other authorities, including attorney, Inspector General, and chaplain, who can assist the service member who wishes to question the necessity of the referral.
   f. The name and signature of the commanding officer.
   g. The service member shall acknowledge that he or she has been advised of the reasons for the referral for a mental health evaluation and his or her rights by signing the memorandum. If the service member
refuses or declines, the commanding officer shall so state on the memorandum and the reasons the service member gave for not signing the memorandum.

h. Copies of the signed memorandum shall be provided to the service member and to the mental healthcare provider who shall conduct the evaluation.

i. Commanding officers shall not offer service members an opportunity to waive his or her right to receive the written memorandum and statement of rights.

2. **Emergency Mental Health Evaluations:**
   When the commanding officer makes a clear and reasoned judgment that the case constitutes an emergency, the commanding officer’s first priority shall be to protect the service member and potential victims from harm. The commanding officer shall:
   
a. Make every effort to consult a mental healthcare provider, or other privileged healthcare provider if a mental healthcare provider is not readily available, prior to referring or sending a service member for an emergency mental health evaluation.
   
b. Take actions to safely convey the service member to the nearest healthcare provider or, if unavailable, a physician or senior privileged non-physician provider present, as soon as practical.
   
c. As soon as is practicable, provide the service member a memorandum and statement of rights.
   
d. If due to the nature of the emergency the commanding officer was unable to consult with the mental healthcare provider or other privileged healthcare provider, prior to transporting the service member for evaluation the commanding officer shall forward a memorandum documenting the circumstances and observations about the service member that led to the decision to refer the service member on an emergency basis. This memorandum shall be forwarded by facsimile or overnight mail or courier to the mental healthcare provider or other privileged healthcare provider, if a mental healthcare provider is not available, as soon as practical.

There is actually a third type of mental health referral—the **Involuntary Inpatient Referral**. There are specific patient rights if inpatient treatment is required. **Important to remember: Commanders do not have admitting privileges.**
**Safety Checks:** Safety checks, health and wellness checks, risk evaluations and other similarly termed assessments **are not authorized** substitutes for Commander Directed Evaluations (CDEs). Properly performed CDEs protect the rights of military members while allowing commanders to obtain pertinent information they need to make operational decisions from authorized Mental Health professionals.

IGs have discovered that in some cases, safety checks were being done in lieu of properly conducted CDEs. This led to several allegations being substantiated for procedural incorrectness.

**Examples of Improper Mental Health Evaluation Referrals:**

1. A First Sergeant refers a member for a non-emergency mental health evaluation.

2. The squadron commander refers a member to Mental Health for a “safety check.” The member receives no statement of rights.

3. Immediate supervisor tells the member he/she needs to go to Mental Health.

**NOTE:** If anyone in the squadron is faced with a service member who appears **imminently dangerous** to himself/herself, others or government property, it is appropriate for them to take whatever action is necessary to get the member immediate help to include getting them medical/mental health assistance. However, once the situation is safe, they must inform the squadron commander who must comply with the requirements directed for an emergency mental health evaluation referral.

**Common Referral Problems:**

1. Commanders not aware of proper procedures.

2. Member “not protesting” does not equal “voluntary.” It is important to note that a “voluntary” MHE is one where the service member makes his/her own appointment with Mental Health and goes to the appointment. Moreover, the commander has **no** expectation
of receiving the results of that appointment from the mental health care provider.

3. Health Care Providers and lawyers not aware of guidance/requirements of DoDI 6490.4.

RECURRING ISSUES & PITFALLS

Denial of Reenlistment

Typical Complaint: “I have been unfairly denied reenlistment.”

Procedural Pitfall: Improper processing of the AF Form 418 by the rater and/or commander and commander not thoroughly reviewing the member’s records (PIF/Training etc.) to ensure the reasons for denying reenlistment can be validated. Far too often the IG review of available records finds little to no documentation (performance feedbacks, LOCs etc.) to support the denial of reenlistment recommendation. Routinely our airmen are finding out about their non-selection when they are told to pick up the completed 418 from the First Sergeant or orderly room and told to take the form to the Military Personnel Section (MPS) for processing. This is unfair to our airmen and violates the AFI.

Per AFI 36-2606, Para. 1.10.2, Unit commanders sign and date the AF Form 418 and attach any supporting documentation to substantiate non-selection decisions. Commanders send all copies of the form to the orderly rooms for return to the MPS.

Commanders will schedule airmen for personal interviews and accomplish the following:
Discuss the following items with non-selected airmen: specific reasons for non-selection, areas needing improvement, appeal opportunity, promotion ineligibility (to include automatic cancellation of projected promotion line numbers), and the possibility of future reconsideration and selection.

Ensure non-selected airmen complete Section IV and render their appeal intent in Section V within 3 workdays thereafter. When airmen intend to appeal, commanders send all copies of the completed AF Forms 418 to the orderly rooms for return to the MPS. When airmen don’t intend to appeal, commanders keep the first copy, give airmen the second copy and send the originals to the orderly rooms for return to the MPS.

Discharge due to CDC Failure

Typical Complaint: “I did not receive proper training.”
**Procedural Pitfall:** Commanders not thoroughly reviewing the members AF Form 623 Individual Record Training Folder, before making the decision to discharge. Many times the fault lay with the trainer and training program and not the trainee.

**Leave Program**

**Typical Complaint:** “I had approved leave and then my supervisor told me to come back for no reason. I was out of state/out of the area and didn’t return until my leave was up. He then gave me an LOR for not returning ASAP.”

**Procedural Pitfall:**

Unless delegated in writing, only the squadron commander can disapprove leave. In addition, only the commander can recall a member once leave is approved. Two of these type complaints were presented to the IG and in both cases the squadron commander rescinded the LORs due to AFI procedural errors and abuse of authority by the member’s raters.

**Support of Dependents**

**Typical Complaint:** My military spouse and I are separating and he hasn’t/won’t give me any money. The squadron commander and/or First Sergeant won’t talk to me or the squadron commander and/or First Sergeant say there is nothing they can do because it is a civil matter.

**Procedural Pitfall:** Commanders stating that there is nothing they can do. Commanders have the authority to direct the military member receiving with dependent rate BAH to give their spouse the monetary difference between the dependent rate and single rate BAH as support.

**Reprisal**

**Typical Complaint:** Military member files a complaint of wrongdoing with the IG or squadron commander and then they receive an adverse personnel action i.e. LOC, LOR, downgraded OPR/EPR, denial of reenlistment etc.

**Procedural Pitfall:** When the complainant is an enlisted member, we have seen the squadron commander pass the complaint to the First Sergeant to look into as an “enlisted” matter. The First Sergeant then investigates the complainant instead of the complaint (easy to do when not a trained investigator) with the end result being the First Sergeant determines the subject of the complaint didn’t mean to do what they did and the
complainant overreacted. The complainant then receives disciplinary action from the subject for highlighting them to the commander.

Squadron commanders, flight commanders and first sergeants must be aware that complaints of wrongdoing are protected communications. When taking action to resolve the issue, investigate the complaint and not the complainant. By properly and objectively handling a complaint of wrongdoing, you strengthen belief in the integrity of the Chain of Command.

Remember, an act of reprisal following the member’s initial complaint may not be immediate. A complainant may receive a downgraded or referral EPR/OPR, denial of enlistment, etc. from the subject of their complaint months after the initial complaint. If you endorse an adverse personnel action, you are considered a Responsible Management Official (RMO) and subject to an allegation of reprisal. However, do not let it prevent you from taking action when needed concerning a former complainant. Just ensure you can justify the action taken.

**Fraud, Waste and Abuse**

**Typical Complaint:** Someone is using government property/equipment for personal use.

**Procedural Pitfall:** Members of the squadron, to include some fairly senior leaders, stating it was an unwritten policy that you could use the unit’s government equipment for personal use (in the shop or take home). AFI 23-111, Management of Government Property in the Possession of the Air Force and the DoD 5500.7-R, Joint Ethics Regulation, limit the use of all Federal resources, including personnel, equipment and property for official purposes only.

**Improper Mental Health Referral**

**Typical Complaint:** “I was sent to Mental Health against my wishes.” “I was told by my supervisor/First Sergeant/Commander that I could either go to Mental Health voluntarily or they would direct me to go. I went but I feel it was wrong. I only went because I felt intimidated by my supervisor/First Sergeant/Commander.”

**Procedural Pitfall:** Someone in the member’s chain of command referring them for a Mental Health Evaluation. **Remember, only a member’s commanding officer can refer a member for a Mental Health Evaluation.**
The squadron commander refers a member for a Mental Health Evaluation and fails to provide the member with their statement of rights.

**COMMANDER DIRECTED INVESTIGATION**

Commander Directed Investigation (CDI)-All commanders possess inherent authority to investigate matters or incidents under their jurisdiction unless preempted by a higher authority. The conduct of CDIs does not fall under the authority of The Inspector General. SAF/IGQ has made a CDI guidebook available to assist commanders and their IOs in conducting CDIs.

A CDI is a tool to gather, analyze and record relevant information about matters of primary interest to command authorities. It, unlike an IG investigation, is not intended to be an outside look by an “independent” office. Rather it is an extension of the commander’s authority to investigate and correct perceived problems within the command. The investigation is initiated by the commander and is internal to the command concerned.

Because commanders make decisions and frequently take action based upon information contained in a CDI report, it is paramount that IOs conduct thorough, unbiased, and well focused investigations, and report their results in a clear, professional, and timely manner.

The IO should be trained to conduct thorough, unbiased investigations based on fair and objective fact-finding. In addition to the CDI guidebook, the IG staff is available to train IOs in how to conduct a thorough investigation, ensure allegations are framed properly, formulate questions for witnesses, properly format the Report of Investigation (ROI) and ensure the IO does not investigate issues that fall under another agency’s purview (i.e.: reprisal).

Allegations may arise which fall into one of several categories of special interest cases more properly under the purview of other base agencies. Raise the issue with the appropriate OPR. Secure the advice of the Staff Judge Advocate before proceeding further. Allegations falling into these categories may include:

a. **Reprisal/Restricted Access/Improper Mental Health Evaluation.** Commanders will not investigate these types of allegations. Commanders will refer such allegations to the IG for investigation.
b. **Fraud, Waste and Abuse (FWA).** Bring FWA allegations to the attention of the IG.

c. **Senior Official Misconduct.** All allegations of misconduct by senior Air Force officials are investigated by SAF/IGS. “Senior Official” is defined as any active duty, retired, Reserve, or Air National Guard 0-7 select and above. It includes any current or former civilian employee above the grade of GS/GM-15, any current or former member of the Senior Executive Service (SES), and any current or former Air Force civilian presidential appointee. Any allegation of misconduct by a senior official should **immediately** be referred to the IG for reporting to SAF/IGS.

d. **Colonel/Colonel (sel) or GS/GM-15.** Notification of and a copy of any material collected or potentially adverse information of any kind against a colonel (or civilian equivalent) must be provided to SAF/IGQ in accordance with AFI 90-301.

e. **Discrimination/Sexual Harassment.** Allegations of discrimination based on color, national origin, race, ethnic group, religion or sex and sexual harassment should be brought to the attention of the EO office.

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**CONGRESSIONAL INQUIRIES**

The Secretary of the Air Force, Office of Legislative Liaison (SAF/LL), is the agency tasked to respond on behalf of the Air Force to all member, staff and constituent inquiries from the White House and Members of Congress. SAF/IGQ will maintain liaison and coordination with the Secretariat, Air Staff, Office of the Secretary of Defense, and other government agencies to resolve inquiries and forward responses to the appropriate congressional member.

Ordinarily, congressional members contact the Air Force through the Congressional Inquiry Division (SAF/LLI). SAF/LLI, in turn, tasks the appropriate functional. If it is an IG matter, then it is referred to SAF/IGQ for review/investigation of the case, if appropriate. If the inquiry is a personnel issue, SAF/LLI will task AFPC to contact the MPS Chief at the appropriate installation who in turn will task the appropriate squadron commander/agency chief for information that can be used to respond to the complainant. Other avenues for receiving congressional complaints/inquiries are directly
from the Congressperson’s office and directly from your HHQ functional office.

The established process for responding to a Congressional inquiry, regardless of how it entered the Wing, is to notify the Wing Commander’s office and Inspector General (IG) office that you received a complaint and provide these offices a copy of the complaint. The IG will forward a courtesy copy of the complaint to AFGSC/IGQ and AFGSC/CCX.

Once the responsible officials have drafted a response, that response will be staffed through the appropriate Group leadership, JA, IG, Wing CV and then to the Wing CC for approval. Once the Wing CC has signed the response document, it can be sent to the tasking agency. The IG will send a courtesy copy of the final response to the AFGSC/IGQ and AFGSC/CCX offices.

**Final Thoughts**

The IG complaint system is invariably fair and thorough; however, it is generally not the fastest method, nor ultimately any more effective than actions taken by commanders and supervisors.

Commanders and supervisors who are closest to an issue can zero in on the root cause of a problem and find the best solution.

AFI 90-301 states it well, “The lowest-level supervisor can often resolve complaints more quickly and effectively than a higher-level not familiar with the situation.”

The job of commanders, supervisors and IGs is to help people with their problems. Together, we can ensure all who serve are mission-focused and combat-ready.”
Finally, do not hesitate to give your IG a call to discuss issues. The IG may report to the wing commander, but they are available to assist everyone.

LIST OF USEFUL INSTRUCTIONS

a. **AFI 90-301** Inspector General Complaints Resolution

b. **DoDD 6490.1** Mental Health Evaluations of Members of the Armed Forces

c. **DoDI 6490.4** Requirements for Mental Health Evaluations of members of the Armed Forces

d. **AFI 44-109** Mental Health, Confidentiality, and Military Law

e. **AFI 36-2606** Reenlistments in the USAF

f. **AFI 36-2618** The Enlisted Force Structure

g. **AFI 36-2909** Professional and Unprofessional Relationships

h. **AFI 36-3003** Military Leave Program

i. **CDI Guide** Contact your IG office