

**BY ORDER OF THE COMMANDER
AIR FORCE RESERVE OFFICER
TRAINING CORPS (AFOTC)**

AIR FORCE ROTC INSTRUCTION 90-201

10 MAY 2019



Special Management

**AFOTC DETACHMENT ASSESSMENT/
SELF-ASSESSMENT PROGRAMS**

COMPLIANCE WITH THIS PUBLICATION IS MANDATORY

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This instruction implements Air Force Instruction 90-201, *The Air Force Inspection System* and the Air Education and Training Command Supplement to AFI 90-201 for AFOTC. This instruction establishes policies, procedures, and responsibilities governing implementation and conduct of MAJCOM level IG inspections, the Air Force Reserve Officer Training Corps (AFOTC) Detachment Assessment (DA) program, and the management of the Self-Assessment Program at AFOTC detachments. This instruction applies to all AFOTC Regions and Detachments. Submit an AF Form 847, *Recommendation for Change of Publication*, to the OPR to recommend changes to this publication. Ensure that all records created as a result of processes prescribed in this publication are maintained in accordance with Air Force Manual (AFMAN) 33-363, *Management of Records*, and disposed of in accordance with Air Force Records Information Management System (AFRIMS) Records Disposition Schedule (RDS). Implementing publications are not authorized. For any waiver requests, follow the guidance outlined in Chapter 4 of this instruction.

SUMMARY OF CHANGES

This instruction has been substantially revised and must be reviewed in its entirety.

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CHAPTER 1

ADMINISTRATION

1.1. Purpose and Responsibilities. This instruction implements the MAJCOM-level Inspector General (IG) assessment of Air Force Reserve Officer Training Corps (AFROTC) detachments, as delegated by AETC/IG, and implements the Self-Assessment Program (SAP) at AFROTC detachments, both of which are tailored from the Air Force Inspection System (AFIS). HQ AETC and Air University (AU) have delegated inspection responsibilities to HQ AFROTC since 1 May 2019. HQ AFROTC is responsible to plan, organize, and conduct AFROTC Detachment Assessments (DA).

1.2. AFIS Alignment and Detachment Limiting Factors. HQ AFROTC will align as closely as possible with the spirit and intent of the AFIS. To this end, AFROTC will mirror the AFIS concept of continual evaluation. Detachment discrepancies found during the continual evaluation period will be provided directly to the process owner and the chain of command for inclusion in the detachment's "photo album" of performance. Due to the unique AFROTC mission, detachments have a limiting factor that require them to be geographically separated from military institutions, thus limiting their access to AFNET systems and applications. Notably, detachments cannot use the Management Internal Control Toolset (MICT) for self-assessment for which the AU/CC has granted an exception to policy until this limitation can be overcome. This instruction implements the AFIS within AFROTC understanding these unique circumstances.

1.3. Detachment Assessment OPR. AFROTC Standardization and Evaluations (CCV) is designated as the OPR to implement and manage the AFROTC DA program.

CHAPTER 2

SELF-ASSESSMENT PROGRAM

2.1. Self-Assessment Program (SAP). The SAP is a commander's program. Commanders are responsible for knowing their unit's compliance status at all time. Ensuring a rigorous and integrated SAP is central to maintaining awareness of unit effectiveness.

2.1.1. AFROTC/CCV must:

2.1.1.1. Approve Corrective Action Plans (CAPs) for all critical discrepancies and deficiencies.

2.1.1.2. Approve closure of all open critical deficiencies and discrepancies.

2.1.1.3. Review and update SAP checklists at least once annually and publish the annually updated checklists NLT 15 July of each year.

2.1.2. Region Commanders (Region/CC) must:

2.1.2.1. Approve CAPs for all significant discrepancies and deficiencies.

2.1.2.2. Recommend closure to AFROTC/CCV on all open critical deficiencies and discrepancies.

2.1.2.3. Approve closure of all significant deficiencies and discrepancies.

2.1.2.4. Provide status updates to AFROTC/CCV on all open critical deficiencies and discrepancies at least twice annually, NLT 31 Aug and 28 February.

2.1.3. Detachment Commanders (Det/CC) must:

2.1.3.1. Appoint, in writing, a primary and alternate SAP Manager (SAPM) and ensure newly appointed SAPMs accomplish the required AFROTC/CCV and Region approved training within 30 days of official appointment.

2.1.3.2. Approve the root-causes and CAPs for all recurring minor, significant, and critical discrepancies and deficiencies.

2.1.3.3. Approve the compliance requirements for all discrepancies and deficiencies.

2.1.3.4. Recommend closure of all open critical and significant deficiencies and discrepancies to Region/CC.

2.1.3.5. Approve closure of all minor deficiencies and discrepancies.

2.1.3.6. Provide the Region/CC a status report on all critical and significant discrepancies and deficiencies at least twice annually, NLT 15 February and 15 August.

- 2.1.3.7. Ensure self-assessment sampling occurs every month (para 2.2.2, below).
- 2.1.3.8. Review all deficiencies and discrepancies to ensure adequate progress towards approved CAPs have occurred.
- 2.1.3.9. Ensure all deficiencies and discrepancies are closed as soon as possible, but NLT 12 months after identification.
- 2.1.3.10. Ensure detachment program managers manage their respective programs IAW requirements outlined for squadrons in HHQ instructions.
- 2.1.4. SAPMs must:
 - 2.1.4.1. Accomplish the required AFROTC/CCV and Region approved training within 30 days of official appointment.
 - 2.1.4.2. Assist program managers with determining the root-cause and a realistic CAP of all recurring minor, significant, and critical discrepancies and deficiencies.
 - 2.1.4.3. Ensure all discrepancies and deficiencies have a compliance requirement identified.
 - 2.1.4.4. Track all open deficiencies and discrepancies utilizing the AFROTC/CCV and region approved tracking method.
 - 2.1.4.5. Confirm status of all deficiencies and discrepancies at least once a month with the program managers to ensure adequate progress towards compliance has been demonstrated.
 - 2.1.4.6. Provide the Det/CC a status update on all deficiencies and discrepancies at least once a month.
 - 2.1.4.7. Accomplish self-assessment sampling every month (para 2.2.2, below).
 - 2.1.4.8. Make every effort to maintain the detachment SAP documents in electronic records IAW Air University Self-Assessment Program (SAP) Business Rules and AFMAN 33-363. Unreliability of host university systems may preclude use of such methods but such instances require documentation of technical limitations.

2.2. AFROTC Self-Assessment Checklists. AFROTC SAP checklists will be reviewed at least annually by HQ AFROTC functional staff. AFROTC/CCV will ensure applicable checklist questions align with the latest MICT database to the fullest extent possible. A formal announcement will follow all checklist updates to align with dissemination. Detachments must incorporate the latest checklists within 60 days of their release.

- 2.2.1. Self-Assessment Execution. Detachments will accomplish all checklist items and provide a status report to the Region at least twice annually (NLT 15 February & 15 August).

2.2.2. Self-Assessment Sampling. The Det/CC or SAPM will randomly pull at least two checklist items from at least two programs every month in order to assess compliance. The semi-annual checklist review requirement (para 2.2.1, above) does not take the place of the monthly sampling requirement.

2.2.3. Detachments will follow the checklist format in its entirety. Compliance to checklist items requires both an explanation of how the compliance requirement is met and proof of documented evidence of compliance.

2.2.4. Detachments will document all discrepancies identified during all self-assessments and maintain this documentation for the entire period between DAs.

2.3. Root-Cause Criteria. The Det/CC is responsible for ensuring all recurring minor, significant, and critical deficiencies and discrepancies have an accurate root-cause assigned. Any Root-Cause Analysis (RCA) method may be used to determine the most accurate root-cause. Detachments will use one of the six below categories when identifying the deficiency or discrepancy root-causes.

2.3.1. Training. The lack of compliance is a direct result of inadequate training. The program manager is unaware of the requirement and was never provided the appropriate level of training. External support may be required.

2.3.2. Manning. The lack of compliance is a direct result of inadequate or unavailable manning. The program manager is aware of the requirement but failed to comply due to manning shortfalls. External support is required.

2.3.3. Guidance. The lack of compliance is a direct result of inadequate, unavailable, conflicting, or obsolete guidance from the Region, AFROTC, or Higher Headquarters (HHQ). External support is required.

2.3.4. Resources. The lack of compliance is a direct result of inadequate resources provided to the program manager or detachment. External support is required.

2.3.5. Supervision. The lack of compliance is a direct result of inadequate oversight or communication by leadership at the detachment or region. External support may be required.

2.3.6. Motivation. The lack of compliance is a direct result of the program manager failing to follow available guidance and training. The program manager is aware of the requirement but intentionally failed to comply.

2.4. Compliance Requirement. The Det/CC is responsible for ensuring all deficiencies and discrepancies have an accurate and specific requirement that must be accomplished in order for a deficiency or discrepancy to be considered for closure. Consistent and documented proof of evidence is a requirement to meet compliance.

CHAPTER 3

ASSESSMENTS

3.1. Detachment Assessments (DA). AFROTC/CCV is responsible to the AFROTC/CC for the DA program. DAs will last approximately 2 calendar days and reasonable effort will be made to ensure assessments are conducted during normal duty hours and while the host university is in session. However, the very nature of the DA may require extended duty hours in order to meet mission requirements and to validate all functional areas.

3.1.1. AFROTC/CCV is responsible for producing, writing, routing, finalizing, distributing, and posting the formal assessment report.

3.1.2. AFROTC/CCV will utilize the Management Internal Control Toolset (MICT) to input deficiencies for Operational Core Competencies as identified during the continual evaluations and/or DAs.

3.2. Assessment Schedules. Routine scheduled and limited notice assessment notification criteria will be consistent with AFI 90-201 and the AETC Supplement, to the extent practical with AFROTC unique mission requirements. Short notification times are intended to reduce the wasteful practice of assessment preparation. Daily mission readiness should equate to assessment readiness.

3.2.1. AFROTC detachments will be assessed at least every 36 months to align with the Air Force Inspection System goal of assessing commanders at least once during their command tour.

3.2.2. The AFROTC/CCV Branch Chief will serve as the DA schedule authority. Region Director of Operations (DO) or Superintendents will serve as trusted agents to AFROTC/CCV for resolving assessment schedule conflicts. Region/CC will staff any special scheduling requests to AFROTC/CCV for consideration. These requests should be reserved for the rarest of circumstances. Detachments will not contact AFROTC/CCV directly to request special scheduling considerations.

3.2.2.1. AFROTC/CCV will provide assessment schedules to the Regions as early as possible, but no later than 90 days prior to the first DA of the semester cycle in order to facilitate scheduling considerations.

3.2.2.2. The AFROTC/CCV Branch Chief is the approval authority for all limited notice assessments.

3.2.3. Routine Assessments. AFROTC/CCV will formally notify detachments via e-mail of a scheduled DA. Upon DA notification, detachments will coordinate actions specified in the DA instructions unless otherwise coordinated with their Region and/or CCV.

3.2.4. Limited Notice Assessments. Assessment notification will be made to the Det/CC via e-mail or telephonically, depending on the specific timeframe of the assessment team arrival. Regions will also be included in this notification.

3.2.5. Region Site Visits. Site visits by AFROTC Region staff to detachments will not be used as a tool to prepare a detachment for an upcoming assessment but should complement the DA cycle to foster steady state operations, provide an external assessment opportunity, and eliminate effort wasted on assessment preparation. Regions will set their site visit schedules in advance to best complement the DA cycle. Regions will make every effort to not conduct a region assessment site visit within 12 months of a detachment's official DA.

3.3. Inspector Training and Certification. Only AFROTC/CCV inspectors can validate deficiencies and accomplish the formal reporting. AFROTC/CCV inspectors must be certified by the AFROTC/CCV Branch Chief.

3.3.1. The AFROTC/CCV Branch Chief will certify inspectors.

3.3.1.1. The AFROTC/CCV Senior Inspector will conduct training and certification of the AFROTC/CCV Branch Chief.

3.3.1.2. Certification of inspectors must be documented. Inspectors previously certified are grandfathered under previous training and certification processes.

3.3.2. Augmentation of AFROTC/CCV. Regions are required to provide manning assistance in order to meet mission requirements. The Region/CC will release personnel to augment AFROTC/CCV assessments for both electronic program reviews and on-site field assessments of detachments. Only cadre that meet minimum eligibility requirements, as outlined in the Cadre Training and Certification Guide, will be considered for augmentation duties by AFROTC/CCV.

3.3.2.1. Augmenters, also known as Assessors, will complete a modified assessor training and certification program to cover responsibilities as deemed necessary by the AFROTC/CCV Branch Chief. AFROTC/CCV is the deciding authority on assessor decertification for cause or currency.

3.4. Conducting the DA.

3.4.1. AFROTC DA System. Detachments will be evaluated based upon their proficiency in accomplishing the AFROTC mission. In order to assess their effectiveness, the DA process reviews both the administrative and operational performances of the detachment.

3.4.2. Assessor Teams will conduct validation sessions with the Det/CC and program managers during the assessment process. The validation sessions will cover at a minimum; assessed areas, general observations, and identified deficiencies. Final decisions on all deficiencies require a certified AFROTC/CCV inspector concurrence prior to publishing the formal report. Program scoring will only be released as part of the formal report.

3.4.3. The DA team will provide the Det/CC a field assessment out-brief and present an informal report with their findings prior to the team's departure.

3.4.3.1. The Det/CC may choose to rebut any findings in the informal report using the approved rebuttal worksheet provided by AFROTC/CCV. Failure to receive

Region/CC concurrence or failure to submit within 5 duty days will negate the rebuttal request.

3.4.3.2. The AFROTC/CCV Branch Chief will consider each Region concurred rebuttal and compare it against applicable instructions. If AFROTC/CCV concurs, the deficiency will be removed from the formal report and not affect final scoring. If non-concur, the rebuttal will be routed to the AFROTC/CC for final decision.

3.5. Ratings. AFROTC/CCV will use a two-tiered rating system of either “EFFECTIVE” or “INEFFECTIVE.”

3.5.1. Overall detachment rating is based upon program performance. A rating of “INEFFECTIVE” in two or more programs results in an overall “INEFFECTIVE” rating for the entire detachment.

3.5.2. Criticality of the SAP. If AFROTC/CCV rates the Detachment’s SAP as “INEFFECTIVE,” regardless of performance in other areas, the overall DA rating will be “INEFFECTIVE.”

3.5.2.1. Self-identified discrepancies discovered and managed as part of the SAP will not be recorded as a DA deficiency if tracked and addressed IAW this instruction and their Region.

3.5.3. Culture and Training Environment. The Assessment Team Lead may recommend an overall “INEFFECTIVE” rating to the AFROTC/CC when the unit’s overall culture and training environment fails to meet AFROTC guidance and expectations regardless of performance in other areas.

3.6. Report Distribution. AFROTC/CCV will send electronic copies of the formal report to the Region/CC and Det/CC once the formal report has been approved by the AFROTC/CC.

3.6.1. Releasing Reports. The formal and informal reports are protected from disclosure under the Freedom of Information Act. Do not release or publish, in whole or in part, outside official DOD channels without express approval of the Director, SAF/IGI.

3.7. Detachment Response Procedures. AFROTC/CCV will include detailed response instructions in each formal report. Detachments will prepare responses according to AFROTC/CCV provided guidance. Detachment Responses will be forwarded thru the Region/CC for concurrence.

3.7.1. All deficiencies and improvement areas must be addressed in the response to AFROTC/CCV using the approved response format. All deficiencies should be closed as soon as possible, but NLT 12 months after dissemination of the formal report.

3.7.1.1. Det/CC is the closure authority for all minor deficiencies.

3.7.1.2. Region/CC is the closure authority for significant deficiencies.

3.7.1.3. AFROTC/CC is the closure authority for critical deficiencies. AFROTC/CC may delegate this authority to AFROTC/CCV.

3.7.2. The Det/CC and/or SAPM will conduct a RCA and establish a CAP for all critical and significant findings. These deficiencies will also require validation by the Region/CC. Regions must track all significant or higher deficiencies until closure. Regions will provide quarterly updates and closure recommendations to AFROTC/CCV on all critical deficiencies.

3.7.3. Detachments and Regions will utilize the AFROTC/CCV approved format to track all noncompliant findings to resolve and request closure for significant and critical deficiencies/discrepancies.

3.8. Superior Performer Recognition. The superior performer recognition process identifies personnel that display exemplary performance during an assessment. The individual will be recognized via the formal report and should be considered by their commanders for nomination as a future assessor.

3.9. Best Practices. The best practices program highlights noteworthy programs and initiatives at detachments and shares those initiatives throughout AFROTC. The intent is to facilitate cross-feed efforts, offer tools, and to generally help improve all detachment processes by sharing ideas and tools that are unique to the AFROTC mission. Programs and initiatives will be identified by assessors during DAs and/or nominated by Regions. All Best Practices must be validated and approved by CCV.

3.10. Region Follow-On Visit. Any detachment that receives an overall “INEFFECTIVE” rating will receive a compliance-focused visit from their Region NLT 90 days following dissemination of the formal report. The visit will be tailored to the programs and areas that were determined as ineffective with an aim to rehabilitate the particular programs or unit culture. The Region/CC will provide an After Action Report (AAR) summarizing the visit to the AFROTC/CC within 30 days of the visit.

CHAPTER 4

EXCEPTION TO POLICY

4.1. Exception to Policy (ETP). Det/CCs may request an ETP for any AFROTC policy they have determined to be incapable of meeting compliance. All ETP requests must be routed through their region for concurrence prior to submission to AFROTC/CCV.

4.1.1. If the Region/CC non-concurs, the region will return the request to the detachment with the reason(s) for non-concurrence.

4.1.2. If the Region/CC concurs, the request will be forward to AFROTC/CCV to facilitate a decision with the appropriate approval authority, as determined by the AFROTC/CC. Upon final decision, AFROTC/CCV will inform the region of the decision through formal documentation. If the ETP is granted, the detachment must maintain copy of the approved ETP documentation in order to meet SAP and DA compliance.

TAMMY M. KNIERIM, Col, USAF
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Attachment 1**GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

AFI 90-201, *The Air Force Inspection System*, 20 Nov 2018

AFI 90-201, AETC Supplement, *The Air Force Inspection System*, 5 January 2016

Air University Self-Assessment Program (SAP) Business Rules, 1 May 2016

Adopted Form

AF Form 847, *Recommendation for Change of Publication*

Abbreviations and Acronyms

AETC—Air Education and Training Command

AFROTC—Air Force Reserve Officer Training Corps

CAP—Corrective Action Plan

CC—Commander

CCV—Standardization & Evaluation

DA—Detachment Assessments

DoD—Department of Defense

HQ AETC/IG—Headquarters Air Education and Training Command/Inspector General

HOLM CENTER—Jeanne M. Holm Center for Officer Accessions and Citizen Development

HQ AFROTC—Headquarters Air Force Reserve Officer Training Corps

IGTC—Inspector General Training Course

RCA—Root-Cause Analysis

SAP—Self-Assessment Program

Terms

Deficiency—a noncompliant finding from a Detachment Assessment

Discrepancy—a noncompliant finding from an internal self-assessment review

Region—AFROTC Regional Commander or office