

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
Fort Huachuca, Arizona 85613-7079

MEDDAC Memorandum
NO. 710-1

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Logistics
COMMAND LOGISTICS REVIEW PROGRAM

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1. HISTORY. This issue publishes a revision of this publication.

2. PURPOSE. To set forth guidelines to document the Command Logistics Review Program (CLRP); its objectives; responsibilities and procedures, for the purpose of maintaining logistics readiness.

3. APPLICABILITY. The program guidance described in this memorandum applies to all customers of the MEDDAC Logistics Division, Fort Huachuca, AZ.

4. REFERENCES.
 - 4.1 AR 11-1, Command Logistics Review Program (CLRP).
 - 4.2 AR 40-61, Medical Logistics Policies and Procedures, as supplement by HSC.
 - 4.3 AR 710-2, Supply Policy Below the Wholesale Level.
 - 4.4 AR 735-5, Policies and Procedures for Property Accountability.

*This Memorandum supersedes MEDDAC Memo 710-1, 1 April 2004

4.5 HSC Pam 700-1, Command Logistics Review Team and Command Information Guide to Civilian Training.

5. DEFINITIONS.

5.1 For the purpose of this memorandum, the following distinction is made between supply economy and supply discipline.

5.1.1 Supply economy is the conservation of materiel by every individual in the MEDDAC/DENTAC. It is developed through example, training and practice until it becomes habit. It includes preventive maintenance, repair, recovery of economically repairable materiel, salvage and the care and safeguarding of all government supplies and equipment.

5.1.2 Supply discipline is the management control of all supply functions and materiel to ensure compliance with established Department of the Army supply directives. It applies to all functions of supply, including authorization and requirements determination, planning, editing, inspection, issuing, accounting, equipment status, maintenance in storage, movement, recovery/retrograde and disposal of materiel, and effective use of available supply funds.

5.1. 3 Logistics readiness is a condition that exists when a unit or activity has sufficient logistics associated assets readily available to ensure mission accomplishment.

6. RESPONSIBILITY.

6.1 The USA MEDDAC/DENTAC staff is responsible for:

6.1.1 Providing support for the programs within this memorandum pertaining to respective areas as required.

6.1.2 Ensuring that responsive action is taken on recommendations of Command Supply Discipline Program (CSDP) teams as required.

6.2 The Chief, Logistics Division, USA MEDDAC, is designated as the MEDDAC Command Monitor for the CSDP as outlined above, and is responsible for:

6.2.1 Ensuring that the program achieves objectives established in paragraph 7 of this publication.

6.2.2 Advising the Commander concerning the status of the program.

6.2.3 Organizing and directing the Logistics Division staff to perform Command Supply Discipline Program reviews and follows-up on corrective actions when necessary.

6.2.4 Ensuring full compliance with AR 11-1.

6.2.5 Maintaining a file of program reviews performed by logistics personnel.

6.2.6 Publishing an annual update of Logistic Division's visits and distributing the CSDP checklist and all changes that occur.

6.3 Chiefs of activities within the MEDDAC/DENTAC are responsible for:

6.3.1 Coordination with Chief, Logistics Division to obtain necessary supply training/indoctrination for their personnel dealing with supply functions.

6.3.2 Establishing realistic internal controls and objectives to ensure compliance with related supply and fiscal regulations.

6.3.3 Ensuring timely responses to visit reports.

6.3.4 Chief, Mobilization, Education, Training, Security Division is responsible for providing assistance concerning the logistics support of special projects (Mobilization Reserve) and specialized areas when required.

7. OBJECTIVES.

7.1 The CSDP is an assessment and assistance program and should not be viewed as an inspection.

7.2 The CSDP is intended to promote supply economy, discipline, identify and fix problems adversely affecting the readiness and logistics posture of MEDDAC/DENTAC activities. The CSDP will evaluate:

7.2.1 Medical supply operations and quality control.

7.2.2 Property Management operations including property accountability, equipment replacement programs (MEDCASE and CEEP) and TMDE Coordinator.

7.2.3 Biomedical equipment maintenance.

7.2.4 Linen management operations.

7.2.5 Housekeeping operations.

7.2.6 Facilities and utilities support.

7.2.7 Medical Company unit supply.

7.2.8 HAZCOM and Safety Program.

7.2.9 Skills of logistical personnel.

7.3 The CSDP is further designed to:

7.3.1 Foster command involvement in logistics operations.

7.3.2 Provide logistical status to the MEDDAC/DENTAC Commanders and chiefs of departments/activities/services/ divisions.

7.3.3 Disclose systematic problems that need to be corrected as well as evaluate the overall responsiveness of Raymond W. Bliss Army Health Center (RWBAHC) Logistics Division or the need for education and training of assigned personnel.

7.3.4 Promote cooperation between Logistics Division and its customers.

7.3.5 Encourage customers to provide suggested improvements.

8. COMMAND SUPPLY DISCIPLINE REVIEW TEAM (CSDRT).

8.1 A team will be established to affect the CSDP and assess MEDDAC/DENTAC logistics operations. The team will consist of the Chief, Logistics Division and/or NCOIC Logistics Division, and other Chiefs or NCOICs of Logistics Branches as needed. The CSDRT will conduct annual visits to supported activities. More frequent visits will be made to specific activities if necessary.

8.2 CSDRT will:

8.2.1 Review the operation of activities to be visited (according to published schedule) with Logistics Branch Chiefs during the bi-weekly Logistics Division staff meeting. During this review a determination will be made as to CSDRT membership for the upcoming visit.

8.2.2 Conduct an in-briefing/out-briefing with the visited activity's Chief, NCOIC, or designated representative. These briefings will cover the objectives of the visit, observations made, and any recommended action for the activity to take for improving their logistical performance. A review will also be made of actions the Logistics Division needs to investigate or review in order to provide enhanced logistical support to the visited activity.

8.2.3 Prepare an After Action Report (AAR) for use by the visited activity and the Logistics Division. Coordinate solutions or pass information concerning problems crossing functional lines with the appropriate activity.

9. PROCEDURES.

9.1 Notification: Activities will be notified in writing through a schedule published by Logistics Division prior to a CSDRT visit. The schedule will be coordinated with activities to ensure minimum disruption.

9.2 Review emphasis: Reports of previous audits, inspections, command assistance visits and checklists will be used to review activities.

9.3 After action report:

9.3.1 Within 10 working days after completion of the CSDRT visit, a report of the findings will be forwarded to Chief, Logistics Division.

9.3.2 The Chief, Logistics Division will review the report and forward it to the affected chief, activity/service/division for a response.

9.3.3 The chief, activity/service/division will review and respond to the report within 10 working days after receipt of the CSDRT report.

9.3.4 The MEDDAC/DENTAC Commander, as appropriate , will be given a summarized review of each activity by the Command Supply Discipline Monitor with guidance or recommendations for corrective action.

The proponent for this memorandum is Logistics Division. Users are invited to send comments and suggested improvements to Cdr, USAMEDDAC, ATTN: MCXJ-LO, Ft Huachuca, AZ 85613-7079.
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FOR THE COMMANDER:

OFFICIAL:

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DISTRIBUTION: E

APPENDIX A
COMMAND SUPPLY DISCIPLINE PROGRAM

The Command Supply Discipline Program (CSDP) is a tool designed to assist the customer in all areas of Logistics. The areas being inspected are:

- 1- Medical Supply
- 2- Property Management
- 3- Clinical Engineering
- 4- Facilities Management
- 5- Services

Any shortcoming noted during the visit can be corrected then or another visit can be scheduled to correct the situation. Again, this is a tool to help assist the Logistics program at the user level, as well as show the Logistics Division where we stand in giving the best service to our customer. Major shortcomings are annotated with an asterisk (*).

Section Inspected:

Hand Receipt:

Inspector:

Date of Inspection:

<u>MEDICAL SUPPLY</u>	<u>YES</u>	<u>NO</u>
1. Does the customer have the Monthly Due-out Report?	___	___
2. Does the customer understand how to use the Monthly Due-Out Report?	___	___
3. Does the customer have an update stockage list?	___	___
4. Does the customer have any problems ordering supplies?	___	___
5. Are there any problems in receiving supplies?	___	___
6. Are there any high priorities (03/06) requests in the last 30 days?	___	___

<u>MEDICAL SUPPLY</u>	<u>YES</u>	<u>NO</u>
7. Is the customer aware of the requirements for placing high priority request?	___	___
8. Does the customer know the procedures for turning in excess material (Hand Receipt [non-expendable] expendable-durable, pharmaceuticals [If applicable] hazardous materials)?	___	___
9. Does the customer understand the use of the customer reorder list to determine stockage levels?	___	___
10. Does the customer know how to use the reorder list as a document register?	___	___
11. Does the customer know how to have items deleted from the list?	___	___
12. Is the customer aware that deletions must be justified in writing?	___	___
13. Does the customer have a customer service manual?	___	___
14. Is the customer aware of the clinic distribution box in the Material Branch?	___	___
15. Is the customer aware of the forms used to order medical supplies/glasses?	___	___
16. Is the customer aware of the process that requisitions go through in order for them to receive these items?	___	___
17. * Does the customer have updated DA Form 1687 (Delegation of Authority) on hand IAW DA PAM 710-2-1 Chapter 2 Section V paragraph 2-28?	___	___
18. * Does the customer maintain a document register IAW DA PAM 710-2-1?	___	___

PROPERTY MANAGEMENT:

<u>MEDICAL SUPPLY</u>	<u>YES</u>	<u>NO</u>
1. * Does the Hand Receipt Holder have an updated copy of the Hand Receipt in file?	___	___
2. Are hand receipt inventories up to date IAW DA PAM 710-2-1 Chapter 5 paragraph 5-3?	___	___
3. Does the hand receipt holder have on file a copy of the Responsibilities of the Hand Receipt holder?	___	___
4. Are Hand Receipt transactions being maintained in the six sided Hand Receipt Folder?	___	___
5. * Does the customer have an updated DA FORM 1687 (Delegation of Authority) on file?	___	___
6. Are turn in procedures understood for turning in items that are excess or in need of repair?	___	___
7. Are Bar Code (ECN) stickers on all equipment that is on the Hand Receipt.	___	___
8. Does the customer have excess equipment on hand?	___	___
9. Is the excess equipment being reported?	___	___
10. Is the Primary Hand Receipt holder sub hand receipting items down to user level IAW DA PAM 710-2-1 Chapter 5 paragraph 5-3 (b) 2?	___	___
11. Upon identification of Lost, Damaged or Destroyed property are appropriate actions taken IAW AR 735-5, Chapter 13 to determine negligence and a Financial Liability Investigation of Property Loss initiated?	___	___
12. Does the customer have on hand a copy of DA FORM 3161 for the turn in of equipment for repair?	___	___

CLINICAL ENGINEERING:

<u>MEDICAL SUPPLY</u>	<u>YES</u>	<u>NO</u>
1. Are there any outstanding work orders over 30 days?	___	___
2. Has the customer visited the Clinical Engineering office to reconcile open work orders within the past 30 days?	___	___
3. Does the customer have the appropriate operator manuals for all medical equipment used within the customers area?	___	___
4. IAW TJC Standards are the operator manuals available to the operator?	___	___
5. * Is proper operational maintenance being performed IAW the operator manuals or manufacturer's literature?	___	___
6. Has the customer been notified of a visit by maintenance personnel performing Preventive Maintenance Checks and Services (PMCS)?	___	___
7. Did the customer return the notification with room numbers identifying where the equipment is located?	___	___
8. Is the customer familiar with the types of services performed during these visits?	___	___
9. Is the customer familiar with the procedures for requesting medical maintenance after normal duty hours?	___	___
10. * Is Operator Maintenance Training being conducted and documented on HSC Form 649-R?	___	___
11. * Does the Hand Receipt Holder have an updated and complete Maintenance Folder on hand?	___	___
12. Is maintenance response time adequate for emergency repairs?	___	___

MEDICAL SUPPLY

YES NO

13. Is the customer maintaining on file a copy of all work orders pending and complete?

___ ___

14. * Is the Blue Copy of the work order maintained on file for 3 years after the work order is closed unless the equipment is turned in?

___ ___

15. Is the customer aware of Clinical Engineering capability to provide operational training on some types of equipment? (Submit a memorandum with type of training and when the training needs to be conducted)

___ ___

16. Has the customer's SMAC listing been updated?

___ ___

17. Has the customer maintained the accident/incident report on the medical equipment in their area?

___ ___

18. * Has training been provided for all new incoming operators at the operator's level on medical equipment?

___ ___

FACILITIES MANAGEMENT:

1. Is the customer aware of the procedure to use in the event that something breaks or is no longer usable?

___ ___

2. Is the customer aware of the procedure to request improvements in their area?

___ ___

3. * Are written procedures readily available for employees to follow in the event of a breakdown in the utility system?

___ ___

4. Are service orders completed in a timely manner?

___ ___

SERVICES:

<u>MEDICAL SUPPLY</u>	<u>YES</u>	<u>NO</u>
1. Is the customer aware of the procedures for requesting transportation?	___	___
2. Does the customer know how to package and handle regulated medical waste?	___	___
3. Does the customer know how to report a Housekeeping problem?	___	___
4. Does the customer have any problems with the Linen Exchange program?	___	___
5. Does the customer receive the Linen in good condition?	___	___
6. Is the established Linen stockage level adequate for the customers mission?	___	___
7. Does the customer understand the Linen Cart exchange system?	___	___
8. * Does the customer seek to prevent theft and abuse/misuse of linen?	___	___
DOES THE CUSTOMER REQUIRE ANOTHER VISIT WITHIN 60-90 DAYS?	___	___

NEGATIVE FINDINGS OF THE VISIT?

POSITIVE FINDINGS OF THE VISIT?

COMMENTS FROM THE CUSTOMER: .

WHAT IS THE CUSTOMER'S LOGISTICAL RATING?

-100% -95% -90% -85% -80% -75% -70%

The rating is based upon the total number of major shortcomings noted. No shortcomings found will mean 100%, after that every two shortcomings will lower the rating by 5%. There is a total of 12 shortcomings within the checklist.

LOGISTICS INSPECTION CHEKLIST 1 April 2004