INSPECTOR GENERAL
DEPARTMENT OF DEFENSE
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The Honorable Gerald E. Connolly   August 7, 2020
Chairman
Subcommittee on Government Operations
Committee on Oversight and Reform
U.S. House of Representatives
Washington, D.C. 20515

Dear Chairman Connolly:

Thank you for your interest in and support of our work. This is in response to your June 15, 2020, letter to the Department of Defense (DoD) Acting Inspector General requesting that the DoD Office of Inspector General (OIG) examine the DoD's plans and procedures for returning employees to Federal offices in the wake of the coronavirus pandemic. Your letter also requested an investigation into the death of ███████████████, who was employed as part of the kitchen staff at Marine Corps Base Quantico ██████████████████████ and died from the coronavirus.

First, as you know, as of July 29, 2020, Congress has appropriated $10.6 billion to the DoD to prevent, prepare for, and respond to the coronavirus disease-2019 (COVID-19) pandemic domestically and internationally, and $20 million to the DoD OIG for increased oversight of DoD programs, operations, and activities in response to COVID-19. Accordingly, we developed a DoD OIG COVID-19 Oversight Plan,* which outlines ongoing and planned audits, evaluations, and investigations to oversight the DoD's response to COVID-19. Additionally, the DoD OIG has published four memorandums sharing best practices related to topics such as contingency contracting and protecting patient health information, and initiated 16 oversight projects related to COVID-19. Many of these projects oversight how the DoD is maintaining readiness and ongoing operations while adhering to COVID-19 restrictions, as well as how the DoD is ensuring access to and the quality of health care for service members and their families. For example, we initiated an:

- evaluation of the Navy's plans and response to the outbreak of COVID-19 onboard ships, which will determine whether the Navy has implemented policies and procedures to prevent and mitigate the spread of infectious diseases, such as COVID-19, on ships and submarines;
- audit of the public health emergency readiness of DoD military installations, which will determine whether DoD officials implemented measures to prepare for, respond to, and recover from public health emergencies, such as COVID-19, on DoD installations;

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* The DoD OIG COVID-19 Oversight Plan is updated monthly, and provides information about ongoing and planned audits, evaluations, and investigations and also contains summaries and links for our completed work. It is available at: https://www.dodig.mil/COVID-19/Oversight-Plan/

- audit of the disinfection of DoD facilities in response to COVID-19, which will determine whether DoD officials adequately cleaned and disinfected DoD facilities that were occupied by individuals suspected of, or confirmed as being positive for COVID-19; and
- evaluation of DoD medical treatment facility challenges, which will determine the challenges and needs DoD military medical treatment facilities face in responding to the COVID-19 pandemic.

In addition to this planned oversight work, the DoD OIG receives and responds to a number of congressional inquiries related to COVID-19, DoD Hotline complaints, outreach from other OIGs, and requests from the Pandemic Response Accountability Committee. We carefully consider all inquiries—including your inquiry—and, when appropriate, undertake a review, refer allegations to others, or both.

Second, during our planning and initial execution of COVID-19 oversight projects, we examined the DoD's policies and procedures. During this analysis, we found that the DoD established policies for return to work for service members and DoD civilians during COVID-19. These policies require Installation Commanders to adhere to Federal, state, local, Service-specific, and Center for Disease Control and Prevention (CDC) guidance when determining whether personnel should return to Federal offices and facilities. The policies require Installation Commanders, in consultation with their medical leadership, to exercise their authority to make deliberate, risk-based decisions to change Health Protection Condition (HPCON) levels, as conditions allow. These decisions are to be informed by local conditions based on public health surveillance data; guidance from the CDC; collaboration with state, territorial, and local authorities; and advice from the command Public Health Emergency Officer and local military medical treatment facility.

The DoD has also established policies that will allow for the future examination of DoD's reopening plans, such as requiring DoD personnel to report all COVID-19 positive test results in accordance with applicable Federal, state, local, and DoD requirements. Additionally, the DoD established policies that allow access to symptomatic and asymptomatic testing of service members and DoD civilians. These policies stress the importance of complying with U.S. Food and Drug Administration (FDA) regulations. Furthermore, the DoD established policies regarding the health surveillance, screening, contact tracing, and sentinel surveillance to decrease operational risk, in accordance with CDC guidance. The DoD also established policies requiring the use of cloth face coverings, personal protective equipment, and other non-pharmaceutical interventions in accordance with CDC guidance to limit transmission of COVID-19.

The DoD's policies remain consistent with CDC guidance. For example, DoD Component heads are required to apply CDC guidance in making the risk-based determination for the 14-day Restriction of Movement. In addition, Public Health Recommendations for Community-Related Exposure establishes guidance for all individuals based on community exposure. Ultimately, these policies require Installation Commanders to adhere to Federal, state, local, Service-specific, and CDC guidance when determining whether personnel should return to Federal offices and facilities.

The CDC is continuously updating guidance to slow the spread of COVID-19, including guidance to prevent transmission of the disease in workplaces. According to DoD policy, all DoD Components must immediately implement appropriate procedures to protect all personnel from disease transmission in DoD workplaces.

Third, with regard to complaints that individual DoD employees, contractors, or their family members may have related to issues regarding a return to Federal offices, the DoD OIG operates the DoD Hotline to provide a confidential, reliable means to report fraud, waste, abuse, and other violations of law that involve DoD personnel or operations, without fear of reprisal. The DoD Hotline continues to receive contacts related to COVID-19, and the oversight plan tracks and categorizes the number of complaints related to COVID-19 that the DoD OIG receives. A DoD Hotline contact becomes a case when the DoD Hotline opens and refers the case for action or information to a DoD OIG component, Military Service, DoD agency, DoD field activity, or other agency outside the DoD. The DoD OIG oversights all DoD Hotline complaints that are referred for action. The DoD Hotline will not close the complaint until the DoD OIG approves the Hotline Completion Report from the referred agency and determines that the complaint has been adequately addressed.

Finally, regarding your request for an investigation into the death of ███████ █████████, the DoD Hotline has referred this matter for action to the Marine Corps OIG and asked that it conduct a review to determine whether the Marine Corps Base Quantico ████ ████████████ properly followed all policies and procedures. We will conduct oversight of the Marine Corps OIG's review when it is completed and advise you of the results.

If you have any questions regarding this matter, please contact me at (703) 604-8324.

Sincerely,

Michael C. Zola, Esq.
Assistant Inspector General,
    Legislative Affairs & Communications

Enclosures:
As stated

cc: The Honorable Jody B. Hice, Ranking Member
    Subcommittee on Government Operations