



DEPARTMENT OF THE AIR FORCE
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OFFICE OF THE ASSISTANT SECRETARY

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MEMORANDUM FOR DISTRIBUTION
MAJCOMs/FLDCOMs/FOAs/DRUs

FROM: SAF/MR
1660 Air Force Pentagon
Washington, DC 20330-1660

SUBJECT: Department of the Air Force Guidance Memorandum (DAFGM) Workplace
Flexibilities and Work-life Programs

By order of the Secretary of the Air Force, this Department of the Air Force Guidance Memorandum (DAFGM), issues Department of the Air Force (DAF) guidance on certain workplace flexibilities and work-life programs in accordance with Presidential Memorandum, Subject: *Enhancing Workplace Flexibilities and Work- Life Programs*, 23 June 2014; United States Office of Personnel Management (OPM) Memorandum, Subject: *Enhancing Workplace Flexibilities & and Work- Life Programs*, 22 August 2014; OPM *Handbook on Workplace Flexibilities and Work-Life Programs for Elder Care*, July 2015. This DAFGM provides guidance, assigns responsibilities, and prescribes procedures for implementing workplace flexibilities and work-life programs as defined in this publication. It applies to all appropriated and non-appropriated funded Department of the Air Force (DAF) civilian employees to include Regular Air Force, United States Space Force (USSF), Title 5 Air Force Reserve, and Air National Guard civilian employees. It does not apply to non-US citizen employees employed outside the United States and the District of Columbia or to Title 32 Air National Guard Technicians. The Chief of the National Guard Bureau will determine the extent to which this instruction will apply to the Title 5 National Guard employees of the National Guard Bureau and will be governed by separate regulations issued by the Chief of the National Guard Bureau.

This DAFGM requires the collection and/or maintenance of information protected by the Privacy Act of 1974 authorized by Department of Defense Instruction (DoDI) 5400.11, *DoD Privacy and Civil Liberties Programs*. The applicable system of record notice (SORN) OPM/GOVT-1, *General Personnel Records*, is available at <http://dpcl.d.defense.gov/Privacy/SORNs.aspx>. Ensure all records generated as a result of processes prescribed in this publication adhere to Air Force Instruction 33-322, *Records Management and Information Governance Program*, and are disposed in accordance with the Air Force Records Disposition Schedule, which is located in the Air Force Records Information Management System.

The authorities to waive wing, delta, or unit level requirements in this publication are identified with a Tier ("T-0, T-1, T-2, T-3") number following the compliance statement. See Department of the Air Force Manual 90-161, *Publishing Processes and Procedures* for a description of the authorities associated with the Tier numbers. Submit requests for waivers through the chain of command to the appropriate Tier waiver approval authority, or alternately, to the requestor's commander for non-tiered compliance items.

In collaboration with the Chief of Air Force Reserve (AF/RE), the Director of the Air National Guard (NGB/CF), and the Deputy Chief of Space Operations for Personnel (SF/S1), the Deputy Chief of Staff for Manpower, Personnel, and Services (AF/A1) develops personnel policy for civilian employment and labor-management relations policy. This DAFGM may be supplemented at any level; major command (MAJCOM) and field command (FLDCOM) level supplements must be approved by the Human Resources Management Strategic Board (HSB) prior to certification and approval. Refer recommended changes and questions about this publication to the office of primary responsibility (OPR) listed above using the DAF Form 847, *Recommendation for Change of Product*; route DAF Forms 847 from the field through the appropriate chain of command.

This memorandum becomes void after 1 year has elapsed from the date of this Memorandum, or upon publishing of a new publication permanently establishing this guidance, whichever is earlier. The point of contact for this publication is AF/A1CM at af.a1cm.workflow@us.af.mil.

BRIAN L. SCARLETT, SES, DAF
Principal Deputy Assistant Secretary of the
Air Force for Manpower and Reserve Affairs

Attachment:
Workplace Flexibilities and Work-life Programs

WORKPLACE FLEXIBILITIES AND WORK-LIFE PROGRAMS

1. Overview.

1.1. It is DAF policy to enhance mission readiness, employee engagement, and workforce productivity by creating a culture of health and wellness excellence that fosters healthy lifestyles and reduces the risk of illness or injury while providing a work environment that is in balance with family demands and other needs at home.

1.2. To accomplish this, DAF will:

1.2.1. Provide resources to managers and employees regarding workplace flexibilities and work-life programs meant to improve employee engagement and productivity.

1.2.2. Promote a culture in which arbitrary or unnecessary barriers to the use of workplace flexibilities and work-life programs are identified and eliminated.

1.2.3. Support the behavioral and mental-health care of employees by utilizing wellness and rehabilitation programs and coordinating with available resources.

2. Responsibilities.

2.1. Assistant Secretary of the Air Force for Manpower and Reserve Affairs (SAF/MR). Serves as an agent of the Secretary and provides guidance, direction, and oversight for all matters pertaining to the formulation, review, and execution of plans, policies, programs, and budgets addressing the workplace flexibilities and work-life programs.

2.2. Deputy Chief of Staff of the Air Force for Manpower, Personnel and Services (AF/A1). Develops, coordinates, and executes personnel policy and essential procedural guidance for all matters pertaining to the formulation, review, and execution of workplace flexibilities and work-life programs.

2.2.1. Director, Civilian Force Management Directorate (AF/A1C). In coordination with SF/S1C, directs the development of policy for workplace flexibilities and work-life programs to ensure compliance with this instruction and consistency across the Department of the Air Force.

2.2.2. Director, Integrated Resiliency Directorate (AF/A1Z). Directs the MAJCOM/FLDCOM Integrated Resilience Office (IRO) and installation IROs to promote and coordinate the Department of Air Force Employee Assistance Program (EAP), Civilian Health Promotion Service (CHPS) services throughout the community they serve.

2.3. Deputy Chief of Space Operations for Personnel (SF/S1).

2.3.1. Assists the Secretary of the Air Force (SecAF), other Secretariat offices, and the Chief of Space Operations (CSO) by developing programs and processes for the recruitment, employment, organization, professional development, and retention of personnel to meet DAF and USSF manpower and personnel requirements.

2.3.2. Develops, coordinates, and executes personnel policy and essential procedural guidance for all matters pertaining to the formulation, review, and execution of civilian personnel policies for Space Force. Responsible for Space Force plans, programs, and budgets addressing the administration of USSF workplace flexibilities and work-life programs.

2.3.3. Director, Quality of Life & Resilience Directorate (SF/S1Q) develops and delivers policies, products and strategies to shape Guardian quality of life, resilience, personal readiness, culture and norms, measuring and continuously improving the organizational and Guardian experience.

2.4. Air Force Materiel Command/Integrated Prevention and Response Division (AFMC/A1Z). Designated by AF/A1 as the administrator of EAP and CHPS. AFMC/A1Z will provide support and guidance to MAJCOM A1Z's (or counterparts) and the Prevention Workforce and serves as the point of contact for program execution.

2.5. Major Command, Field Command, Combatant Command, Field Operating Agency, and Direct Reporting Unit Commanders and Directors. Establish standards, administrative requirements, processing procedures, and justification formats consistent with this instruction, to include administration of the alternative work schedule (AWS) program. This responsibility may be further delegated in writing.

2.6. Installation Commanders. Establish the hours for opening and closing the installation and ensure labor relation obligations are satisfied prior to implementation of this instruction.

2.7. Tenant Commanders, Directors and Civilian Equivalent, and Heads of Activities perform responsibilities outlined in the DAF policies referenced within this publication. Support employee participation in workplace flexibilities and work-life programs, as mission requirements allow. Ensure fair and equitable opportunity to participate for all employees.

2.8. MAJCOM Prevention Program Managers and the Installation Integrated Resilience Office (IRO) obtain and share EAP/CHPS MAJCOM/Installation utilization data with Community Actions Boards and Community Action Teams to evaluate for trends.

2.9. Supervisors. Inform employees about civilian wellness resources (e.g. EAP, CHPS) and refer employees who may benefit from these services to the appropriate office for assistance.

3. Health and wellness programs. Health and wellness programs are integrated health promotion and disease prevention strategies implemented at the worksite and surrounding community. Employee participation is voluntary. Within DAF, AF/A1 has overall responsibility for the Civilian Wellness to include CHPS and EAP. AF/A1C serves as the program champion and is responsible for securing funding for the program. AFMC/A1Z is the program administrator, overseeing the program's operations.

3.1. Department of the Air Force Civilian Health Promotion Service (CHPS). CHPS is a mobile worksite wellness program. The program's services, provided at staffed and mobile sites, shall include individual health counseling, group health education classes, cardiac risk blood profile finger stick screenings (HDL, LDL, Cholesterol ration and glucose) and related health screening activities. The programs services provided at locations identified as virtual only will include

webinars, self-service wellness information and access to health evaluations and activities web portal. Services provided by CHPS are non-clinical and at no charge to all Department of the Air Force civilian members.

3.1.1. Program Scope. Health and wellness programs may include onsite and virtual wellness interventions, organizational policies and benefits, fitness facilities, environmental supports, and links to the surrounding community programs designed to encourage a healthier, more engaged and productive workforce. These health promotion and wellness programs may address, but are not limited to:

3.1.1.1. Tobacco-free living.

3.1.1.2. Fitness and active living.

3.1.1.3. Nutrition.

3.1.1.4. Weight management and obesity prevention.

3.1.1.5. Healthy sleep.

3.1.1.6. Healthy living.

3.1.1.7. Disease prevention.

3.1.1.8. Skin Analysis Screenings.

3.1.1.9. Body Composition Evaluation.

3.1.2. Common wellness resources include but are not limited to:

3.1.2.1. Health promotion materials and literature.

3.1.2.2. Online resources.

3.1.2.3. Group educational sessions.

3.1.2.4. Individual lifestyle counseling.

3.1.2.5. Self-management programs.

3.1.2.6. Exercise programs.

3.1.2.7. Health screenings.

3.1.2.8. Health risk assessments.

3.1.2.9. Biometric assessments.

3.1.2.10. Health and wellness fairs.

3.1.2.11. Wellness challenges.

3.1.3. Injuries Sustained During Participation in Fitness Activities. Injuries that occur to Federal employees while taking part in formal and informal fitness activities on or off the workplace premise during or outside of regular work hours may be eligible for workers' compensation coverage in accordance with Department of Defense Instruction (DoDI) 1400.25V810, Department of Air Force Instruction (DAFI) 36-150, *Injury Compensation*. The use of waivers or informed consent forms for participation in fitness facilities or events may not absolve a local installation from liability.

3.1.4. Use of Appropriated Funds for Health Promotion Services. Commanders are permitted to use appropriated funds to subsidize:

3.1.4.1. Health screenings, in accordance with Comptroller Decision B-218840, 64 Comp. Gen. 835. When exercising this authority, Installation Commander-sponsored and funded workplace preventive health screenings must promote disease prevention and detection of the presence or risk of disease. Common workplace screenings include, but are not limited to:

3.1.4.1.1. Health risk assessments and exams for blood pressure.

3.1.4.1.2. Mammography.

3.1.4.1.3. Blood lipids.

3.1.4.1.4. Glucose.

3.1.4.1.5. Body composition.

3.1.4.1.6. Bone density.

3.1.4.1.7. Vision and hearing.

3.1.4.2. Organizational memberships for its employees to gain access to a private fitness center's exercise facility as part of a local installation fitness program, in accordance with Comptroller General Decision B-240371, 70 Comp Gen. 190. When exercising this authority, Commanders must:

3.1.4.2.1. For subsidized access to a private fitness facility, meet local installation health services program objectives in accordance with Title 5, United States Code (U.S.C.) Section 7901, *Health service programs*, of as part of a bona fide preventive health program.

3.1.4.2.2. For subsidized access to a private facility:

3.1.4.2.2.1. Be more cost-effective than providing an on-site fitness facility.

3.1.4.2.2.2. Have identified, considered, and determined other possible resources (e.g., other Federal fitness facilities) or typically lower-cost facilities (e.g., community centers or universities) to be unavailable or inappropriate.

3.1.4.2.3. Take reasonable measures to ensure the private fitness facility is the most appropriate, convenient, and cost-effective choice, and provides reasonable accommodations (i.e., accessibility). When purchasing organizational memberships:

3.1.4.2.3.1. Purchase the memberships in the name of the local installation, not in the name of the individual employee.

3.1.4.2.3.2. Follow DoD procurement guidelines when contracting with private fitness facilities to provide access for employees.

3.1.4.2.3.3. Choose basic membership packages (if there are such options) and avoid deluxe package options (e.g., spa privileges or activities that are purely recreational and do not contribute to a bona fide preventive health program).

3.1.4.2.3.4. Monitor the facility and the employees' use of memberships.

3.1.4.2.3.5. Be aware that health club memberships provided to employees may be a taxable fringe benefit.

3.1.4.2.3.6. Supervisors will report on-duty injuries to their safety office pursuant to DoDI 6055.07, *Mishap Notification, Investigation, Reporting and Record Keeping*.

3.2. Department of the Air Force Employee Assistance Program (EAP). EAPs are an essential element of required drug-free Federal workplace programs pursuant to Title 5 Code of Federal Regulations (CFR), Part 792, *Federal Employees' Health, Counseling, and Work/Life Programs*. While historically used solely for substance abuse counseling, EAP has expanded its scope to address other concerns and problems that impact an employee's mental health and well-being. EAP services are available to Air and Space Force civilian employees, Reserve and ANG civilian employees, NAF employees, and household members of these employees. Services are also provided to Army civilians at Air Force-led bases, Direct Hire Foreign Nationals in USAFE, and their respective households.

3.2.1. Program Scope. Civilian employees may receive assistance to resolve personal problems before they have, or will have, an adverse impact on job performance and conduct. EAP provides educational and motivational activities; referral, monitoring, and follow-up services; behavioral health assessment and coaching; short-term solution-focused counseling; critical incident response support; legal and financial assessments; work-life referral and resources for daily challenges, and management assessment and coaching. Services are accessible through a toll-free telephone number and available 24 hours a day, 7 days a week, and 365 days a year. Services are provided at no cost to the employee or household member and are confidential. Services provided but are not limited to:

3.2.1.1. Non-clinical mental health support.

- 3.2.1.2. Referral to clinical support.
- 3.2.1.3. Career coaching and development.
- 3.2.1.4. Relationship challenges, both personal and professional.
- 3.2.1.5. Work-life resources for daily challenges.
- 3.2.1.6. Childcare referrals.
- 3.2.1.7. Parenting support.
- 3.2.1.8. Eldercare.
- 3.2.1.9. Grief and Loss.
- 3.2.1.10. Legal Support to include free assessments.
- 3.2.1.11. Financial Support to include free assessments and coaching.
- 3.2.1.12. Substance abuse recovery and support.
- 3.2.1.13. Critical incident response (loss, natural disaster).
- 3.2.1.14. Supervisor coaching and assessment.

3.2.2. Program Elements.

3.2.2.1. EAP is available to offer resources and workplace-based behavioral health services designed to help maintain and improve employee productivity and to help employees address the full range of personal problems, providing short-term non-clinical counseling, and referring civilian employees to other community and specialized professionals as needed. Counseling services include up to six (6) sessions per issue. An issue requiring more than six counseling sessions to resolve may be referred to community resources after the sixth session. EAP may provide educational presentations and health fairs.

3.2.2.2. EAP works with management and supervisors to provide training for advanced planning for situations, such as organizational changes, legal, assessments, emergency planning, and response to unique traumatic events. Both military and civilian supervisors of civilians can utilize EAP to support their civilian workforce.

3.2.2.3. All EAP services are:

3.2.2.3.1. Provided at no cost.

3.2.2.3.2. Voluntary. Employees are under no compulsion to use the service.

3.2.2.4. Employees may initiate contact with the program or be referred by a supervisor, labor representative, drug-testing program coordinator, nurse from an occupational health center, or other sources. Other than in accordance with AFMAN 44-198, *Air Force Civilian Drug Demand Reduction Program*, they cannot be directed to use EAP services nor should services be contacted on behalf of the civilian employee unless within the framework of a supervisor assessment.

3.2.2.5. There is no limit to the number of times an employee or their household member can utilize the EAP program (except as noted in para. 3.2.2.1.)

3.2.2.6. Confidentiality. Information regarding discussions with employees and EAP staff cannot be disclosed without the employee's written permission, except for:

3.2.2.6.1. Instances of suspected child or elder abuse.

3.2.2.6.2. Employees who commit or intend to commit crimes that would harm themselves, someone else, or cause substantial property damage, i.e., duty to warn.

3.2.2.7. Credentials. EAP will provide employees and their family members with short-term, solution-focused counseling services performed by a master's level or higher, credentialed mental health professional. Services include assessment, prevention, early intervention, solution-focused problem solving, and referral to community resources regarding drug abuse, alcohol abuse, and personal problems impacting employee job performance or conduct.

3.3. Family Care Programs. There are various federal and DAF family care programs, support programs, and leave and work scheduling flexibilities available to DAF employees. These programs and flexibilities assist employees with getting access to quality and affordable family care, promote employee productivity, organizational loyalty, and support recruitment and retention efforts. Eligibility for child and youth programs can be found in Chapter 12 of DAFI 34-144, *Child and Youth Programs*. In addition to family care resources, the EAP website offers many other resources.

3.3.1. Lactating Employee Programs. Workplace nursing employee programs allow lactating employees to express and store milk for their child when they are away from their child at work. Supportive breastfeeding practices in the workplace not only benefit the working employee and child, but also provide benefit to the organization and its mission by positively impacting employee productivity, organizational loyalty, and recruitment and retention.

3.3.1.2. Program requirements. Public law 29 USC § 218d, *Breastfeeding accommodations in the workplace*, requires and provides guidance for workplace accommodations for employees who are lactating. When exercising this authority, organizations must:

3.3.1.2.1. Provide reasonable break time. Such break time is considered paid hours of work during the period of the accommodation. A lactating employee may choose to use an established compensated break time or a flexible work schedule option to accommodate the lactation time.

3.3.1.2.1.1. This is considered a temporary workplace accommodation for one year after the child's birth. This accommodation must be provided to employees even if they do not explicitly request a medical accommodation.

3.3.1.2.1.2. Lactating employees are still required to complete assigned work. They should work with their supervisor to develop a plan to accomplish work not completed while expressing milk.

3.3.1.2.1.3. Reference DAFI 36-3013, *Accommodations for Lactating Service Members and Civilians*, for additional information and requirements.

3.4. Dependent Care Flexible Spending Account (DCFSA).

3.4.1. Eligible DoD employees may reduce their dependent care costs by electing to participate in a DCFSA.

3.4.2. DCFSA eligible contributions are subject to Internal Revenue Service limits and managed by the Federal Flexible Spending Account Program in accordance with Public Law 117-2, *American Rescue Plan Act of 2021*. Section 9632.

3.5. USSF Guardian Resilience Teams (GRTs). GRTs are prevention and human performance teams embedded where Guardians work at each Space Force Base (Peterson, Schriever, Buckley, Los Angeles, Vandenberg, and Patrick), Joint Base San Antonio, the National Capital Region, Kirtland Air Force Base, and a virtual GRT for Geographically Separated Units and remote Guardians and their families. Additional GRT locations are added as need and scope increases, pending funding. GRTs include multi-disciplinary subject matter experts across all domains of Total Force Fitness and build skills to promote shared protective factors and increase positive behaviors. GRT members are full-time, permanent federal civilians. Eligible civilian employees, Veterans, and family members may access GRT services on a space available basis. Some specialty services within the GRT are available to active-duty only. S1 has overall responsibility for GRT, to include the Holistic Health Approach (HHA). S1Q serves as the program administrator and is responsible for policy and infrastructure to implement HHA. GRTs execute and operationalize HHA in their area of responsibility.

3.5.1. Program Scope. GRT may include onsite and virtual wellness involvements focused on developing individualized plans for Guardians in line with their goals. GRT may address, but are not limited, to:

3.5.1.1. Building skills to promote shared protective factors and increase positive behaviors.

3.5.1.2. Fitness and continuous purposeful physical activity.

3.5.1.3. Nutrition.

3.5.1.4. Weight management and obesity-related disease prevention.

3.5.1.5. Musculoskeletal injury prevention intervention if injured.

3.5.1.6. Stress management.

3.5.1.7. Sleep hygiene.

3.5.1.8. Healthy living.

3.5.1.9. Disease prevention.

3.5.1.10. Body Composition Evaluation

3.5.2. GRT Composition.

3.5.2.1. Holistic Health Integrator (HHI). The lead for GRT, to include immediate supervision of all members (medical providers within GRT will receive clinical supervision through the military treatment facility). HHIs are responsible for the primary prevention and public health capacity for the USSF, thus they build skills to promote shared protective factors, engage in community capacity building to work towards shared goals, and coordinate and integrate with other prevention and human performance professionals in their area of responsibility.

3.5.2.2. Certified Strength and Conditioning Specialist. Facilitates injury-risk mitigation and performance enhancement through education and coaching efforts focused on exercise principles, movement/motor control screening, skill-appropriate exercise programming, and collaborative rehabilitative training for existing injuries and sub-optimal movement skills.

3.5.2.3. Physical Therapist (PT). Serves as musculoskeletal health subject matter expert and provides physical performance optimization that could include injury risk-mitigation, muscular-skeletal injury management, and/or individual/group physical activity recommendations. PTs provide limited-scope care to Guardians (active duty only) in the operational area and coordinates higher-level care in the Military Treatment Facility, as needed.

3.5.2.4. Licensed Mental Health Provider. Provides limited-scope mental health care to Guardians (active duty only) in the operational area. Maintains awareness of the levels/types of care available at the Military Treatment Facility and coordinates higher-level care, as needed. Provides consultation to individuals, groups, and leaders regarding recommendations on how to manage or improve mental health of individuals within the organization.

GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION

References

Public Law 117-2, Section 9632, *American Rescue Plan Act of 2021*, 11 March 2021

5 USC § 7103, *Definitions; application*

5 USC § 7901, *Health service programs*

29 USC, Chapter 8, *Fair Labor Standards*

29 USC § 218d, *Breastfeeding accommodations in the workplace*

5 CFR Part 792, *Federal Employees' Health, Counseling, and Work/Life Programs*

5 CFR § 630.201, *Definitions*

DoDI 1400.25V810_DAFI 36-150, *Injury Compensation*, 9 December 2022

DoDI 5400.11, *DoD Privacy and Civil Liberties Program*, 29 January 2019

DoDI 6055.07, *Mishap Notification, Investigation, Reporting, and Record Keeping*, 6 June 2011

DAFI 34-144, *Child and Youth Programs*, 2 October 2024
DAFI 36-3013, *Accommodations for Lactating Service Members and Civilians*, 24 April 2026
AFI 33-322, *Records Management and Information Governance Program*, 23 March 2020
AFMAN 44-198, *Air Force Civilian Drug Demand and Reduction Program*, 24 January 2019
Presidential Memorandum, *Enhancing Workplace Flexibilities and Work-Life Programs*, 23 June 2014
Decisions of the Comptroller Decision B-218840, 64 Comp Gen. 835, September 6, 1985
Decisions of the Comptroller Decision B-240371, 70 Comp. Gen. 190, September 18, 1991
Office of Personnel Management, *Enhancing Workplace Flexibilities and Work Life Program*, August 2014
Office of Personnel Management, *Handbook on Workplace Flexibilities and Work-Life Programs for Elder Care*, July 2015

Prescribed Forms

None

Adopted Forms

DAF Form 847, *Recommendation for Change of Product*

Abbreviations and Acronyms

AFI—Air Force Instruction
AWS—Alternative work schedule
CFR—Code of Federal Regulations
CHPS—Civilian Health Prevention Service
CSO—Chief of Space Operations
DAF—Department of the Air Force
DAFI—Department of the Air Force Instruction
DCFSA—Dependent Care Flexible Spending Account
DoDI—Department of Defense Instruction
EAP—Employee Assistance Program
FLDCOM—Field Command
GRT—Guardian Resilience Teams (GRTs)
HHA—Holistic Health Approach
HHI—Holistic Health Integrator
HSB—Human Resources Management Strategic Board
IRO—Integrated Resiliency Office
MAJCOM—Major Command
OPM—Office of Personnel Management
PL—Public Law
PT—Physical Therapist
SecAF—Secretary of the Air Force
USC—United States Code
USSF—United States Space Force

Office Symbols

AF/A1—Deputy Chief of Staff for Manpower, Personnel, and Services
AF/A1C—Director, Civilian Force Management Directorate
AF/A1Z—Director, Integrated Resiliency Directorate

AFMC/A1Z—Air Force Materiel Command/Integrated Prevention and Response Division
SAF/MR—Assistant Secretary of the Air Force for Manpower and Reserve Affairs
SF/S1—Deputy Chief of Space Operations for Personnel
SF/S1Q—Director, Quality of Life & Resilience Directorate

Terms

DCFSA—A pre-tax benefit program that allows eligible DoD employee to use pre-tax dollars to pay for eligible dependent care expenses.

Duty to Warn—Responsibility to warn an identifiable third party of a potential serious threat of harm to their health.

Express Breast Milk—The act of pumping milk from the breast of lactating women to store for later use.

Family Member—Defined in 5 CFR Part 630.201, *Definitions*.

Federal EAP—An arrangement between a government agency and its employees that provides a variety of support programs to assist with work-related difficulties or personal difficulties that may impact work attendance or job performance.

Household Member—Defined in 20 CFR Part 725.232.

Non-Civilian Employee—Employee not covered by 5 USC § 2105.

On-Duty—Defined in DoDI 6055.07.

Parent—Defined in 5 CFR Part 630.201.

Part-Time Employee—A part-time permanent employee with a career-conditional appointment (or a permanent appointment in the excepted service) and works between 16 and 32 hours each week (or between 32 and 65 hours per pay period) on a prearranged schedule. Part-time permanent employees are eligible on a prorated basis for the same benefits of a full-time employee to include leave, retirement, and health and life insurance coverage.

Supervisor—Defined in 5 USC § 7103, *Definitions; application*, subparagraph (a)(10).