



**19 MARCH 2026**

**Special Management**

**COMMANDER'S  
INSPECTION PROGRAM**

**COMPLIANCE WITH THIS PUBLICATION IS MANDATORY**

---

**ACCESSIBILITY:** Publications and forms are available for downloading or ordering on the e-Publishing website at [www.e-Publishing.af.mil](http://www.e-Publishing.af.mil)

**RELEASABILITY:** There are no releasability restrictions on this publication

---

OPR: OO-ALC/IG

Certified by: OO-ALC/IG  
(Mr. Shaun Hardwick)

Supersedes: OO-ALCI90-302, 29 February 2024

Pages: 14

---

This instruction establishes the policies, procedures, and responsibilities for Ogden Air Logistics Complex (OO-ALC) Commander's Inspection Program (CCIP) and augments Department of the Air Force Instruction (DAFI) 90-302, The Inspection System of the Department of the Air Force, and all applicable supplements. It also describes the activities OO-ALC uses to administer Inspector General (IG) deficiency management, Management Internal Control Toolset (MICT), and outlines/defines roles and responsibilities for OO-ALC personnel. This instruction applies to all personnel assigned to the OO-ALC, to include Geographically Separated Units. Ensure all records generated as a result of processes prescribed in this publication adhere to Air Force Instruction (AFI) 33-322, Records Management and Information Governance Program, and are disposed of in accordance with (IAW) the Air Force (AF) Records Disposition Schedule which is located in the AF Records Information Management System. Refer recommended changes and questions about this publication to the Office of Primary Responsibility (OPR) using the Department of the Air Force (DAF) Form 847, Recommendation for Change of Publication; route DAF Forms 847 from the field through the appropriate functional chain of command.

**SUMMARY OF CHANGES**

This publication has been revised and should be completely reviewed.

1.	General Information.....	3
2.	OO-ALC/IG Commander's Inspection Program (CCIP).....	3

3.	OO-ALC/IG Exercises.....	4
4.	OO-ALC/IG Deficiency Validation Process.....	4
5.	Deficiencies. ....	4
6.	Deficiency Management. ....	6
7.	Management Internal Control Toolset (MICT). ....	6
8.	Unit Self-Assessment Program. ....	7
9.	Roles and Responsibilities. ....	7
<b>Attachment 1—GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION</b>		<b>12</b>

## 1. General Information.

1.1. OO-ALC/IG utilizes four systems: Inspector General Evaluation Management System (IGEMS), Alexsys Team 2 Pro database Maintenance One (MX1), the AF Gatekeeper SharePoint, and MICT.

1.1.1. IGEMS is the repository for all IG identified deficiencies and will be utilized by OO-ALC/IG members.

1.1.1.1. IGEMS will be managed IAW *OO-ALC IGEMS Business Rules* located on OO-ALC Inspector General SharePoint Home Page (click on <Documents> then <Shared Documents>).

1.1.2. All IG deficiencies are also entered into MX1. MX1 is an internal tool used for convenience to work collaboratively and track deficiencies throughout the OO-ALC. Deficiencies are tracked and worked in MX1 by the inspected unit in conjunction with the OO-ALC corrective action reporting (CAR) coordinators. The OO-ALC/IG ensures information in MX1 and IGEMS correspond. Deficiencies are released in MX1 by OO-ALC/IG once the inspection report has been finalized in IGEMS.

1.1.3. The event calendar in IGEMS is used to coordinate planned inspections, assessments, evaluations, and audits to minimize any adverse effects on units' missions.

1.1.4. MICT is used to complete function area manager (FAM) created self-assessment checklists (SACs) against guidance and its use is required as part of the Unit Self-Assessment Program (USAP). OO-ALC/IG is the MICT administrator for the OO-ALC and utilizes MICT data to identify trends and compliance issues. MICT will not be relied upon as the sole basis for inspecting a program. Pertinent oversight authorities (POAs) analyze MICT checklist to build awareness of unit performance in areas of responsibility.

1.1.4.1. MICT will be managed IAW *OO-ALC MICT Business Rules* located on OO-ALC Inspector General SharePoint Home Page (click on <Documents> then <Shared Documents>).

1.2. Throughout this instruction, OO-ALC/IG refers to individuals assigned to the OO-ALC/IG office, and OO-ALC/IG team refers to individuals assigned to OO-ALC/IG, wing inspection team (WIT) members, pertinent oversight authorities (POAs), and process/program subject matter experts (SMEs) who augment OO-ALC/IG as needed.

## 2. OO-ALC/IG Commander's Inspection Program (CCIP).

2.1. OO-ALC/IG inspections are executed using risk-based sample strategy (RBSS) methodology in line with the OO-ALC Commander's (CC) intent.

2.2. OO-ALC/IG will send a monthly notification of upcoming inspections to the OO-ALC/CC and OO-ALC group leadership via workflow, to include processes/programs to be inspected.

2.3. OO-ALC/IG will provide an update to group leadership via workflow, of all major schedule changes.

2.4. When a deficiency is identified during an inspection, at a minimum, the inspector will brief supervisors in person or via phone and/or email if not available.

2.5. POAs are an integral part of the CCIP. POAs will be identified by leadership. Those identified are typically the SME or the supervisor responsible for the management and oversight of a particular program or functional area.

2.5.1. POAs will complete training on CCIP duties that are conducted and tracked by OO-ALC/IG.

### **3. OO-ALC/IG Exercises.**

3.1. All IG exercises will be accomplished IAW *OO-ALC Readiness/Exercise Program Concept of Operations (CONOPS)* located on OO-ALC Inspector General SharePoint home page (click on <Documents> then <Shared Documents>).

### **4. OO-ALC/IG Deficiency Validation Process.**

4.1. OO-ALC/IG will provide groups, staff offices, and POAs (if applicable) with a validation worksheet of potential deficiencies at the end of each inspection via workflow with an opportunity to accept, reject, or request a downgrade.

4.1.1. If the inspected supervisor disagrees with a potential deficiency, then the unit must respond via the validation worksheet attached to the deficiency validation notification email by the suspense date with supporting evidence or all deficiencies will be considered accepted.

4.1.2. If OO-ALC/IG confirms the nature, validity, and severity of a potential deficiency and finds that it is actively being corrected under an open MICT observation or CAR, then it will be excluded from the report. Conversely, if the deficiency is not being addressed in this manner, then it can be included in the report as a deficiency.

### **5. Deficiencies.**

5.1. Noncompliance or deficiency items will be categorized as critical, significant, repeat minor, or minor. Systemic minor deficiencies throughout the OO-ALC may roll up as a significant/critical, based on impact to the organization's mission, or if it may lead to significant legal liabilities and/or penalties. Open deficiencies are reported in the OO-ALC Commander's Inspection Management Board (CIMB) and Inspection Working Group (IWG).

5.1.1. Deficiencies will be managed IAW OO-ALC IGEMS Business Rules located on OO-ALC Inspector General SharePoint home page (click on <Documents> then <Shared Documents>).

5.2. Deficiencies are released in MX1 after the report is finalized in IGEMS. An electronic staff summary sheet (eSSS) will be sent out via OO-ALC/IG workflow to the inspected unit workflow with a 30 calendar-day suspense to provide the required corrective action plan (CAP).

5.3. The unit Office of Coordinating Responsibility (OCR) is required to assign a team lead to each deficiency.

5.3.1. For OO-ALC staff critical/significant deficiencies the OCR will be the OO-ALC/CC, Deputy Director (DD), or Deputy Commander (CD).

5.3.2. The OCR for all group/squadron critical, significant, and repeat minor deficiencies will be the group CC/director/deputy.

5.3.3. The OCR for a minor deficiency is delegated to the applicable level CC/director.

5.4. Recommended Improvement Area (RIA) must be officially acknowledged via recorded method by the assigned OPR in reply to the applicable IG, but no definitive action or follow up is required. OO-ALC's method of acknowledgement will be a response entered into the RIA correction tab in MX1 with the option of stating the corrective action to be taken or justification for non-work and closure. NOTE: RIAs are not required to remain open if corrective action will be taken. However, if they are left open the estimated completion dates (ECDs) must remain current and 60-day updates are required ([paragraph 5.9](#)). The assigned OPR is the closure authority for all RIAs.

5.5. At a minimum, critical, significant, and repeat minor deficiencies require a practical problem-solving model (PPSM) with steps one thru six populated for submission for approval/closure.

5.6. The CAP must effectively fix the deficiency and address the root cause of the problem identified. Deficiency cause codes (DCC) assigned from attachment 9 located in DAFI 90- 302 are required to describe the deficiency/root cause.

5.6.1. At a minimum, minor deficiencies require a root cause, DCC, root cause analysis tool utilized, and corrective actions including OPR and ECD.

5.7. Once approved by the CC/director, the 'Ready for IG Review' and the 'Date of CC/CL Approval' box in MX1 must be populated which will notify OO-ALC/IG that the deficiency is ready for review.

5.8. All IG deficiency ECDs are set for 30 calendar days after the final report is released. If the deficiency requires longer to close, the justification must be annotated in the justification block and the ECD adjusted as appropriate in MX1. The information provided will be transferred into IGEMS by OO-ALC/IG.

5.8.1. The ECD in MX1 will reflect the date the deficiency is expected to close and will not be used as a reminder to update the deficiency. The purpose of the '60 Day Update' field is for the unit to track the next upcoming suspense. Setting the '60 Day Update' suspense date is optional and up to the unit.

5.9. PPSM data including countermeasure ECDs must always be current. Updates are required every 60 calendar days to include milestones and present status until closure. When a deficiency is updated, a new note will be added in MX1 to address what was changed. Pertinent information provided will be transferred into IGEMS by OO-ALC/IG.

5.10. For all IG deficiencies ready for closure, the team lead will verify implementation of countermeasures preventing the deficiency recurrence and that documented objective evidence is provided in MX1 to support successful process sustainment. Assigned OCR will approve all closure requests.

5.10.1. A closure eSSS for all repeat minor, significant, and critical deficiencies will be forwarded to unit leadership/OCR with completed PPSM (steps one through six) and all supporting documentation for approval to close. The eSSS will then be forwarded to OO-ALC/IG workflow for processing.

5.11. The closure authority for all OO-ALC CCIP deficiencies is OO-ALC POA or IG. The OO-ALC/CC or delegated authority must approve closure prior to OO-ALC/IG final approval and closure in IGEMS.

5.12. The closure authority for all critical and significant Major Command (MAJCOM) IG deficiencies is Air Force Materiel Command (AFMC) POA or IG. The OO-ALC/CC or delegated authority must approve closure prior to OO-ALC/IG final approval and submission to AFMC/IG.

5.12.1. MAJCOM repeat minors will follow the CCIP process and have the same closure authority as [paragraph 5.11](#).

5.13. The closure authority for all minor MAJCOM IG deficiencies is OO-ALC/IG. The OCR must approve closure prior to OO-ALC/IG final approval and closure in IGEMS.

## 6. Deficiency Management.

6.1. In addition to the quarterly CIMB, an IWG meeting chaired by the OO-ALC/DD or CD will convene, as needed, to review status of open IG deficiencies, self-identified observations, audits, CARs and non-conformances.

6.1.1. The IWG consists of group CDs or equivalent, staff agency deputy directors, and, as needed, squadron directors to report progress/status of corrective actions.

6.2. AFMC POA/IG accepts/rejects all proposed MAJCOM significant and critical deficiencies in IGEMS.

6.3. OO-ALC POA/IG will accept/reject all proposed CAPs for CCIP repeat minor, significant, and critical deficiencies via written documentation or within MX1. OO-ALC/IG will accept/reject proposed CAPs for MAJCOM repeat minor and minor deficiencies, and CCIP proposed minor deficiencies in IGEMS.

6.4. If the POA/IG rejects the proposed PPSM/CAP, the OO-ALC/IG Deficiency Manager will notify the unit and CAR coordinator of reason for rejection. Unit rejection notification will go out via OO-ALC/IG Workflow and a note will be added into MX1.

6.5. Once a deficiency is in accepted status, the unit will provide updates in MX1 and OO-ALC/IG will update IGEMS mirroring MX1 status ([paragraph 5.9](#)).

6.6. Deficiency submitted for closure. CCIP critical, significant, and repeat minor deficiencies will require POA approval prior to closure in IGEMS. (MAJCOM POA/IG will close all critical and significant MAJCOM-levied deficiencies in IGEMS.)

## 7. Management Internal Control Toolset (MICT).

7.1. MICT will be managed IAW OO-ALC MICT Business Rules located on OO-ALC Inspector General SharePoint home page (click on <Documents> then <Shared Documents>).

7.2. Units are required to utilize MICT checklists as part of their USAP.

7.3. Units will utilize POAs/program managers/SMEs to help determine MICT checklist applicability and appropriate level of assessment. POAs may make recommendations to unit leadership of applicable MICT checklists and level of assessment completion to allow appropriate oversight of their program. Higher level CC/director may over-ride lower-level determinations if deemed necessary.

7.4. Self-identified noncompliance with guidance will be documented by creating an observation on the corresponding MICT checklist if one is available.

7.4.1. Noncompliance or observation items will be categorized as significant, critical, or minor. Open observations will be reported in the OO-ALC CIMB and IWG meetings ([paragraph 6.1.](#)).

7.5. Units will use MICT functionality for filing approved waivers against programs with MICT checklists.

## **8. Unit Self-Assessment Program.**

8.1. USAP will be managed IAW OO-ALC Unit Self-Assessment Business Rules located on OO-ALC Inspector General SharePoint Home Page (click on <Unit Self-Assessment Program> then <Guidance>).

## **9. Roles and Responsibilities.**

9.1. OO-ALC CC/DD/CD.

9.1.1. OO-ALC/CC will review and sign the OO-ALC Readiness/Exercise Program CONOPS, IGEMS, MICT, and Unit Self-Assessment Business Rules.

9.1.2. OO-ALC/DD/CD will chair the IWG meeting ([paragraph 6.1.](#)).

9.1.3. Assign a team lead to each deficiency against the OO-ALC/CC level.

9.1.4. Approve closure via eSSS of all repeat minor, significant, and critical deficiencies entered in MX1/IGEMS as the result of an IG inspection prior to IG closure ([paragraph 5.11 – 5.12.1.](#)).

9.1.5. Assign a lead for each major graded area (MGA), (no lower than a 2-letter) to assist with developing the Commander's Inspection Report (CCIR), assigning functional point of contacts (POC) for each MGA sub-category, unit effectiveness inspection (UEI)/continual evaluation (CE) deliverable requests, and MGA checklists/deliverables.

9.1.6. Approve, via eSSS, OO-ALC annual exercise schedule, scenarios, and objectives, and provide CC intent and expected participation for distribution/communication to the units ([paragraph 3.2 – 3.2.2.](#)).

9.1.7. Ensure all requirements in MICT section are accomplished.

9.1.8. If a waiver is requested, then review/process waivers submitted by groups/staff offices.

9.2. OO-ALC Group CC/Director and OO-ALC Staff Office Directors.

9.2.1. Ensure unit complies with OO-ALC Readiness/Exercise Program CONOPS, IGEMS, MICT, and Unit Self-Assessment Business Rules.

9.2.2. Ensure DD/CD (delegate no lower than 2-letter) attends IWG meeting.

9.2.3. Assign a team lead to each group level/staff ([paragraph 5.3.](#)).

9.2.4. Assigned as the OCR to review and approve proposed CAP for all IG deficiencies in MX1 as the result of an IG Inspection against OO-ALC group/OO-ALC staff level (i.e., business office, engineering office, finance office), and OO-ALC group programs prior to submission to IG for review and final approval (**paragraph 5.7.**).

9.2.5. Assigned as the OCR to approve closure of all deficiencies entered in MX1/IGEMS as the result of an IG inspection against OO-ALC group/OO-ALC staff level (i.e., business office, engineering office, finance office), and OO-ALC group programs and processes when corrective actions are in place and have the desired effect (**paragraph 5.10.1.**).

9.2.6. Review and approve OO-ALC Gatekeeper notification request by set suspense date IAW (paragraph 8.8.4.).

9.2.7. Assign a POC for each MGA to assist the OO-ALC MGA leads with developing the CCIR, UEI/CE deliverable request, and group MGA checklists/deliverables.

9.2.8. Ensure all requirements in MICT section are accomplished.

9.2.9. If a waiver is necessary for an assigned observation, then start the waiver process utilizing MICT functionality or review/process waivers submitted by squadrons/staff offices.

9.2.10. Notify OO-ALC Gatekeeper via OO-ALC/IG Workflow within 2 business days of any direct notification from any outside source of an inspection to ensure it does not conflict with any other events (paragraph 8.8.1..).

### 9.3. Squadron Directors.

9.3.1. Ensure unit complies with OO-ALC Readiness/Exercise Program CONOPS, IGEMS, MICT, and Unit Self-Assessment Business Rules.

9.3.2. Assign a team lead to each squadron level deficiency (**paragraph 5.3.**).

9.3.3. Assigned as the OCR to review and approve CAP for all squadron level minor deficiencies in MX1 prior to submission to IG for review and approval (**paragraph 5.7.**).

9.3.4. Assigned as the OCR to approve closure of all minor deficiencies entered in MX1/IGEMS as the result of an IG Inspection against squadron level when corrective actions are in place and have the desired effect (**paragraph 5.10.1.**).

9.3.5. Review and approve OO-ALC Gatekeeper notification request by set suspense date IAW (paragraph 8.8.4.).

9.3.6. Ensure all requirements in MICT section are accomplished.

9.3.7. If a waiver is necessary for an assigned observation, then start the waiver process utilizing MICT functionality or review/process waivers submitted by supervisors.

9.3.8. Notify OO-ALC Gatekeeper via OO-ALC/IG Workflow within 2 business days of any direct notification from any outside source of an inspection to ensure it does not conflict with any other events (paragraph 8.8.1..).

#### 9.4. OO-ALC Supervisor.

9.4.1. Comply with OO-ALC Readiness/Exercise Program CONOPS, IGEMS, MICT, and Unit Self-Assessment Business Rules.

9.4.2. Work with CAR coordinator and perform team lead functions for all deficiencies when assigned as the team lead.

9.4.3. Obtain a MICT account and assess and/or validate assigned MICT checklists.

9.4.4. Document self-identified noncompliance with guidance by creating an observation in the corresponding MICT checklist.

9.4.5. If a waiver is necessary for an assigned observation, then start the waiver process utilizing MICT functionality.

#### 9.5. POAs/Program Managers/SMEs. Refer to DAFI 90-302 for additional guidance.

9.5.1. Assist OO-ALC/IG with proper interpretation of guidance/policy and support OO-ALC/IG inspections when requested.

9.5.2. Review published MICT checklists to maintain situational awareness of potential problem areas. If a higher-level MICT checklist is unavailable, the POA will determine if the creation of a local checklist would be beneficial.

9.5.3. Work with CC/directors to determine MICT checklist applicability and appropriate level for assessment.

9.5.4. Monitor and engage with supported units to identify when a unit is performing well or struggling to accomplish its mission. Continually evaluate their program looking for indicators of errors, gaps, misinterpretations, or weakness within the program. Where available, review MICT checklists for accuracy, trends, and completeness to stay cognizant of unit performance.

9.5.5. Notify OO-ALC/IG if there is an indication of non-compliance or an inspection may be warranted. POAs are expected to provide input/information along with any other authorized inspection reports to OO-ALC/IG to help with building the RBSS.

9.5.6. OO-ALC POA will assist with validation of critical/significant/repeat minor deficiencies identified during inspections and collaborate with the OO-ALC/IG, SME, or higher POA via functional channels if a conflict of interest exists or for additional clarification ([paragraph 4.1.](#)). Once validated, the associated OO-ALC POA is responsible for assisting with deficiency resolution.

9.5.7. OO-ALC POA will coordinate/approve PPSMs for OO-ALC/IG-identified critical/significant/repeat minor deficiencies ([paragraph 6.3.](#)). If needed OO-ALC/IG may request assistance with minor or MAJCOM-level deficiencies.

9.5.8. OO-ALC POA will approve closure of OO-ALC/IG-identified critical/significant/repeat minor deficiencies ([paragraph 6.6.](#)). If needed OO-ALC/IG may request assistance with minor or MAJCOM-level deficiencies.

## 9.6. OO-ALC/IG Team.

9.6.1. OO-ALC/IG team conducts the CCIP under the authority of the OO-ALC/CC.

9.6.1.1. Team members include those assigned to OO-ALC/IG, WIT members, POAs, and process/program SMEs who augment the OO-ALC/IG with needed requirements (**paragraph 1.2.**).

9.6.2. OO-ALC/IG will provide training and guidance to WIT team members to ensure an understanding of roles of responsibilities. Training will be documented and tracked by OO-ALC/IG.

9.6.3. OO-ALC/IG team conducts inspection process, validation process, and deficiency management.

## 9.7. OO-ALC Gatekeeper.

9.7.1. In the event a unit receives direct notification from an external source of an impending inspection at OO-ALC, the unit is obligated to notify the OO-ALC Gatekeeper via the OO-ALC/IG Workflow within two business days. This notification is necessary to ensure the inspection does not coincide with other planned activities.

9.7.2. Upon receipt of a gatekeeper request form, the gatekeeper will review any conflicts which may currently exist.

9.7.2.1. If a conflict exists, the gatekeeper will notify OO-ALC/IG of the conflict. If there is a need to de-conflict, OO-ALC/IG will coordinate communication with OO-ALC leadership.

9.7.3. The Gatekeeper will ensure the information has been added to the event calendar in IGEMS and OO-ALC/IG SharePoint for visibility purposes.

9.7.4. Gatekeeper notification will be sent for any external audits or inspections via OO-ALC/IG workflow. The affected unit will have 5 business days to reply if they can support the dates.

9.7.4.1. If a unit cannot support the external audit or inspection, the unit will provide an explanation or documentation. The Gatekeeper will notify OO-ALC/IG of the conflict, and an effort will be made to de-conflict if possible.

## 9.8. OO-ALC/IG IGEMS/MICT Manager.

9.8.1. Monitors MICT for new, archived, and updated checklists.

9.8.2. Participates in MICT/IGEMS customer acceptance testing and notifies OO-ALC/IG of upcoming revision changes.

9.8.2.1. Identifies software issues and makes recommendations for future software improvements.

9.8.3. Manages and delegates IGEMS/MICT permissions within the OO-ALC.

9.8.4. Provides MX1/IGEMS key deficiency trends/challenges slides for CIMB/IWG meetings including back-up slides.

G. HALL SEBREN, JR.,  
Brigadier General, USAF  
Commander, Ogden Air Logistics Complex

**Attachment 1****GLOSSARY OF REFERENCES AND SUPPORTING INFORMATION*****References***

AFI 33-322, *Records Management and Information Governance Program*, 23 March 2020

DAFI 90-302, *The Inspection System of the Department of the Air Force*, 15 March 2023

***Adopted Forms***

DAF Form 847, *Recommendation for Change of Publication*

***Abbreviations and Acronyms***

**AF**—Air Force

**AFI**—Air Force Instruction

**AFMC**—Air Force Materiel Command

**AFMCSUP**—Air Force Materiel Command Supplement

**CAP**—Corrective Action Plan

**CAR**—Corrective Action Reporting

**CC**—Commander

**CCIP**—Commander's Inspection Program

**CCIR**—Commander's Inspection Report

**CE**—Continual Evaluation

**CIMB**—Commander's Inspection Management Board

**CD**—Deputy Commander

**CONOPS**—Concept of Operations

**DAF**—Department of the Air Force

**DAFI**—Department of the Air Force Instruction

**DCC**—Deficiency Cause Code

**DD**—Deputy Director

**ECD**—Estimated Completion Date

**eSSS**—Electronic Staff Summary Sheet

**IAW**—In Accordance With

**IG**—Inspector General

**IGEMS**—Inspector General Evaluation Management System

**IWG**—Inspection Working Group

**MAJCOM**—Major Command  
**MGA**—Major Graded Area  
**MICT**—Management Internal Control Toolset  
**MX1**—Maintenance One  
**OCR**—Office of Coordinating Responsibility  
**OO-ALC**—Ogden Air Logistics Complex  
**OPR**—Office of Primary Responsibility  
**POA**—Pertinent Oversight Authority  
**POC**—Point of Contact  
**PPSM**—Practical Problem-Solving Model  
**RBSS**—Risk-Based Sample Strategy  
**RIA**—Recommended Improvement Area  
**SME**—Subject Matter Expert  
**UEI**—Unit Effectiveness Inspection  
**USAP**—Unit Self-Assessment Program  
**WIT**—Wing Inspection Team

### *Terms*

**Continual Evaluation**—A meaningful and timely feedback mechanism primarily between process owners, the chain of command, and pertinent oversight authorities; the routine monitoring of performance indicators; IGs may assist in the continual evaluation process.

**Corrective Action**—Actions to eliminate the cause of a nonconformity and prevent recurrence.

**Corrective Action Reporting Coordinators**—The “Effort Managers” for actions needed to correct the nonconformity. This person “guides” the corrective action plan and evaluates the plan/process ensuring conformance to the PPSM. This person also communicates to the OO-ALC/IG and CC/director “Champion” the status of all CARs under their control and scope.

**Corrective Action Plan**—A plan that addresses the root cause(s) of a detected nonconformity, that outlines a set of steps for addressing issues and gaps in business operations and processes that could negatively impact the business.

**Deficiency**—An inspection finding validated against established guidance by an IG. Depending on the severity of the deficiency and the impact of the deficiency on the unit’s mission, a validated deficiency will be categorized as either “CRITICAL”, SIGNIFICANT, or MINOR:

**Critical Deficiency**—Any deficiency which results in (or could result in) widespread negative mission impact or failure.

**Significant Deficiency**—A validated deficiency which has or could have negative mission impact.

**Minor Deficiency**—A deviation from guidance or standards; left uncorrected, the deficiency may limit mission effectiveness.

**Gatekeeper**—MAJCOM and OO-ALC IG POCs who facilitate optimum scheduling for inspections, evaluations, assessments, and other inspection-related visits (including audits and inquiries) conducted by outside entities (Office of the IG, Department of Defense; Government Accountability Office, and others).

**Inspector**—A person assigned by the CC or IG to inspect IAW this instruction.

**Observation**—A non-validated negative finding or non-compliance found, observed, or identified by a non-IG function during a self-assessment, a staff assistance visit, or other continual evaluation activity.

**Pertinent Oversight Authority**—An agency responsible for the management and oversight of a program or functional area. Responsibilities can include managing and organizing personnel, equipment, training, and policy (i.e., continual evaluation).

**Practical Problem-Solving Method**—Formerly known as the AF 8-Step Problem Solving Model. A standardized approach to properly define a problem, its root cause, countermeasures, countermeasure(s) implementation, measure of effectiveness of corrective action results and validation of sustainment.

**Recommended Improvement Area**—An identified process, product, or capability which could be improved by a suggested course of action.

**Root Cause Analysis**—A systematic process for identifying “root causes” of problems or events and an approach for responding to them.