Reducing Non-Availables/Deployables in the 1st Cavalry Division
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“The strength of our Nation is our Army; The strength of our Army is our Soldiers; The strength of our Soldiers is our Families; and this is what makes us Army Strong.” General Raymond T. Odierno, 38th Chief of Staff U.S. Army

Army 2020 “Generating Health & Discipline in the Force, Ahead of the Strategic Reset Report 2012” addresses “health and discipline” in the force as the predominant single area that threatens our personnel readiness, specifically a high non-available Soldier population. This population makes up 11 percent of the 1st Cavalry Division. When Soldiers are unable to participate in Combat Training Centers (CTCs) Gunnery Ranges, NATO Response Force packages, and perform tasks in support of contingency operations, high non-deployable rates adversely impact readiness at all levels and impedes our mission capabilities.

In an effort to posture ourselves to meet future strategic requirements we must man the Army with Soldiers who are deployable, trained and ready. Leaders at all levels must be engaged in Soldier readiness in response to emerging requirements. As a regionally-aligned Division, oriented toward four combatant commands, unit leaders must make Soldiers the focus to reduce individual non-availability and non-deployability. Those non-deployable Soldiers identified by the chain of command for separation due to medical or disciplinary issues must immediately begin their preparation for transition (ACAP) from the military. To this end, leaders must monitor their Soldiers daily to maintain their health and physical readiness of their force while ensuring those personnel separating for medical or discipline are not at risk for unemployment after their military service.

This article reviews the state of 1st Cavalry Division’s non-available population, the challenges to man rotational forces with both high non-available/deployable rates, and our campaign to reduce this population with the intention of employing as many Soldiers as possible for training and/or deployment.

Terms Defined:

1. Non-available – personnel who are not available for employment/deployment with their assigned units to meet wartime mission requirements in accordance with the personnel availability criteria established in Army Regulation 220-1.

2. Non-deployable – personnel unable to participate in CTC rotations, Convoy Training, Gunnery Ranges, and deploy to perform tasks required of Soldiers in support of contingency operations in a deployed environment. Personnel in this category include but are not limited to those Soldiers facing medical (IDES) concerns, legal (Chapters) processing, or other administrative actions (AWOLs, Retirement, Etc).

3. Commander’s Decision – an eMILPO code that allows a commander to override existing non-available code using the commander’s override feature in the system to indicate Soldier’s availability for deployment IAW HQDA EXORD 10-13 FY13-15 Active
Component Manning Guidance.

4. The Players – the Commander and CSM/1SG, the Squad/Section Leaders, the S1, the Medical Officer, the Brigade Judge Advocate (BJA), and our troopers.

1st Cavalry Non-available/Non-deployable Overview

Over the past 10 years of war, the non-available rates in the Army have fluctuated but generally have trended upwards. The Division’s leadership approached this campaign by identifying bona-fide non-deployers with a focus to reduce this population. As of July 2013, the 1st Cavalry Division’s non-deployable rate is 5.5 percent and trending downward. There is a non-available population of 10.8 percent. The Division goal is to reduce the non-available population to produce maximum relative readiness, and return as many of the 10.8 percent back to the available pool. A high non-available population prevents every unit from having the right number and skill set of Soldiers to meet training/deployment requirements, which equates to readiness degradation. The challenge is the “gray area,” comprised of Medical Readiness Codes (MRCs) 3As, 3Bs, and legal actions (depicted below). This population can be broken down into three manageable parts to focus on the areas of opportunity more effectively; specifically, the Soldier population consisting of the “available”, “non-available”, and “non-deployable”.

The gray area is an opportunity area:

Non-available

<table>
<thead>
<tr>
<th>Available to Unit</th>
<th>Available</th>
<th>Non Deployables</th>
</tr>
</thead>
<tbody>
<tr>
<td>IAW AR 220-1 &amp; DA PAM 220-1 For USR “P” rating</td>
<td>MR1</td>
<td>MR2</td>
</tr>
</tbody>
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The 1st Cavalry Division’s non-available and non-deployable Soldiers fall into three main categories:

1. Soldiers that have a temporary medical condition with a temporary profile.

2. Soldiers who are not medically ready due to combat related wounds or injuries and/or due to other medical conditions that preclude service in the U.S. Army requiring their entry into the Integrated Disability Evaluation System (IDES) process.

3. Soldiers who do not demonstrate the Army Values and do not meet the professional standards required of a combat ready force and are in the process of leaving the all-volunteer Army.

Units with high numbers of personnel in the “gray area” must actively resolve the legal and medical categories with their respective judge advocates and medical officers in order to return
as many of these Soldiers back to the available pool.

The “gray area” is complex which presents challenges to unit level leaders. However, personal leader involvement and emphasis will inevitably reduce the non-available rates.

**Manning Combat Ready Units for Assigned Missions**

The 1st Cavalry Division resources its Brigade Combat Teams in three ways considering current non-available rates and a decreasing size of our Army. Personnel requirements are filled in by the commanders' discretion, cross-leveling, and an emerging requirement.

1. Commanders' discretion is a deliberate action taken by a commander to code Soldiers available who are flagged for adverse actions or medical conditions that do not preclude their ability to deploy with the unit, these include but are not limited to legal, i.e., DUls, FLIPLs, GOMORs, Article 15s, Non-Criminal Investigations, 3A-Dental Readiness, etc.

2. Cross-leveling is an action to move to or retain personnel in a rotational unit because its non-available/deployable population prevents them from achieving the right number and skill set of Soldiers in the unit to meet mission requirements. It is a calculated decision taken to meet an immediate readiness requirement based on priorities and available resources. Example: attachments for a training event and/or working with HRC to defer or delete PCS orders for an available deployable Soldier.

3. Emerging Mission Requirement is an action taken to by the Division Commander to form mission-capable units (task organization) by assuming risk associated with moving personnel to another higher priority rotational unit, while creating a capability shortfall in another unit.

**Best Practices for Reducing Soldiers in the Gray Area**

Recently, a unit requested external support to improve their personnel readiness rates to a higher level. Unable to cross-level internally, the unit Company First Sergeants and Battalion Command Sergeants Major developed a by-name review of all Soldiers identified with a non-availability code in eMILPO. This internal review was accomplished by verifying data accuracy in the personnel system, adjudicating eProfile/MEDPROs discrepancies, reviewing legal/chapter cases, using Commanders Override code in eMILPO for non-criminal actions to include DUls, FLIPL, Article 15s, GOMORs, etc. As a result, in excess of 220 Soldiers were determined available to deploy. Leader involvement with Soldiers, the unit’s Brigade Judge Advocate (BJA), medical officer, and personnel officer came together and acted to reduce non-available soldiers in their formation.

Monitoring Soldiers who have repeated profiles and enforcing active reviews of medical profiles is absolutely required to reduce the number of non-available troopers. While commanders may deploy Soldiers with profiles, it is a collaborative effort between the Physician, physician Assistant, Soldier, and Leader to determine length of profiles and whether a Soldier can be employed for training/deployment.
Affecting the “Gray Area” at Company Level

Campaign to Reduce 1CD Non-Deployables

The gray area is an opportunity area: Non-available

For the Division’s non-available population to be reduced Company-level leaders must be personally involved and not remain at the margins—this is not a Division or Brigade headquarters problem to solve. Company commanders must be involved to the extent that they are educated on the non-available/non-deployable problems, aware of their supported and supporting unit’s non-available challenges, and leveraging the administrative systems (eMILPO, MEDPROs, and eProfile) at the Company and Battalion levels to achieve readiness capability. The more the standard interface among “The Team” (Commanders, Squad/Section Leaders, Soldiers, S1s, PA, and Legal), the more it forces the positive action toward reducing the non-available population across units.

While there is not a one-size fit all approach, commanders must involve all the major systems and resources available to the unit. These include the FORSCOM Soldier Leader Risk Reduction Tool (SLRRT); the personnel officer; the hub for administrative, functional and regulatory personnel processes who provides daily, weekly, and monthly personnel maintenance data points to commanders (capability); unit level commanders fully integrate themselves with S1s to assist in the navigation process of non-availability (value added); MEDPROS Unit Medical Readiness and Commander’s Profile Reports (resources); and other tools unique to the
organization. All these elements must be brought together simultaneously oriented to reduce the “gray area.”

**The Challenge with Cross-Leveling**

With the 1st Cavalry Division’s subordinate units oriented towards several different geographical locations around the globe, the First Team must remain ready to deploy on order to support military and contingency operations. Therefore, squad and platoon level leaders must orient their energy to reducing the growing health and discipline challenges of our non-available population. If the medical and discipline challenges continues to go unchecked, it will create personnel friction in other commands. For example, in preparation for unit’s deployment to Afghanistan, a Brigade experienced a manning shortfall within the low density MOS that required external sourcing. This unit was first of a series of units within the Division to rotate on different ARFORGEN cycles for nine months. Unable to internally cross-leveled to resource its shortfalls, Division prioritized personnel fills from across the formation creating a shortage in a low density MOS to backfill a higher priority fill. Months later, the Division would be called upon to source the same low density MOS for another rotational unit.

An unchecked, non-available/deployable population combined with different units’ training/readiness ARFORGEN cycles continues to challenge the training/deployment readiness. For instance, in preparation for a Brigade’s NTC rotation, one of the subordinate Battalions would later learn that their non-available/deployable population, specifically, low density MOSs would degrade their operating strength for training. Less than 30 days prior to the Brigade’s NTC rotation, the G1 was asked to look at the feasibility of cross-leveling personnel from other Brigades across the Division to round out shortages prior to the Brigade’s NTC rotation. By exception, 1st Calvary Division attached personnel from two Brigades to meet training requirements for NTC.

In both examples above, a temporary solution of cross-leveling available/deployable Soldiers from one BCT to another improved one BCTs posture but did not address the larger problem of non-available population across the Division. Department of the Army (DA) no longer has the inventory or priorities of fill to provide each BCT with 110% aggregate strength. Furthermore, the Department has prioritized generating force billets to improve the overall strength of that formation.

One can arguably conclude that a compounding effect on non-available population is qualified personnel who are trained and have over 24 months TOS but due to priority assignments (i.e. Drill Sergeants, Recruiter, Korea) must PCS which further exacerbates crews and unit readiness capabilities. It is all the more important that we reduce the non-available population. We will have to screen, properly code, and work to resolve Soldiers with both temporary and permanent non-available conditions to return as many to the available status.

**Role of HR Community to Affect the “Gray Area”**

In order to assist and enable commanders in reducing non-available/deployable in an effort to produce maximum relative readiness the 1st Cavalry Division G1 integrates HR functions across the Division into the following Lines of Effort: Maintenance Terrain Walks (MTW),
Administrative Assistant Visits, "How to Run a PAC" courses for leaders and unit personnel officers, and G1/S1 monthly synchronization meetings to create a combined effect oriented at reducing the non-available/deployable population. While commanders must track non-available/non-deployable Soldiers, the S1s are the commander’s primary personnel advisor and must have systems and metrics in place to monitor the status of their formation by name at all times.

By taking positive aggressive measures to reduce the non-available population, the 1st Cavalry Division has strengthened its warfighting capabilities to remain ready to deploy.

**Commanders Must Ask S1s Daily, Weekly, Monthly About the “Gray Area”**
- What systems and metrics are used to manage non-deployables/non-availables?
- Who are my non-deployables/non-availables?
- How do I get the non-availables back in the available pool?

**Specific Reports Which Assist S1s In The Management Of This Problem/Population**
- Review Unit Personnel Accountability Report (AAA 162)
- Unit Soldier Readiness Report (AAA 167)
- Automated Rear Detachment Report
- MEDPROS Unit Medical Readiness
- MEDPROS Commander’s Profile Report
- Annotate duty status correctly

**1st Cavalry Division Best Practices**
- Commander’s oversight at every level-Division, Brigade, Battalions, and Companies
- Staff’s commitment to continuously monitor in forums such as Command and Staff, Personnel Readiness Reviews as well as Quarterly Risk Reduction and Profile Review Boards
- G1 integrating personnel readiness requirements into the Division’s Annual Training Guidance
- G1 informing the Commanding General and Chief of Staff non-available/deployable personnel changes
- S1s reviewing non-available/deployable personnel with Company First Sergeants during MTWs
- Educating Leaders at every level on the various processes and resources used to reduce non-available and non-deployable populations

**Things Command Teams Must Do To Lower Non-Available**
- Maintain an open dialogue with the medical community regarding Soldier that are MRC 3A or 3B
- Resolve legal actions and separations based on unit priority
- Perform frequent internal unit SRPs; personnel maintenance checks
- Consider reassignment of Soldiers to the WTU when appropriate
- Conduct personnel preventive maintenance checks during RESET