STATE OF VERMONT
OFFICE OF THE ADJUTANT GENERAL
789 Vermont National Guard Road
Colchester, Vermont 05446-3099

NGVT-HRO (1oo) 5 March 2021

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: J2021-10 Vermont National Guard (VTNG) Physical Fitness Program (PFP) Policy

1. References:

a. AFI 36-2905, Air Force Physical Fitness Program

b. Army FM 7-22, Holistic Health and Fitness

c. NGB Memorandum dated 13 March 2012, Subject: Assignment of Military Training Duties to Title 32 National Guard Technicians (TN-12-08)

2. This policy supersedes Policy Memorandum NGVT-HRO-2017-01, Subject: VTNG Physical Fitness Program Policy, dated 22 March 2017. (Also note the adjustment of the policy number from J2021-01, as published in OPORD21-001 FRAGORD 22.)

3. Applicability. This policy applies to all Federal Full-time Support (FTS) Personnel of the Vermont National Guard, Army and Air, in the following status:

a. Active Guard and Reserve (AGR), to include One Time Occasional Tour (OTOT) or Temporary AGR.

b. Title 32 (T32) Dual Status Technicians, permanent, indefinite, or temporary.

c. Title 5 (T5) NG Employees, permanent, indefinite, or temporary.

d. Full-Time National Guard-Operational Support (FTNG-OS) or Active Duty Operational Support (ADOS).

4. Purpose. To provide guidelines to supervisors to allow minimal risk and physical fitness training opportunities during regular, flexible, and compressed work schedules.

5. Supervisors are responsible for balancing military and civilian personnel PFP participation with work requirements, ensuring fitness programs do not conflict with mission requirements. Supervisors retain the right to assign work as necessary. Authorization, times, activities, locations, and PFP uniform (attire) are at the supervisor's discretion.

6. The VTNG PFP permits Federal full time staff (FTS) personnel to conduct an individual or group fitness program using up to five hours of duty time per week. Exercise periods may be scheduled at any time during the duty day, subject to supervisory approval. Daily exercise periods will last no more than 90 minutes with a cumulative weekly total of no more than five hours.

7. Prior to starting any PFP FTS personnel must obtain supervisor approval. FTS employees who participate in an off-site PFP activity, (not on a VTNG military installation), must provide their supervisor with a written and signed statement affirming the following: "I understand that by participating in off-site physical fitness programs during regular duty hours that I may not be covered under the Federal Employees Compensation Act (FECA) if injured, and I assume this risk." (Attachment 1) The Statement must be retained in the supervisor's employee files.

8. For AGR, OTOT, ADOS, FTNG-OS, and Temporary AGR employees regular weekly physical fitness is mandatory and a condition of employment. Supervisors of these employees will ensure that regular exercise programs are scheduled and conducted. Supervisors may excuse employees from mandatory weekly physical training during periods when mission requirements conflict or periods of temporary or permanent medical limitations established in writing by a medical provider.

9. Technician employees, T5 and T32, are not required to participate in the PFP, but can do so voluntarily.

10. All personal injury/accidents that occur while performing physical fitness activities, on or off site, must immediately be reported, after seeking necessary medical treatment, as follows:

a. AGR, OTOT, ADOS, FTNG-OS, and Temporary AGR employees will follow Line of Duty procedures.

b. Technician employees (T5 and T32) must report any injury to their supervisor and in turn their supervisor must report the injury to the HRO Employee Benefits Section. It is important to note that PFP is not inherently covered by workers compensation, and that claims are adjudicated by the Department of Labor (DOL), not this Agency. Therefore, it is not a guarantee that a PFP injury will be covered by workers compensation. HRO will provide all necessary documentation to the DOL in support of an employee's claim, provided the employee was not in violation of this policy.

11. The primary purpose of this policy is to encourage employees to exercise and maintain proper cardiovascular endurance, muscular strength, flexibility, and body composition. Regular exercise helps employees maintain a high level of fitness which reduces stress and increases productivity, individual readiness, and mission accomplishment.

12. Safety is a major consideration in any PFP, therefore, the following activities are NOT AUTHORIZED during the duty day as part of a physical fitness program:

a. Any contact or team sport (i.e. Baseball, Football, Soccer, Basketball, Ice Hockey, Lacrosse, Wrestling, etc…).

b. Downhill skiing. (Exempt from this policy when conducted in military uniform as part of a military training program).

c. Racquetball.

13. T32 technicians and T5 employees are not authorized to participate in any military fitness or diagnostic test, voluntary or involuntary, while in a T32 technician or T5 employee status.

14. Employees and supervisors will prioritize and schedule PFP activities that improve overall individual fitness and directly support the goals of the fitness programs outlined in the references listed above.

15. Point of Contact for this policy is the Human Resource Officer at 802-338-3140.

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Date: 2021.03.25 14:07:02 -04'00'

Attachment 1

GREGORY C. KNIGHT
Major General
The Adjutant General

DISTRIBUTION: “A”

ATTACHMENT 1

VTNG Physical Fitness Program
Statement of Understanding

Title 5 and Title 32 Full Time Staff

I, _____, acknowledge and agree that:

I have read and understand the VTNG Physical Fitness Program Policy.

It is recommended that I consult with a physician prior to engaging in an exercise program.

Times for participation and locations for my participation must be approved by my supervisor as appropriate in consideration of mission requirements.

I understand that by participating in off-site physical fitness programs during regular duty hours that I may not be covered under the Federal Employees Compensation Act (FECA) if injured, and I assume this risk
.
I will report any injury as a result of participation in this program immediately to my supervisor. Federal Employees (T5/T32) also must report injuries to HRO via eCOMP (ecomp.dol.gov).

If I abuse this program, I understand that I will have my privilege revoked and could be subject to disciplinary/adverse action.

A signed copy of this statement of understanding will be kept on file by my supervisor.

EMPLOYEE:

_____ _____
Print Name/Signature Date

SUPERVISOR:

_____ _____
Print Name/Signature Date