



DEPARTMENT OF THE ARMY
INSTALLATION MANAGEMENT COMMAND
HEADQUARTERS, U.S. ARMY GARRISON FORT WAINWRIGHT
1046 MARKS ROAD #6000
FORT WAINWRIGHT, ALASKA 99703-6000

IMFW-HRA

OCT 16 2015

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Army Substance Abuse Program (Garrison Policy #19)

1. References:

- a. AR 600-85, Army Substance Abuse Program (ASAP), 28 DEC 2012.
- b. AR 190-5, Motor Vehicle Traffic Supervision, paragraph 1-4j, 22 May 06.
- c. USARPAC Reg 600-9, USARPAC Urinalysis Testing Policy, paragraph 6a, 15 May 04.
- d. AD 2012-07 Admin Processing for Separation of Soldiers for Alcohol/ Drug Abuse, 13 Mar 12.

2. The Army Substance Abuse Program (ASAP) is a commander's program that promotes unit readiness by reducing substance abuse through educating, training, deterring and identifying substance abusers. The preventive and education functions of ASAP are critical to early identification of substance abusers. The misuse and abuse of alcohol and illegal substances is detrimental to mission readiness and Soldier, family member and civilian employee well-being. Commanders, First Sergeants, Unit Prevention Leaders (UPL) and civilian supervisors must be personally supportive and knowledgeable of the ASAP mission to ensure unit readiness and individual health.

3. Impaired Soldier and civilian employee performance or misconduct should serve as early identification of potential substance abuse issues. Early referral of individuals who demonstrate alcohol or other drug abuse issues is the key to rehabilitation. Soldiers identified by incidents or command concerns must be referred to ASAP within 5 days of a documented incident. Soldiers may self-refer if they have concerns for their personal behavior and have not had a disqualifying substance abuse related incident. Civilian employees may be referred by supervisors or may self-refer to the Employee Assistance Professional (EAP) in ASAP. Family members and retired military may also seek substance abuse, work related issues or personal issue services through the EAP. Other prevention/rehabilitation tools available to the Ft Wainwright Community include:

a. Prevention training is available to officers, NCOs, enlisted personnel, civilian employees and their supervisors and other interested groups through the ASAP Prevention Coordinator (PC) and unit UPLs. AR 600-85 requires 4 hours substance abuse prevention training per Soldier per year and 2 hours per Civilian employee per year.

b. Every Battalion level unit is required to accomplish 4% random urinalysis testing weekly (IR) and must perform one unit sweep (IU) of Battalion assigned personnel each year. Brigade Commanders may waive the 4% requirement for block leaves, short term exercises or similar requirements. Commanders must engage "smart testing," to be unpredictable in both the selection of Soldiers for testing and the dates/times of the urinalyses. The intent of the 4% policy is "frequency over quantity" and has proved more effective at deterrence of abuse than large, infrequent unit urinalyses. Current substances tested through the Army Forensic Toxicology Drug Testing Lab (FTDTL) are Amphetamines (amp, meth, MDMA/ecstasy, MDA,), Cannabinoids (marijuana and spice), Benzoylecgonine (cocaine), Opiates (codeine, morphine, heroin) and Oxycodone/Oxymorphone. Steroid testing by commander's request.

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c. The ASAP Counseling Center provides licensed professional substance abuse therapists whose primary duties are to triage, assess, consult with client/command to establish treatment plans and counsel substance abusers. The partnership of command/client/counselor (C³) is essential to the successful rehabilitation of Soldiers. Equally important to C³ is command attention to rehab drug or alcohol testing weekly (RO) of all enrolled ASAP clients. This testing verifies the abstinence of the client, deters use and expedites effective treatment. Lack of abstinence during the course of treatment is program failure and a possible justification for separation action by command. Intoxicated/high Soldiers must be taken to the MP station or the ER. All potential clients must be sober before being escorted to ASAP.

d. The Unit Prevention Leaders (UPL) certified by ASAP will support unit prevention education, coordinate drug testing and advise commanders in assessing misuse/abuse of drugs or alcohol in the unit. Personal observations by the Unit Prevention Leaders will be used on a continuing basis to prevent and deter substance abuse. Frequent health and welfare inspections, command emphasis on zero tolerance and education of harmful effects are helpful tools to deter use of illicit substances. When notified of positive urinalysis test results by ASAP, commanders will provide escort of abusers to the ASAP Counseling Center with a signed DA 8003 form and inform CID within three days of notification.

5. All levels of military and civilian leadership must serve as models of responsible behavior and assist in identification and appropriate referral of those directly involved in alcohol or other drug abuse. Where prevention, identification, education, and rehabilitation/treatment fail, administrative or disciplinary action must be utilized.

6. This policy supersedes Garrison Policy #19, SAB, dated 7 Apr 14.

7. POC for this memorandum is Ron Huffman, Fort Wainwright Army Substance Abuse Program Manager, 361-1370/1377.


SEAN C. WILLIAMS
COL, SF
Commanding

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