

FORT RILEY ASAP

DAC DCA

PREVENTION SERVICES
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Army Substance Abuse Program (ASAP)

AR 600-85

October 2001 Revision

This regulation prescribes policies and procedures to implement, administer, and evaluate the Army Substance Abuse Program

INSTALLATION A.D.C.O. Alcohol Drug Control Officer

- Provide direct supervision, management, and administration over all non-clinical personnel staff and programs.
- Develop, coordinate, and recommend local ASAP non-clinical policies and procedures for implementation.
- Manage and monitor the biochemical testing program military and civilian
- Monitor and evaluate the commander referral rate and the evaluation completion rate, and provide quarterly reports to installation commander and director ACSAP.

INSTALLATION A.D.C.O. CONTINUED

- Establish communication, referral network, and administrative coordination between military units and civilian activities to facilitate the effectiveness of non-clinical ASAP programs.
- Provide commanders and supervisors with ASAP consultation to assist in the identification and referral of individuals suspected of alcohol/drug abuse in the non-clinical functions of the Army's program.
- Institute procedures and strategies designed to enhance the deterrent effect of drug testing
- Evaluate all Prevention education and training aspects

INSTALLATION A.D.C.O. CONTINUED

- Restrict notification of positive test results to the soldier's unit commander, the garrison or similar level commander, and when requested, the supporting legal office.
- Serves as the coordinator of all substance abuse/risk reduction issues for the HRC pr similar forum.

PROCEDURE OF REFERRAL DRUG POSITIVE

- Installation Biochemical Testing Coordinator (IBTC) will receive notification of positive UA in writing by SSN# only
- Unit Command notified of positive UA has 5 days to retrieve the result and notify. 72 hrs notify ICD 24 hrs notify ASAP clinic of the positive UA.
- Command to identify soldier by Alfa Roster, notify CID of the positive UA and schedule a screening at the ASAP Clinic.
- AR 600-85 mandates that all soldiers who test positive as illegal drug users will be processed for administrative separation (para. 1-35). Conflict with AR 635-200 currently being worked out.

CLINICAL REFERRAL

- Command will schedule the soldier identified as positive UA for clinical evaluation within two days of notification of positive on DA 8003
- ASAP Clinic has 48 hours from notification of the positive to schedule and complete the evaluation process.
- Rehabilitation Team Meeting with Command, soldier and clinic staff scheduled following the evaluation to determine clinical recommendations.
- Command will determine rehabilitation outcome and complete the DA 8003.

REHABILITATION

- If the soldier meets the criteria of the DSM-IV for substance abuse or dependency and the commander elects to support treatment soldier is enrolled into the ASAP on DA-4465 for duration identified at Rehabilitation Team Meeting.
- Further use of a mind altering substance following enrollment constitutes Rehabilitation Failure and a chapter 9 from the military. This prevents reoccurring substance use. Soldiers that are enrolled in ASAP will not have multiple positives and remain in the Army.

COMMANDER'S ASAP CARD

- 5 days to retrieve positive notification
- Commander, 1SG, UPL only authorized
- Identify SSN# by Alfa Roster
- CMD 72 hrs to notify CID of positive UA
- 2 days to schedule ASAP appointment
- CMD to complete DA-8003 referral form
- Clinic to screen within 48 hrs notification
- RTM CMD, Patient and Clinical Staff
- Clinic clinical recommendation DSM-IV
- CMD final disposition at RTM
- RTM agreement signed CMD, Patient, Staff
- CMD to determine completion or failure