



DEPARTMENT OF THE ARMY
JOINT BASE MYER – HENDERSON HALL
204 LEE AVENUE
FORT MYER, VIRGINIA 22211-1199

IMMH-HR

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Joint Base Myer-Henderson Hall (JBM-HH) Policy Memorandum HR-4,
Army Substance Abuse Prevention

1. REFERENCES.

- a. Army Regulation (AR) 600-85, Army Substance Abuse Program (ASAP),
28 Dec 12.
- b. Army Directive 2016-15, Change in the Army's Random Deterrence Drug Testing
Program, 22 Apr 16.

2. PURPOSE. To provide guidance to all JBM-HH personnel on the Army Substance Abuse Program in hopes of preventing alcohol and illicit drug use and drug misuse. Wherever possible, identify Soldiers, Department of the Army (DA) civilians, and other eligible members who require assistance; and provide assistance when needed.

3. APPLICABILITY. This policy applies to JBM-HH Soldiers and DA civilian employees. For Marine Corps personnel on Henderson Hall, MC Order – T1700.24B is the governing regulation for substance abuse.

4. POLICY. The abuse of alcohol or illegal drugs is incompatible with military and federal service. Alcohol and drug abuse is a leadership issue. Commanders, leaders and managers must be proactive to ensure they prevent substance abuse and encourage healthy choices for Soldiers, DA civilians, and other eligible members.

5. PROCEDURES.

- a. Commanders will conduct an active and unpredictable biochemical-testing program. Testing will be unannounced and will occur at a rate of 10% of unit strength monthly IAW Army Directive 2016-15. Newly assigned Soldiers will be randomly tested within 60 days of their arrival.

- b. All active Army Soldiers will receive a minimum of four hours of alcohol and drug awareness training per year. Department of the Army Civilians will receive at least two hours of awareness training per year. The ASAP staff will provide at least one hour of the required training. The Unit Prevention Leader (UPL) will provide the remaining hours and furnish the sign-in rosters to the ASAP Prevention Coordinator within five working days after training has been conducted.

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c. Commanders will appoint an officer or NCO (E-5 promotable or above) on orders as the Battalion Prevention Leader (BPL) and alternate BPL. Company, detachment and equivalent commanders will appoint an officer or NCO (E-5 or above) on orders as the UPL and alternate UPL.

d. Rehabilitation: Commanders will refer individuals suspected of or identified as drug and/or alcohol abusers within 72 hours of identification to the ASAP Clinic.

(1) Commanders should be directly involved in the rehabilitation process. Soldiers enrolled in the program will be drug tested. The Commander and the counselor will determine the frequency of drug testing.

(2) Commanders at all levels will ensure Soldiers attend their ASAP appointments. The commander and first sergeant are the only unit personnel who are authorized to cancel a scheduled appointment with ASAP. Commanders/first sergeants will immediately contact the ASAP and notify them of any scheduling changes.

e. Alcohol Abuse:

(1) The drinking age is 21 years old in JBM-HH and in nearby and adjacent states.

(2) Soldiers on duty will not have a Blood Alcohol Content level of .05% or above. Violators are subject to disciplinary action under the Uniform Code of Military Justice, administrative action, or characterization for separation from the Army.

(3) Soldiers who are involved in serious incidents of alcohol-related misconduct will be considered for separation from the Army.

f. Commanders should consult with the Alcohol and Drug Control Officer (ADCO) when a situation is not clearly defined in AR 600-85 or unit standard operating procedures.

6. PROPONENT. The Directorate of Human Resources is the proponent for this policy. The point of contact is the ADCO at commercial (703) 696-6860, DSN 426-6860.

DISTRIBUTION:

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Commanding

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