



DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY FIRES CENTER OF EXCELLENCE AND FORT SILL
455 MCNAIR AVENUE, SUITE 100
FORT SILL, OKLAHOMA 73503

ATZR-C

7 Sep 2021

MEMORANDUM FOR DISTRIBUTION

SUBJECT: CG Policy Memorandum #5E, Trust, Teamwork and Cohesion – At-Risk Behavior Mitigation Review

1. Purpose. This policy is applicable to all military personnel under the Senior Commander's operational control on Fort Sill. This policy defines the Fort Sill Personnel Risk Reduction Policy and Command responsibilities.

2. This policy does not pertain to any actions or requirements associated with the following:

a. Sexual Assault Review Board (SARB) High Risk Response Team (HRRT), in accordance with Army Regulation 600-20, 24 July 2020.

b. Behavioral Health At-Risk Case Tracking (ARCT) enrollment and tracking requirements outlined in OTSG/MEDCOM Policy Memorandum 21-011, dated 09 February 2021.

3. Definitions.

a. **Low-Risk.** Soldier has no significant issues or issues for which he/she is receiving appropriate support. Potential for adverse outcomes appears to be low.

b. **Moderate-Risk.** Behaviors or concerns that place the Soldier at-risk of serious problems if not addressed through appropriate actions; Soldier exhibiting a pattern of serious risk taking behavior.

c. **High-Risk.** Behaviors or concerns that potentially place the Soldier or others in danger or harm's way; life threatening risk-taking behavior or jeopardizing team members' safety.

4. Policy. All leaders are responsible and accountable for safety. All Commanders, leaders and supervisors will encourage help-seeking behaviors at all levels.

a. Battalion and below Commanders meet monthly with subordinate leaders and associated professionals to review risk behaviors and mitigation strategies for all personnel where appropriate. Special emphasis is taken with those identified as moderate or high risk.

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b. O-6 level Commanders/Directors conduct a review of all moderate and high risk personnel quarterly through the use of the unit Health Promotion Team (uHPT) process.

c. My intent is that any Soldier identified as a potential harm to themselves or a harm to others will be monitored as moderate or high risk for a minimum of twelve months (or through upcoming battery-level change of command) following a significant incident and will be cleared by behavioral health before downgrading risk.

d. Command teams at all levels provide face-to-face overviews of all moderate and high risk personnel to incoming command teams in order to maintain visibility and continuity of care.

e. Brigade commanders are the sole decision authority to downgrade moderate and high risk personnel. This authority cannot be delegated.

5. Samples of optional formats of "Soldier Risk Review Cards" can be found at the enclosures 1 thru 4.

6. The point of contact for this memorandum is the Community Ready and Resilient Integration office at (580) 558-0113.

4 Encls

1. Soldier Risk Review Card Example 1
2. Soldier Risk Review Card Example 2
3. Soldier Risk Review Card Example 3
4. Soldier Risk Review Card Example 4



KENNETH L. KAMPER
Major General, USA
Commanding

DISTRIBUTION:

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Encl 1: SOLDIER RISK REVIEW CARD **EXAMPLE**

Soldier Name	SSG Snuffy, Joseph (LAST FOUR: 1234)
Date Identified as risk	January 2021
Risk Level	High
Age/Gender/MOS/TIS	23/Male/13B/3 years
# of Deployments	1
Presenting Concerns	Has concerns of suicidal ideations, received life changing medical news that could impact mental state and increase thoughts of suicide.
Past Stressors	Few social contacts, made statements about committing suicide, referred to Southwest because of thoughts of suicide, medical concerns, ETS from the military, job responsibility.
Past Interventions	Referred and cleared by Some County Medical Center, leadership checking in on Soldier/calling regularly, saw behavior health, removed from position to reduce job stress and allow for time for preparing to ETS, holding firearms in the Battery Arms Room.
Current Plan	Continue contact from leaders, continue to urge Soldier to make BH appointments, continue to hold onto fire arms. Behavior Health has lowered SSG Snuffy to Low Risk per ARCT, has shown improvements.
Criteria for Removal	ETS November 2021

EXAMPLE

Encl 2: SOLDIER RISK REVIEW CARD

Insert Photo
(if available)

DATE REVIEWED: 19 Jul 21
RISK LEVEL: Moderate

Work Status:
 Supervisor: MSG Sergeant
 Battle Buddy: SFC Officer/ SSG Friend
 CDR:
 CPT Person
 1SG:
 1SG People
 ETS: 20220930
 Performance: Works well

RISK FACTOR		RISK FACTOR	
BH Diagnosis	X	Court Martial	X
Anger Issues		UCMJ	
Relationship		Civilian Legal	
Family		Medical issues	X
Financial		MEB	X
Unit / Work		APFT Failure	
Substance Abuse		Exceeds HT-WT	
Chapter Action		Rank Reduction	
Self Esteem		Alcohol	
Suicide Event		POWs	

Background Information:
 Commander Assessment:
 Causes:
 Medical: Completed MEB
 Red Meds/Narcotics: Hydroxyzine, fluoxetine, Nortriptyline, Prazosin, Viagra, lidocaine patch, Diclofenac Sodium topical gel
 Stressors/ Indicators: Anger issues, gets upset over self admitted trivial things. He just lost his mother 02-April-2021. February 2021 SM lost his brother in-law.
 POW: Yes; secured in off-post residence

Soldier Info (ERB/ORB Data)
 Position: Surplus Soldier
 TIS: 10 Years 8 months
 Race: Caucasian
 Gender: Male
 Age: 31
 Flag: MA
 Security Clearance: Revoked
 Marital Status: Divorced
 Dependents: 0
 Accompanied: No
 Residence: Off post (1508 Name Street, Lawton OK 73501)
 CoC Home visit: N/A

Action Plan:

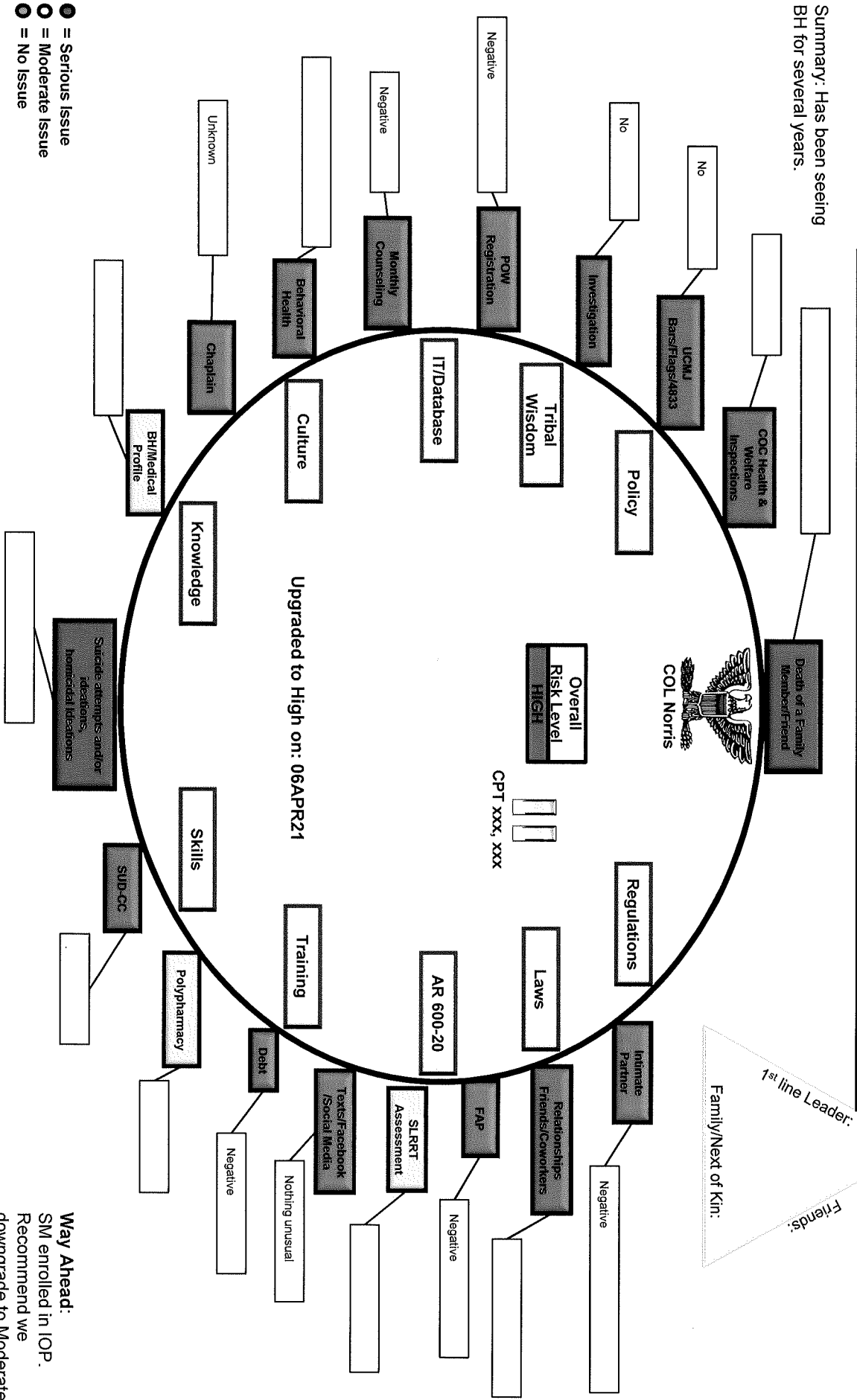
- Seeking Counseling/Daily touchpoints w/ SM.
- Recommendation: Continue to monitor closely.

High
 Moderate
 Low

EXAMPLE

Encl 3: SOLDIER RISK REVIEW CARD

Summary: Has been seeing BH for several years.



Age/Gender/MOS/TIS/Deployments: 21/M/13B/2y4m/0

Marital Status/Children & Ages: Single/0

Way Ahead:
SM enrolled in IOP.
Recommend we
downgrade to Moderate
risk.

Eng14: SOLDIER RISK REVIEW CARD

EXAMPLE

As of: DD MM YY

Risk Level	Retain	Chapter Action	Transitions	Date	Medical Overview
L	M	H	XH	N	Y
Type of Risk			Marriage	DD MM YY	Profile: broke back in car accident (as of date)
Substance Abuse, Safety violations			Child Birth	DD MM YY	
			Divorce/Sep	DD MM YY	
			Death of FM	DD MM YY	
			Change Unit	DD MM YY	
			MEB/MMRB	DD MM YY	Dr/Manager
			Chapter	DD MM YY	PT-RAHC
			ETS/Retire	DD MM YY	Sleep Clinic-RAHC
			NOK	Doe, Jack (Father)	Weekly check
			Buddy	PFC Snuffy, James K	Ambien for Sleep
			Yr of Srv	4y6m	MFLC
			Time on Station	2y4m	Previous Incidents
			Deploy Hist	2010-2011	Discipline
			Address	123 Somerroad Blvd, City, State 98765	Behavioral
			Phone	123-456-7890	Investigations
			Spouse	Doe, Jane	DV, Possession (paraphemalia)
			#Children	1	Legal Trouble
			Names	Julie (5y)	Relationship Failure
			Yrs Married	1.5	Financial Trouble
			Background		
			ACFT	Pass	
			Profile	Date	21 Aug 11
			H/W Chk	Date	13 Nov 11
			Weight Mgmt	+30	+90
			Flag		+120
			Leader Comments		
			Physical		
			Emotional	Dealing with loss of marriage	
			Social		
			Family	Divorce filed while deployed	
			Spiritual	Loss of faith	
			Tactical		
			Risk Trend	Drastic Decrease	Gradual Decrease
				Stable	Gradual Increase
					Drastic Increase
			Risk Timeline		
			DD MM YY	Attempted suicide in Iraq after daughter's death	
			DD MM YY	Domestic Violence (72 hr No Contact)	
			DD MM YY	Domestic Violence (72 hr No Contact)	
			DD MM YY	One car accident, totaled car in VA (unauthorized leave)	
			DD MM YY	Positive UA	
			Control Person	SGT Brown	Counsel SM
			Comments	S1, CPT Blue	Bar to reenlistment placed/Flagged
				SJA & S1	Sign Chapter Packet
				Surg, MAJ Purple	Chapter Physical