



REPLY TO  
ATTENTION OF

DEPARTMENT OF THE ARMY  
US ARMY INSTALLATION MANAGEMENT COMMAND  
HEADQUARTERS, UNITED STATES ARMY GARRISON, BAMBERG  
ARMY SUBSTANCE ABUSE PROGRAM  
UNIT 27535  
APO AE 09139-7535

IMEU-BAM-HRA

13 September 2010

**MEMORANDUM FOR:** Soldiers, Employees and Family Members of the US Army Garrison, Bamberg

**SUBJECT:** Installation Biochemical Testing and Substance Abuse Prevention and Awareness Training Programs

**PURPOSE:** To establish guidelines for the Installation Biochemical Testing Program and the Substance Abuse Prevention and Awareness Training Program.

**SCOPE:** This policy is applicable to all military units, commands, and tenant organizations serviced by the USAG Bamberg Army Substance Abuse Program (ASAP).

**REFERENCE:**

a. Department of Defense Directive 1010.1, Military Personnel Drug Testing Program, 9 December 1994.

b. Department of Defense Instruction 1010.16, Technical Procedures for the Military Personnel Drug Abuse Testing Program, 9 December 1994.

c. Army Regulation 600-85, Army Substance Abuse Program, 2 February 2009, Rapid Action Revision, 2 December 2009.

d. Army Center for Substance Abuse Programs, Commander's Guide and Unit Prevention Leader (UPL) Urinalysis Collection Handbook, June 2006.

e. USAG Bamberg ASAP Standard Collection Procedures for Military Urinalysis Drug Testing Program, 1 February 2010, herein known as the USAG Bamberg ASAP SOP.

**POLICY:**

1. The objectives of the Army's Biochemical Testing Program, AR 600-85, include deterring Soldiers from abusing drugs and facilitating early identification of drug abuse. Biochemical testing is a tool available to commanders to achieve these objectives. Crucial to the success of the program is that commanders actively and aggressively conduct testing. If commanders fail to test their Soldiers, the deterrent and identification effects are lost.

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PROPOSER: Army Substance Abuse Program

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Maintaining readiness is our mission despite any inconvenience testing might entail. The Battalion and Unit Commanders must:

a. Battalion Commanders must:

(1) Appoint, on orders, at least two Battalion Prevention Leaders (BPL). BPLs must be in the grade of E-5 (promotable) or above, and must be certified through the USAG Bamberg ASAP, IAW AR 600-85 and USAG Bamberg ASAP SOP, Para 7.

(2) Battalion commanders must ensure that unannounced random urinalysis testing is conducted IAW AR 600-85, Chapter 4. Per AR 600-85, Chapter 4-2d, the minimum rate of testing is 4-5% random selection (Code IR) per battalion per week. In addition to random testing, battalion commanders should conduct periodic unit sweeps. The most effective programs use IU testing in addition to and supplementary to a good random drug testing program. IU testing will not be used as a means of testing a Soldier the commander suspects of abusing drugs but does not have sufficient probable cause to conduct a PO collection. The battalion commander should ensure that the number of specimens collected under the IU test basis is no more than 75 percent of the number of IR specimens submitted for testing annually.

(3) Implement and maintain a Battalion Substance Abuse Program (SAP) SOP to include a Unit Prevention Plan that outlines training requirements and the implementation of the Unit Risk Inventory (URI) assessment.

b. Unit Commanders must:

(1) Appoint, on orders, at least two Unit Prevention Leaders (UPL). UPLs must be in the grade of E-5 or above, and must be certified through the USAG Bamberg ASAP, IAW AR 600-85 and USAG Bamberg ASAP SOP, Para 7.

(2) Separate Unit Commanders are to randomly select and test 4-5% of their unit strength, on a weekly basis using Smart Testing techniques.

(3) Ensure that all soldiers enrolled for rehabilitation at the Army Substance Abuse Program (ASAP) Counseling Center are urinalysis tested IAW their rehabilitation program. All rehabilitation testing will be coded "RO" and conducted at the unit level by a UPL currently certified by the USAG Bamberg ASAP.

(4) Implement and maintain a Unit SAP SOP to include a Unit Prevention Plan that outlines training requirements and the implementation of the Unit Risk Inventory (URI) assessment.

c. All commanders must ensure that upon receipt of an official report of a positive urinalysis test result (electronic DD Form 2624) that all soldiers who receive positive urinalysis test results are processed IAW referenced regulations and policies. All actions must be coordinated closely with the Law Office.

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All Soldiers who receive a positive result must be referred to the Clinical ASAP within 5 days of notification of the positive result.

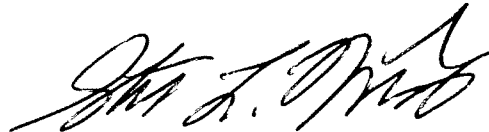
2. Prevention education and awareness programs are an essential component to an effective Substance Abuse Program. Training and information provide Soldiers with the fundamental knowledge to make better choices on and off duty. To ensure that units have successful Battalion and Unit SAPs, Commanders must:

a. Ensure that each Soldier receives a minimum of four hours of substance abuse prevention and/or awareness education each year. The education can be provided by a BPL, UPL, the ASAP Prevention Coordinator (PC), or other agency that provides substance abuse prevention and/or awareness training. All substance abuse prevention training must be reported to the ASAP PC, along with the following information and documentation:

- (1) A copy of the sign-in roster used during the training
- (2) Name of instructor
- (3) Date of training
- (4) Class title/topic of training
- (5) Number of attendees
- (6) Length of training

b. Ensure that all newly assigned Soldiers are briefed on ASAP policies and services within 30 days of arrival.

3. Point of contact for this policy is the ASAP, at DSN 469-1710.



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Commanding