UNCLASSIFIED/
ROUTINE
R 131857Z FEB 15
FM CNO WASHINGTON DC
TO NAVADMIN
INFO CNO WASHINGTON DC
BT
UNCLAS

NAVADMIN 037/15

SUBJ/DOMESTIC VIOLENCE INCIDENT COUNT-CONSEQUENT COMMAND ACTIONS//

MSGID/GENADMIN/CNO WASHINGTON DC/N1/FEB//
REF/A/DOC/OSD/10APR14/NOTAL//
REF/B/DOC/OPNAV/25APR08//
NARR/REF A IS USD (P&R) MEMO, DOMESTIC VIOLENCE INCIDENT COUNT AND CONSEQUENT COMMAND ACTIONS. REF B IS OPNAVINST 1752.2B, FAMILY ADVOCACY PROGRAM (FAP).//

RMKS/1. This NAVADMIN provides implementation guidance regarding the new Department of Defense (DoD) requirement for commands to report Navy domestic violence incident count and consequent command action (DVIC-CCA). Navy commands shall report command actions for reportable domestic violence incidents as outlined in this message. Reference (a) directed each service to develop a plan to annually collect and submit the number of DVIC-CCAs for incidents that meet specifically defined criteria commencing with data collection in FY-15. The first report will be collated and submitted to the Office of the Secretary of Defense Family Advocacy Program office (OSD FAP) no later than 31 March 2016.

2. DVIC-CCA reporting criteria shall include:
a. DVIC reporting criteria: A reportable incident is defined as a domestic violence incident in which the offender is an active-duty service member (including reserve personnel in an active-duty status) which meets one or more of the following criteria for:
(1) Grievous bodily harm (as defined in Article 128 of the Uniform Code of Military Justice (UCMJ)): Grievous bodily harm means serious bodily injury. It does not include minor injuries, such as a black eye or a bloody nose, but does include fractured or dislocated bones, deep cuts, torn members of the body, serious damage to internal organs, and other serious bodily harm.
(2) Severity Level 3 (Severe Physical): Major physical injury requiring inpatient medical treatment or causing temporary or permanent disability or disfigurement. Severity Level 3 includes moderate or severe emotional effects requiring long-term mental health treatment. This may require placement in an alternative environment to protect the physical safety or other welfare of the victim.
(3) Severity Level 2 (Moderate Physical): Minor or moderate physical injury requiring one or more outpatient visits for treatment. Minor or moderate emotional effects requiring short-term mental health treatment may be indicated.
(4) Sexual abuse of a spouse or intimate partner: Acts of domestic

abuse or domestic violence to coerce the spouse or intimate partner to engage in any sexual activity. It includes rape/intercourse, sodomy, and coercing the spouse to participate in sexual activity with another person, as in pornography or prostitution. (Note: Though not specifically listed, this definition includes any sexual assault of and any aggravated or abusive sexual contact with a spouse or intimate partner, as defined in reference (b)).

b. CCA reporting criteria:

(1) Administrative action: The following are examples of administrative actions; the list is not all inclusive: formal counseling, special evaluation or fitness report, page 13 entry, administrative separation processing, administrative board, etc. The specific administrative action taken shall be documented. A CCA is only *administrative action* when no other CCA applies. For example, if non-judicial punishment (NJP) proceedings occur or court-martial charges are preferred, then NJP or court-martial is the appropriate CCA. If administrative actions are taken in addition to NJP proceedings or court-martial preferral, the administrative actions shall be reported with the results of the NJP or court-martial.

(2) NJP: Includes only those disciplinary proceedings where UCMJ articles regarding the DVI are held, whether punishment is imposed or not. The results of the proceedings, including punishment awarded if applicable, shall be reported along with any additional administrative action.

(3) Courts-Martial: Includes only those cases where UCMJ articles regarding the DVI are preferred. The results of the court-martial, including punishment awarded if applicable, shall be reported along with any additional administrative action.

(4) Other: Includes subjects/incidents that could not be prosecuted or disposed of at NJP for the following reasons: Lack of jurisdiction (includes civilian trial/conviction); the allegation was unfounded by the command, meaning it was false or did not meet the elements/criteria of a domestic violence offense/incident; statute of limitations expired; the subject was separated for reasons other than direct result of the DVI (includes discharge, transfer to Fleet Reserve, and retirement), died or deserted; evidence was insufficient either to prefer or refer charges at any forum to include NJP; or the victim declined or refused to cooperate with the investigation or prosecution. The specific action under other category shall be documented.

3. Commander Navy Installations Command (CNIC) responsibilities. CNIC shall:

a. Direct the installation Family Advocacy Clinical Case Staff meeting to review all FY-15 DVIs and assign a severity level using Department of Defense Maltreatment Severity Codes. Incidents that meet DVIC-CCA reporting criteria above shall be reported to the parent command of the service member and recorded in the Navy Central Registry.

b. Forward FY-15 Navy Central Registry reportable incident data to OPNAV N170 quarterly (15 January, 15 April, 15 July, 15 October) and final report no later than 10 November 2015. At minimum, data shall include:

(1) Command Name
(2) Command Primary UIC
(3) Incident Report Date
(4) Category of Abuse/Severity
(5) Name of Service Member Offender

4. Echelon II responsibilities. Echelon II commanders are authorized to issue additional reporting guidance to their subordinate commands. When Echelon II commanders issue additional CCA reporting guidance, commanders shall comply with Echelon II guidance. Echelon II commanders shall be responsible for ensuring all CCA reports received are forwarded to OPNAV N170 using the procedures below.

5. Commander responsibilities. In the absence of additional reporting guidance from Echelon II, commanders shall:

a. Report completed command actions for incidents occurring on or after 1 October 2014 via encrypted e-mail to DVIC_CCA(at)navy.mil no later than 5 days after the command action is complete or within 30 days of receipt of this message for already completed actions. Command actions are complete per paragraphs 2.b.(1) through 2.b.(4). The report shall include:

(1) Command Name
(2) Command Primary UIC
(3) Incident Report Date
(4) Category of Abuse/Severity
(5) Name of Service Member Offender
(6) Consequent Command Action
(7) Command Point of Contact Information

b. After 30 September 2015, commanders shall provide a status report on all pending FY-15 incidents no later than 10 November 2015.

6. OPNAV N17 responsibilities.

a. OPNAV N17 will coordinate with Echelon II point of contacts to recover any delinquent reports.

b. OPNAV N17 shall prepare and submit the FY-15 DVIC-CCA report to Assistant Secretary of the Navy (Manpower and Reserve Affairs) no later than 10 February 2016. Subsequent fiscal year DVIC-CCA inputs and reports will be made on a timeline similar to that identified for FY-15.

7. Point of contact is Mrs. Sonia Smith, OPNAV FAP Manager, at (901) 874-4355 or via e-mail at sonia.smith(at)navy.mil.

8. This NAVADMIN will remain in effect until superseded or canceled, whichever occurs first.

9. Released by Vice Admiral W. F. Moran, N1.//

BT
#0001
NNNN
UNCLASSIFIED//

UNCLASSIFIED//
ROUTINE
R 051546Z JAN 16
FM CNO WASHINGTON DC
TO NAVADMIN
INFO CNO WASHINGTON DC
BT
UNCLAS

NAVADMIN 004/16

MSGID/GENADMIN/CNO WASHINGTON DC/N1/JAN//

SUBJ/DOMESTIC VIOLENCE INCIDENT COUNT-CONSEQUENT COMMAND ACTIONS//

REF/A/MSG/CNO WASHINGTON DC/131857ZFEB15//
REF/B/LTR/OSD/10APR14/NOTAL//
NARR/REF A IS NAVADMIN 037/15, DOMESTIC VIOLENCE INCIDENT COUNT-CONSEQUENT COMMAND ACTIONS. REF B IS AN UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS CHAIRMAN OF THE JOINT CHIEFS OF STAFF, DOMESTIC VIOLENCE INCIDENT COUNT AND CONSEQUENT COMMAND ACTIONS.//

RMKS/1. This NAVADMIN provides amplifying information for reference (a) regarding the Navy Domestic Violence Incident Count and Consequent Command Action (DVIC-CCA) collection and reporting plan. Reference (b) directed each service to develop a plan to collect and submit the number of DVIC-CCAs for incidents that meet specifically defined criteria.

2. Commander Navy Installations Command (CNIC) responsibilities.
CNIC will:
a. Direct the installation Family Advocacy Clinicians in consultations with Clinical Case Staff Meetings (CCSM) to review all domestic violence incidents (DVI) and assign a severity level using Department of Defense Family Advocacy Program Incident Severity Scale. Incidents that meet DVIC-CCA reporting criteria shall be reported to the parent command of the Service Member by CCSM letter and recorded in the Navy Central Registry (NCR).
b. Forward NCR reportable DVI data to Director, 21st Century Office (OPNAV (N17)) quarterly (15 January, 15 April, 15 July, 15 October) and final report no later than 30 November. At a minimum, data will include:

(1) Command Name
(2) Command Primary Unit Identification Code (UIC)
(3) Incident Report Date
(4) Category of Abuse/Severity
(5) Name of Service Member Offender

3. Echelon II responsibilities. Echelon II commanders will establish Family Advocacy Liaisons throughout their enterprises to facilitate timely reporting of DVIC-CCA reports and also follow-up on missing reports if required.

4. Commanders responsibilities
a. Report completed command actions for incidents that were determined by Family Advocacy Program (FAP) to meet the incident severity scale criteria by fiscal year via encrypted e-mail to DVIC_CCA(at)navy.mil no later than five days after the command action is complete. The report shall include:

(1) Command Name
(2) Command Primary UIC
(3) Incident Report Date and DTG of SITREP if applicable
(4) Category of Abuse/Severity as notified by FAP
(5) Name of Service Member Offender
(6) Consequent Command Action
(7) Command Point of Contact Information

b. Issuing military protective order or treatment through FAP/Fleet and Family Support Center is not a reportable CCA. If the commander decides not to pursue command action the CCA would be reported as "No Action Taken" in the OTHER category. No action taken is usually the result of insufficient evidence for disciplinary processing or the commander made a determination that no action would be taken because disciplinary or administrative action was not warranted under guidance as cited in Rules for Courts-Martial 306.

5. Additional information on DVIC/CCA is available at http://www.public.navy.mil/bupers-npc/support/21st_Century_Sailor/familyadvocacy/Pages/default.aspx.

6. Point of contact is Mr. Aaron Wagner, DVIC-CCA Action Officer, at (901) 874-6969 or via e-mail at aaron.wagner(at)navy.mil.

7. This NAVADMIN will remain in effect until superseded or canceled, whichever occurs first.

8. Released by Vice Admiral W. F. Moran, N1.//

BT
#0001
NNNN
UNCLASSIFIED//

RTTUZYUW RUEWMCS0000 1401713-UUUU--RUCRNAD.
ZNR UUUUU
R 201713Z MAY 13
FM CNO WASHINGTON DC
TO RUENAAA/CNO WASHINGTON DC
ZEN/NAVADMIN
BT
UNCLAS
QQQQ
SUBJ: NAVY FAMILY ADVOCACY PROGRAM INCIDENT DETERMINATION COMMITTEE CORE MEMBERSHIP
CHANGES
UNCLASSIFIED/
FM CNO WASHINGTON DC//N1//
TO NAVADMIN INFO/CNO WASHINGTON DC//N1//
UNCLAS//N01752//

NAVADMIN 134/13

MSGID/GENADMIN/CNO WASHINGTON DC/N1/MAY//

SUBJ/NAVY FAMILY ADVOCACY PROGRAM INCIDENT DETERMINATION COMMITTEE CORE MEMBERSHIP
CHANGES//

REF/A/DOC/OPNAV/25APR08//
REF/B/MSG/CNO WASHINGTON DC/N1/071321ZMAY12//
REF/C/MSG/CNO WASHINGTON DC/N1/241431ZMAR11//
NARR/REF A OPNAVINST 1752.2B, FAMILY ADVOCACY PROGRAM. REF B IS NAVADMIN 155/12, NAVY FAMILY ADVOCACY PROGRAM CASE REVIEW COMMITTEE PROCEDURAL CHANGES. REF C IS NAVADMIN
101/11, FAMILY ADVOCACY PROGRAM PILOT PROCESS REVISION FROM A CASE REVIEW COMMITTEE TO
AN INCIDENT DETERMINATION COMMITTEE AND CLINICAL CASE STAFF MEETING.//

RMKS/1. This NAVADMIN promulgates changes which will be incorporated into a future revision of ref (a) and supersedes guidance provided in refs (b) and (c). These changes take effect immediately. A copy of this message should be filed and retained with ref (a). Key changes are:
a. Naval Criminal Investigative Service (NCIS) will no longer participate in the Incident Determination Committee (IDC) as a core voting member.
b. The command representative will no longer participate in the IDC as a core voting member, but is eligible to cast their vote for command-specific cases.

2. Fleet and Family Support Center (FFSC) is directed to implement an IDC and Clinical Case Staff Meeting (CCSM) model to replace the current Case Review Committee (CRC) model previously used to adjudicate domestic and child abuse cases. The IDC/CCSM model divides administrative and clinical Family Advocacy Program (FAP) functions into two separate reviews.

3. IDC membership will consist of the following core members designated in writing by the committee chairman:
- installation executive officer (chair)
- installation command master chief or senior enlisted advisor
- installation or tenant command staff judge advocate

- installation security representative
- Family Advocacy Representative (FAR)

a. The local NCIS Special Agent in Charge (SAC) will designate an NCIS agent who will participate in the IDC meeting to provide pertinent, case-specific information authorized by the SAC to be made available to the IDC. The NCIS representative will not be a voting member. In certain cases, NCIS may have to consult with civilian or military prosecutors prior to releasing case information to the IDC.

b. For FAP cases involving an active-duty service member, the command representative will attend IDC meetings. The command representative shall participate in the case review and may cast a vote for the command-specific case only. It is recommended that only commanding officers, executive officers, and command master chiefs participate as command representatives.

4. The IDC will make an incident status determination using DoD criteria. All core voting members or their alternates shall attend the IDC. Completion of mandated web-based training is required prior to participation on the IDC.

5. The IDC will determine whether a case meets or does not meet specified criteria for domestic or child abuse. All cases that meet abuse criteria will be recorded in Navy's central registry and staffed to an installation CCSM. Cases that do not meet abuse criteria will be staffed to the CSSM, referred to appropriate services, recorded in the central registry without identifying information, and closed.

6. The purpose of the CCSM is safety planning, supportive services, clinical treatment, periodic case reviews, and case closures. CCSM attendees will be limited to individuals with clinical/professional expertise in domestic and child abuse. Chair of the CSSM will be the FAR or a tier III clinically privileged designee/alternate.

7. FAP support will begin before the case is presented to the CCSM.
Specific treatment recommendations for each FAP case will be determined at the CCSM following incident status determination.

8. Requests for appeal/review of case determinations will be made in writing within 30 days of receipt of an IDC decision. The case will be reviewed at the local IDC or referred to established Commander, Navy Installations Command headquarters review team.

9. Points of contact are Mrs. Sonia Smith, N135F, at (901) 874- 4355/DSN 882 or via e-mail at sonia.smith(at)navy.mil or Ms. Crystal C. Griffen, at (202) 433-4597, or via e-mail at crystal.c.griffen(at)navy.mil.

10. Released by Vice Admiral S. R. Van Buskirk, N1.
BT
#0000
NNNN

UNCLASSIFIED//

ATTENTION INVITED TO

ROUTINE

R 071321Z MAY 12 PSN 846433K28

FM CNO WASHINGTON DC

TO NAVADMIN
ZEN//OU=DOD/OU=NAVY/OU=ADDRESS LISTS(UC)/CN=AL NAVADMIN(UC)

INFO ZEN/CNO WASHINGTON DC

BT
UNCLAS
QQQQ

SUBJ: NAVY FAMILY ADVOCACY PROGRAM (FAP) CASE REVIEW COMMITTEE (CRC) PROCEDURAL CHANGES UNCLASSIFIED/ FM CNO WASHINGTON DC//N1// TO NAVADMIN INFO CNO WASHINGTON DC//N1// UNCLAS //N01752//

NAVADMIN 155/12

MSGID/GENADMIN/CNO WASHINGTON DC/N1/MAY//

SUBJ/NAVY FAMILY ADVOCACY PROGRAM (FAP) CASE REVIEW COMMITTEE (CRC) PROCEDURAL CHANGES//

REF/A/MSG/CNO WASHINGTON DC/241431ZMAR11//
REF/B/MSG/CNO WASHINGTON DC/020000ZSEP10//
REF/C/DOC/OSD/23AUG04//
REF/D/DOC/OPNAV/25APR08//

NARR/REF A IS NAVADMIN 101/11, FAMILY ADVOCACY PROGRAM PILOT PROCESS REVISION. REF B IS NAVADMIN 297/10, FAMILY ADVOCACY PROGRAM INTERIM POLICY REVISIONS. REF C IS DOD DIRECTIVE 6400.1, FAMILY ADVOCACY PROGRAM. REF D IS OPNAVINST 1752.2B, FAMILY ADVOCACY PROGRAM.//

RMKS/1. THIS NAVADMIN DIRECTS FLEET AND FAMILY SERVICE CENTERS NAVY-WIDE TO IMPLEMENT AN INCIDENT DETERMINATION COMMITTEE (IDC) AND CLINICAL CASE STAFF MEETING (CCSM) MODEL TO REPLACE THE CASE REVIEW COMMITTEE (CRC) MODEL PREVIOUSLY USED TO ADJUDICATE DOMESTIC AND CHILD ABUSE CASES.

2. REF A AUTHORIZED PILOTING THE IDC/CCSM MODEL FOR COMMANDER, NAVY INSTALLATIONS COMMAND (CNIC) SELECTED SITES. REF B REFERENCES AN UNDERSECRETARY OF DEFENSE (PERSONNEL AND READINESS) MEMORANDUM THAT SUPPORTS NAVY PROCEEDING WITH THE ROLLOUT OF THE DEPARTMENT OF DEFENSE MODEL REPLACING FAP CRC MEETINGS WITH THE IDC/CCSM MODEL IN THE MANAGEMENT OF ALL NAVY FAP CASES. THE IDC/CCSM MODEL DIVIDES ADMINISTRATIVE AND CLINICAL FAP FUNCTIONS INTO TWO SEPARATE REVIEWS.

3. REF D, WHICH ASSIGNS IMPLEMENTATION OF NAVY FAP TO CNIC, WILL BE REVISED TO INCORPORATE THIS CHANGE.

4. IDC MEMBERSHIP WILL CONSIST OF THE FOLLOWING CORE MEMBERS WHO MUST BE DESIGNATED IN WRITING BY THE COMMITTEE CHAIRMAN:
INSTALLATION EXECUTIVE OFFICER (CHAIR), INSTALLATION COMMAND MASTER CHIEF OR SENIOR ENLISTED ADVISOR, INSTALLATION OR TENNANT COMMAND STAFF JUDGE ADVOCATE, NCIS AGENT, BASE SECURITY REPRESENTATIVE, FAMILY ADVOCACY REPRESENTATIVE (FAR), AND A COMMAND REPRESENTATIVE WHO IS TYPICALLY THE COMMANDING OFFICER (CO) FOR ACTIVE DUTY MEMBER(S) INVOLVED IN A FAP CASE. THE CO MAY DESIGNATE AN ALTERNATE WITHIN THE CHAIN OF COMMAND TO ATTEND THE MEETING IN THEIR ABSENCE TO CAST A VOTE. UNIT COMMAND MASTER CHIEFS ARE RECOMMENDED AS THE DESIGNEE TO SERVE AS ALTERNATES TO THE CO. THE COMMAND REPRESENTATIVE WILL PARTICIPATE IN THE CASE REVIEW AND MAY CAST A VOTE FOR HIS/HER COMMAND SPECIFIC CASE ONLY. THE FAR IS RESPONSIBLE FOR PRESENTATION OF EACH CASE TO THE IDC.

5. THE IDC WILL MAKE AN INCIDENT STATUS DETERMINATION USING DOD CRITERIA AND THE DECISION TREE OUTLINED IN REF B. A TWO-THIRDS QUORUM OF CORE MEMBERS IS REQUIRED TO CONVENE AN IDC AND COMPLETION OF MANDATED WEB-BASED TRAINING IS REQUIRED PRIOR TO PARTICIPATION ON THE IDC.

6. NCIS WILL ENSURE INFORMATION CONTAINED WITHIN POLICE REPORTS ARE AVAILABLE, WHEN LAW ENFORCEMENT IS INVOLVED, TO SUPPORT PRESENTATION OF EACH CASE TO THE IDC.

7. THE IDC WILL DETERMINE WHETHER A CASE "MEETS" OR "DOES NOT MEET" SPECIFIED CRITERIA FOR DOMESTIC OR CHILD ABUSE. ALL CASES THAT "MEET" ABUSE CRITERIA WILL BE RECORDED IN THE NAVY'S CENTRAL REGISTRY AND STAFFED TO AN INSTALLATION CCSM. CASES THAT "DO NOT MEET" ABUSE CRITERIA WILL BE STAFFED TO THE CCSM, REFERRED TO APPROPRIATE SERVICES, RECORDED IN THE CENTRAL REGISTRY WITH IDENTIFYING INFORMATION REMOVED, AND CLOSED.

8. FAP PLANNING FOR DELIVERY OF SUPPORTIVE SERVICES WILL BEGIN BEFORE THE CASE IS PRESENTED TO THE CCSM. TREATMENT RECOMMENDATIONS WILL BE ESTABLISHED FOLLOWING THE INCIDENT STATUS DETERMINATION AT THE IDC FOR EACH FAP CASE STAFFED TO THE CCSM.

9. THE CHAIR OF THE CCSM WILL BE THE FAR OR A TIER III CLINICALLY PRIVILEGED DESIGNEE/ALTERNATE. CCSM ATTENDEES WILL BE LIMITED TO INDIVIDUALS WITH CLINICAL/PROFESSIONAL EXPERTISE IN DOMESTIC AND CHILD ABUSE. THE PURPOSE OF THE CCSM IS SAFETY PLANNING, SUPPORTIVE SERVICES, CLINICAL TREATMENT, PERIODIC CASE REVIEWS, AND CASE CLOSURES.

10. REQUESTS FOR APPEAL/REVIEW OF CASE DETERMINATIONS WILL BE MADE IN WRITING WITHIN 30 DAYS OF RECEIPT OF THE IDC DECISION. FOR FOLLOW-UP/SECOND REVIEW REQUESTS, THE CASE WILL BE REVIEWED AT THE LOCAL IDC OR REFERRED TO THE ESTABLISHED CNIC HEADQUARTERS REVIEW TEAM.

11. BEGINNING WITH THIRD QUARTER FY12, CNIC WILL COMMENCE IMPLEMENTATION OF THESE NEW PROCEDURES, NAVY-WIDE. QUESTIONS OR COMMENTS SHOULD BE DIRECTED TO MS. CRYSTAL C. GRIFFEN, CNIC (N91) AT (202) 433-4597, OR VIA E-MAIL AT CRYSTAL.C.GRIFFEN(AT)NAVY.MIL.

12. RELEASED BY VICE ADMIRAL S. R. VAN BUSKIRK, N1.//

BT
#2257
NNNN
UNCLASSIFIED//

UNCLASSIFIED//

RTTUZYUW RHSSXYZ0001 0831014-UUUU--RHSSSUU
ZNR UUUUU
R 241431Z MAR 11
FM CNO WASHINGTON DC
TO NAVADMIN
AL NAVADMIN
INFO CNO WASHINGTON DC
BT
UNCLAS
FM CNO WASHINGTON DC//N1//
TO NAVADMIN
INFO CNO WASHINGTON DC//N1//
UNCLAS //N01752//
NAVADMIN 101/11

MSGID/GENADMIN/CNO WASHINGTON DC/N1/MAR//

SUBJ/FAMILY ADVOCACY PROGRAM PILOT PROCESS REVISION FROM A CASE REVIEW COMMITTEE TO AN INCIDENT DETERMINATION COMMITTEE AND CLINICAL CASE STAFF MEETING//

REF/A/MSG/CNO WASHINGTON DC/020000Z SEP 10// REF/B/DOC/DODD 6400.1/23AUG2004// REF/C/DOC/OPNAVINST/1752.2B/25APR2008//
NARR/REF A IS NAVADMIN 297/10, FAMILY ADVOCACY PROGRAM INTERIM POLICY REVISIONS. REF B IS DOD DIRECTIVE 6400.1, FAMILY ADVOCACY PROGRAM. REF C IS OPNAV INSTRUCTION 1752.2B, FAMILY ADVOCACY PROGRAM.// RMKS/1. THIS NAVADMIN UPDATES REF A WITH REGARD TO THE SCOPE OF "CARETAKER STATUS." NAVY IS REQUIRED TO REVIEW CHILD SEXUAL ABUSE CASES BY THE FAMILY ADVOCACY PROGRAM (FAP) CASE REVIEW COMMITTEE
(CRC) ONLY WHEN CARETAKER STATUS IS CONSISTENT WITH REFS B AND C.

2. REF A ADDRESSES AN UNDER SECRETARY OF DEFENSE (MILITARY COMMUNITY & FAMILY POLICY) MEMORANDUM WHICH RECOMMENDS NAVY PROCEED WITH DOD DRAFT POLICY AND PROCEDURES TO REPLACE FAP CRC MEETINGS WITH AN INCIDENT DETERMINATION COMMITTEE (IDC) AND CLINICAL CASE STAFF MEETING (CCSM) TO MANAGE ALL FAP CASES. THE IDC AND THE CCSM DIVIDE THE ADMINISTRATIVE AND CLINICAL FUNCTIONS OF THE FAP CRC INTO TWO SEPARATE MEETINGS.

3. PER REF C, FAP IS A LINE-MANAGED, MULTI-DISCIPLINARY PROGRAM IMPLEMENTED BY COMMANDER, NAVY INSTALLATIONS COMMAND (CNIC). CNIC COMMENCED TRAINING AND IMPLEMENTATION OF THIS NEW DOD CRITERIA IN FY-10 IN ORDER TO TRANSITION NAVY FROM THE OLD CRC PROCESS TO THE DOD IDC AND CCSM MODEL.

4. AFTER REVIEWING NOMINATIONS FROM THE FIELD, CNIC HAS SELECTED FIVE SITES TO PILOT THIS TRANSITION:
   A. NAVAL WEAPONS STATION YORKTOWN VA
   B. NAVAL STATION GREAT LAKES IL
   C. NAVAL STATION GUAM
   D. JOINT BASE PEARL HARBOR-HICKAM HAWAII
   E. AND NAVAL AIR STATION LEMOORE CA.

PILOTING OF THE IDC AND CCSM WILL BEGIN NO LATER THAN 30 MARCH 2011.

5. THE IDC WILL MAKE INCIDENT STATUS DETERMINATIONS (ISD) USING ISD CRITERIA AND THE DECISION TREE OUTLINED IN REF A. A TWO-THIRDS QUORUM OF CORE MEMBERS IS REQUIRED TO CONVENE AN IDC AND COMPLETION OF MANDATED WEB-BASED TRAINING IS REQUIRED PRIOR TO PARTICIPATION IN THE IDC. EVERY ISD WILL BE RECORDED IN THE NAVY'S CENTRAL REGISTRY.

6. IDC MEMBERSHIP CONSISTS OF THE FOLLOWING CORE MEMBERS: INSTALLATION EXECUTIVE OFFICER (CHAIR), INSTALLATION COMMAND MASTER CHIEF, INSTALLATION STAFF JUDGE ADVOCATE, NCIS AGENT, BASE SECURITY REP, AND THE FAMILY ADVOCACY REPRESENTATIVE (FAR). CORE MEMBERS AND ALTERNATES WILL BE DESIGNATED IN WRITING BY THE CHAIR. COMMAND REPRESENTATIVE(S), FOR ACTIVE DUTY MEMBER(S) INVOLVED IN A FAP CASE, WILL BE REQUESTED TO PARTICIPATE IN THE DISCUSSION AND CAST A VOTE FOR THEIR COMMAND-SPECIFIC CASE ONLY.

7. CCSMS WILL BE CHAIRED BY THE FAR AND ATTENDEES WILL BE LIMITED TO PROFESSIONALS WITH CLINICAL EXPERTISE IN DOMESTIC AND CHILD ABUSE. THE PURPOSE OF THE CCSM IS: SAFETY PLANNING, SUPPORTIVE SERVICES, CLINICAL TREATMENT, PERIODIC CASE REVIEWS, AND CASE CLOSURE.

8. LESSONS LEARNED FROM THE PILOT SITES WILL BE REVIEWED PRIOR TO THE NAVY-WIDE ROLL OUT OF IDC AND CCSM IN FY-12 AND FY-13.

9. POINT OF CONTACT IS MS. CRYSTAL C. GRIFFEN, CNIC (N91), (202) 433-4597, OR VIA E-MAIL CRYSTAL.C.GRIFFEN(AT)NAVY.MIL.

10. RELEASED BY VADM MARK FERGUSON, N1.//

BT
#0001
NNNN

UNCLASSIFIED//

ROUTINE

R 020000Z SEP 10

BT
UNCLAS
PASS TO OFFICE CODES:
FM CNO WASHINGTON DC//N1//
TO NAVADMIN
INFO CNO WASHINGTON DC//N1//
NAVADMIN 297/10

MSGID/GENADMIN/CNO WASHINGTON DC/N1/SEP//

SUBJ/FAMILY ADVOCACY PROGRAM INTERIM POLICY REVISIONS//

REF/A/DOC/OPNAVINST/1752.2B/25APR2008//
REF/B/MEMO/USD(P&R)/09JUN2010//

NARR/REF A IS OPNAV INSTRUCTION 1752.2B, FAMILY ADVOCACY PROGRAM (FAP). REF B IS UNDERSECRETARY OF DEFENSE (PERSONNEL AND READINESS) MEMORANDUM THAT SUPPORTS NAVY PROCEEDING WITH FORTHCOMING DOD POLICY REVISIONS FOR FAP INCIDENT STATUS DETERMINATIONS AND CASE REVIEW COMMITTEE (CRC) PROCEDURES.

RMKS/1. THIS NAVADMIN ANNOUNCES REVISIONS TO THE FAMILY ADVOCACY PROGRAM (FAP) CASE REVIEW COMMITTEE (CRC) PROCESS (AS OUTLINED IN REF A) AND ALIGNS NAVY WITH DOD PROPOSED POLICY (IAW REF B). THESE REVISIONS WILL ENSURE STANDARDIZATION AND ACCURACY OF INCIDENT STATUS DETERMINATIONS. THESE CHANGES ARE EFFECTIVE IMMEDIATELY. A REVISION TO REF A WILL FOLLOW.

2. FAP IS A LINE-MANAGED, MULTI-DISCIPLINARY PROGRAM IMPLEMENTED BY COMMANDER, NAVY INSTALLATIONS COMMAND (CNIC). CNIC IS COMPLETING THE TRAINING OF INSTALLATION AND REGIONAL FAMILY ADVOCACY REPRESENTATIVES (FARS) ON THE NEW DOD CRITERIA FOR REVIEWING SPOUSE/INTIMATE PARTNER AND CHILD ABUSE ALLEGATIONS.

3. A DECISION TREE WAS DEVELOPED TO ASSIST WITH APPLYING THE NEW CRITERIA TO CASES BEING REVIEWED FOR INCIDENT STATUS DETERMINATIONS. FAP INCIDENT STATUS DETERMINATIONS WILL BE RECORDED IN CRC MINUTES AND REFLECTED ON DD FORM 2486 AS EITHER:
A. MEETS CRITERIA - A SUBSTANTIATED INCIDENT
B. DOES NOT MEET CRITERIA - AN UNSUBSTANTIATED INCIDENT THE CRC WILL DETERMINE WHETHER THE INCIDENT IS UNRESOLVED, OR DID NOT OCCUR, FOR EVERY UNSUBSTANTIATED INCIDENT. CRC DETERMINATION LETTERS WILL REFLECT COMPLETE INCIDENT STATUS DETERMINATION RESULTS.

4. CRC MINUTES WILL NO LONGER INDICATE HOW EACH CRC MEMBER VOTED. INSTEAD, MINUTES WILL ONLY REFLECT THE DECISION ON EACH OF THE FOLLOWING CRITERIA FOR INCIDENTS OF MALTREATMENT UNDER REVIEW: ACT;

IMPACT; EXCLUSION(S); AND, FINAL DETERMINATION.

5. INSTALLATION FARS (TRAINED BY CNIC STAFF USING A TRAIN-THE-TRAINER MODEL) WILL PROVIDE THE REQUIRED NEW CRITERIA TRAINING (DEVELOPED BY CNIC) TO RESPECTIVE INSTALLATION CRC MEMBERS, FAP CLINICAL STAFF, AND COMMAND REPRESENTATIVES. CRC MEMBERS WHO HAVE NOT COMPLETED THE REQUIRED TRAINING WILL NOT BE ALLOWED TO VOTE AT CRC MEETINGS. CNIC STAFF WILL ALSO PROVIDE TRAINING FOR HEADQUARTERS REVIEW TEAM (HRT) MEMBERS.

6. INSTALLATION CRCS AND FAP HRT WILL BEGIN USING THIS NEW CRITERIA AND DECISION TREE TO MAKE INCIDENT STATUS DETERMINATIONS FOR ALL SPOUSE/INTIMATE PARTNER OR CHILD ABUSE INCIDENTS NO LATER THAN 90 DAYS AFTER COMPLETING CNIC-SPONSORED TRAINING.

7. ADDITIONALLY, USE OF THE FAMILY IN NEED OF SERVICES (FINS) CATEGORY WILL CEASE IMMEDIATELY FOLLOWING COMPLETED TRAINING OF FAP CLINICAL STAFF AND WILL BE ENTIRELY PHASED OUT NO LATER THAN 30 SEPTEMBER 2010.

8. REVISION TO THE CRC PROCESS USING THE NEW CRITERIA FOR INCIDENT STATUS DETERMINATION, FOR ALL SPOUSE/INTIMATE PARTNER AND CHILD ABUSE CASES WILL BE EFFECTIVE NAVY-WIDE NO LATER THAN 30 SEPTEMBER 2010. NAVY WILL CONTINUE TO REVIEW CHILD SEXUAL ABUSE CASES FOR DETERMINATION BY THE FAMILY ADVOCACY CRC, REGARDLESS OF THE CARETAKER STATUS OF THE ALLEGED OFFENDER(S).

9. POINT OF CONTACT IS MELVINA THORNTON, CNIC (N911), (202) 433-4646, OR VIA E-MAIL AT MELVINA.THORNTON(AT)NAVY.MIL.

10. RELEASED BY VADM MARK FERGUSON, N1.//

BT
#0001
NNNN

DEPARTMENT OF THE NAVY
OFFICE OF THE CHIEF OF NAVAL OPERATIONS
2000 NAVY PENTAGON
WASHINGTON, D.C. 20350-2000

OPNAVINST 1752.2B
N135
25 Apr 08

OPNAV INSTRUCTION 1752.2B

From: Chief of Naval Operations

Subj: FAMILY ADVOCACY PROGRAM (FAP)

Ref:
(a) DoD Directive 6400.1 of 23 Aug 04
(b) DoD 6400.1-M-1 of Jul 05
(c) DoD Directive 1030.1 of 13 Apr 04
(d) DoD memo "Domestic Violence and Child Abuse Fatality Reviews" of 12 Feb 04 (NOTAL)
(e) DoD memo "Domestic Abuse Victim Advocate Program" of 17 Feb 05 (NOTAL)
(f) DoD memo "Restricted Reporting Policy for Incidents of Domestic Abuse" of 22 Jan 06 (NOTAL)
(g) DoD memo "Military Protective Orders (MPOs)" of 10 Mar 04 (NOTAL)
(h) DoD memo "Domestic Abuse Response and Intervention Training for Commanding Officers and Senior Enlisted Personnel" of 3 Feb 04 (NOTAL)
(i) DoD memo "Domestic Abuse Training for Chaplains" of 29 Jan 04 (NOTAL)
(j) DoD memo "Domestic Abuse Identification and Training for Health Care Providers" of 6 Feb 04 (NOTAL)
(k) SECNAVINST 1752.3B
(l) MILPERSMAN
(m) SECNAVINST 1920.6C
(n) SECNAVINST 5820.7C
(o) SECNAVINST 5211.5E
(p) SECNAVINST 5430.107
(q) SECNAVINST 5720.42F
(r) BUMEDINST 6320.70
(s) SECNAVINST 1754.7A
(t) OPNAVINST 5800.7
(u) Public Law 101-647, Crime Control Act of 1990
(v) 10 U.S.C. 1058
(w) OPNAVINST 3100.6H
(x) DoD Directive 6025.18-R of January 2003

Encl: (1) Definitions
(2) Initial Reporting Requirements and Command Notification
(3) Guidance Regarding Rights Under Uniform Code of Military Justice (UCMJ), Article 31(b)
(4) Restricted Reporting Policy for Incidents of Domestic Abuse
(5) Family Advocacy Case Review Committee (CRC) Guidelines
(6) Procedures for Review of Case Review Committee (CRC) Decisions
(7) Management of Child Sexual Abuse Cases
(8) Military Protective Orders
(9) Training for Key Responders
(10) Guidance for Overseas and Isolated Areas

1. Purpose. To revise policy, prescribe procedures, and assign responsibility for implementation of the Family Advocacy Program (FAP) within the U.S. Navy. References (a) through (x) apply. This instruction is a complete revision and should be read in its entirety.

2. Scope. This instruction establishes internal Navy policy only and is not intended to, nor does it, create any rights, substantive or procedural, enforceable at law or equity by any victim, witness, suspect, accused or other person in any matter, civil or criminal, and places no limits on the lawful prerogatives of the Navy or its officials.

3. Cancellation. OPNAVINST 1752.2A.

4. Definitions. Terms used in this instruction are defined per enclosure (1). For the purpose of this instruction, child abuse (or child maltreatment) includes both abuse (physical, emotional or sexual) and neglect.

5. Discussion. FAP was established for the purpose of providing a consistent, standardized response to incidents of domestic or child abuse within the Navy. FAP is a line-managed, multi-disciplinary program managed by Commander, Navy Installations Command (CNIC).

6. Policy. This instruction implements policy as outlined in references (a) through (k), and is in consonance with references (l) through (x).

a. Domestic and child abuse has a negative effect upon military readiness, effectiveness, good order and discipline. Accordingly, response to domestic or child abuse is a leadership issue. Commanding Officers (COs) will undertake a continuous effort to reduce and eliminate domestic or child abuse at every level of the command. When suspected domestic or child abuse by a Sailor comes to the attention of the member's CO, they will take prompt action to investigate all allegations in order to hold offenders accountable. Additionally, COs shall undertake measures to prevent further violence to the victim(s) and promote victim safety.

b. The primary goals of FAP are as follows: Prevention, victim safety and support, rehabilitative intervention, command and offender accountability, and responsibility for a consistent and appropriate response per references (a) through (x). Enclosures (1) through (10) provide additional clarification for FAP operating procedures.

c. This instruction provides only internal guidance to protect and assist actual or alleged victims of domestic or child abuse. Military personnel alleged to have committed acts of domestic or child abuse may be subject to prosecution under the UCMJ and/or civilian prosecution and commanders shall take appropriate action under U.S. laws and regulations on all substantiated allegations of domestic or child abuse.

d. The goal of the Department of the Navy (DoN) is to eliminate domestic and child abuse incidents which impact Navy personnel and family members through awareness and prevention education, provision of the safest possible environments, coordinated community response and holding offenders accountable. Ongoing annual General Military Training (GMT) for all Navy personnel will be implemented by Commander, Naval Education Training Command (NETC), to supplement training provided by CNIC and Bureau of Medicine and Surgery (BUMED) which includes subjects listed in enclosure (9) and references (h), (i) and (j).

e. DoN personnel will treat all victims of domestic or child abuse with fairness and respect and ensure timely access to appropriate services, including contact with a victim advocate, health care provider or Fleet and Family Support Center (FFSC) clinician, and/or chaplain.

f. Early intervention can be achieved by encouraging Navy personnel to seek help prior to an incident of domestic or child abuse. At the installation level, members may voluntarily refer themselves to an FFSC clinical counselor or Military Treatment Facility (MTF) Health Care Provider (HCP) for assistance. Self-referral for abuse does not insulate a potential offender from initiation of disciplinary and/or administrative action and does not limit the use of a member's statements in court-martial, non-judicial punishment or administrative separation proceedings.

7. Applicability. Allegations of domestic or child abuse involving the following persons shall be assessed and managed by FAP:

a. Active duty members of the military services (Army, Navy, Air Force and Marine Corps) and their legal family members who are eligible for a military-issued identification card.

b. Reserve component members and their legal family members while on active duty.

c. Non-foreign hire civilian employees of the Department of Defense (DoD) in overseas locations and their legal family members, including personnel who receive military health care on a fee-per-service basis.

d. Former spouses and intimate partners as defined per enclosure (1). Victims of domestic or child abuse occurring under DoD jurisdiction are eligible, regardless of military affiliation, for victim advocacy services on a humanitarian basis.

8. Action. COs will implement and support the FAP through:

a. Prevention. The following elements constitute the prevention component of FAP:

(1) All Navy Sailors will receive awareness and prevention training at all hands/GMT of what constitutes domestic or child abuse, the impact on families of domestic and child abuse, risk avoidance and personal responsibility. Additionally, training should provide personnel with information on available reporting options and the exceptions and limitations of each reporting option. Recurring training shall be integrated into all GMT.

(2) Domestic and child abuse prevention and response training will be incorporated into command-level leadership development (including training for civilian supervisors of military personnel) and professional military education, with content tailored to the level of supervisory responsibility. All training will include, at minimum, the sensitive handling of and reporting procedures for allegations of domestic or child abuse.

(3) Training for deploying units focusing on relationships between deployment and post-deployment reintegration, tailored to address operational stress and other forms of stress which increases the risk of domestic and child abuse.

b. Victim Safety and Support. COs will implement this component of FAP by ensuring:

(1) Immediate and continuous victim response capability is available in all locations and facilitating timely access to appropriate victim services, including medical care, victim advocacy, counseling, criminal investigation, Victim Witness Assistance Program (VWAP) information and chaplain services.

(2) All allegations of domestic or child abuse are promptly reported to FAP.

(3) Victims of domestic or child abuse receive sensitive care and support and are not re-victimized as a result of reporting the incident. Sailors who are involved with domestic or child abuse victims should ensure case-related information is shared only for official purposes with those who have a need to know, unless restrictions for release of information meet criteria, per references (o) and (q).

(4) Victims of domestic abuse are advised of their rights per enclosure (3). They are also informed and encouraged to exercise their options during each phase of the medical, investigative, and legal processes.

(5) All Sailors, family members and civilian personnel are made aware of Navy and civilian resources available to assist victims of domestic and child abuse.

c. Accountability. COs shall ensure:

(1) Swift response to, and when appropriate, prosecution of domestic and child abuse cases.

(2) All allegations of domestic or child abuse are referred, as soon as practicable, to base security or Naval Criminal Investigative Service (NAVCRIMINVSVC) within the guidelines of reference (n) and that allegations of domestic or child abuse are referred to civilian law enforcement agencies, as appropriate, for criminal investigation.

(3) A Military Protective Order (MPO) is implemented per enclosure (8), and the requirements of the Lautenberg Amendment are met, if applicable.

9. Responsibilities

a. Chief of Naval Operations (CNO) (N135) shall establish policy and ensure FAP meets command, Sailor and family member needs.

b. Navy Personnel Command (NAVPERSCOM) (PERS-8) shall:

(1) Coordinate with CNIC on administrative separation cases when domestic or child abuse, or FAP rehab failure are the bases for separation determination.

(2) Ensure Sailors accused of domestic or child abuse are afforded applicable rights under reference (l), articles 1310-302, 1910-142, 1910-144, 1910-162 and reference (m).

(3) Develop minimum standards for overseas screening which would disqualify "at risk" families from transferring to

Outside Continental United States (OCONUS) locations with limited access to FAP resources.

c. CNIC, Navy's FAP manager, is responsible for:

(1) Promulgating written implementation guidance to regional and installation commands for management and implementation of FAP.

(2) Planning for and distributing fiscal, personnel and program resources in coordination with regional commanders.

(3) Ensuring installation FAPs provide a coordinated approach to domestic and child abuse prevention, incorporating medical, legal, investigative, security, chaplain, FFSCs and civilian resources.

(4) Ensuring regional and installation commanders collaborate with, and establish written Memorandum of Understanding (MOU) with local community providers and other military services, as appropriate.

(5) Developing written response protocols ensuring timely access to available victim services and procedures which outline responsibilities of FAP victim advocates and other first responders under CNIC cognizance.

(6) Developing procedures, in coordination with NAVPERSCOM (PERS-83), which clearly outline the process of transferring open FAP cases to ensure a Sailor and or family member can continue to receive treatment during both Permanent Change of Station (PCS) transitions and deployments, to include:

(a) Tracking those deployed (including Individual Augmentees (IA's)) with active FAP cases through the same process as PCS transfers, i.e., the case is either tracked to resolution or transferred to the FAP case manager at the next command.

(b) Coordinating with NAVPERSCOM (PERS-83) to ensure staff fully understands overseas screening which would disqualify "at risk" families from transferring to OCONUS locations.

(7) Coordinating with NETC and other responsible Navy agencies in the development and delivery of prevention and responder training identified in this instruction and enclosure (9).

(8) Establishing, collecting and monitoring a central database for restricted and unrestricted incidents of abuse reported to FAP, as well as analyzing data for required reporting to DoD, per references (a) and (b).

(9) Establishing written procedures to ensure regions/ installations are operating a multi-disciplinary Case Review Committee (CRC) which reviews, makes status determinations with regard to whether or not abuse occurred, and makes recommendations, as appropriate, in cases of domestic or child abuse.

(10) Coordinating with the U.S. Marine Corps (USMC) FAP Manager to ensure compliance with DON fatality review requirements.

(11) Implementing a Headquarters Review Team (HRT) and publicizing procedures regarding the review process and operation of the HRT, per enclosures (5), (6) and (7).

(12) Coordinate with law enforcement to monitor, assess and ensure a management information system which captures the full scope of domestic and child abuse incidents and statistical data with victim and offender demographics.

d. Type commanders shall:

(1) Provide a point of contact to liaison with subordinate commands and CNIC FAP Manager regarding all aspects of Navy FAP implementation.

(2) Ensure unit COs report alleged incidents and inform the installation Family Advocacy Representative (FAR) of all allegations of domestic and child abuse.

(3) Ensure unit COs work closely with the installation FAR to develop and administer all aspects of FAP.

(4) Ensure commands under their cognizance maximize domestic and child abuse victim privacy.

(5) Provide oversight of subordinate commands under their cognizance to facilitate awareness and prevention training, maintain current information on victim resources, and ensure compliance with command FAP requirements.

(6) Ensure commands under their cognizance designate a command representative who will serve as a voting member of the CRC, per enclosure (5).

e. Regional or installation commanders shall:

(1) Ensure the cooperation of an effective FAP which incorporates a coordinated approach between medical, legal, investigative, security, chaplain, FFSC and civilian resources.

(2) Designate a FAR to provide overall clinical management of the FAP and a Family Advocacy Officer (FAO) responsible for administering provisions contained in this instruction and in references (a) through (k); and that Family Advocacy Committees are established at the regional or installation level.

(3) Ensure victims of domestic abuse have access to well-coordinated, highly-responsive FAP victim advocacy services.

(4) Ensure availability of professional counseling for victims and family members and rehabilitative intervention for offenders when indicated.

(5) Establish MOUs with relevant community and military agencies to supplement efforts to implement FAP requirements.

(6) Establish a CRC per enclosure (5).

f. COs shall ensure:

(1) The Navy's FAP prevention policy becomes an integral part of day-to-day personnel management.

(2) Command reporting compliance with this instruction and reference (w) requirements.

(3) Compliance with leadership training requirements, per references (h) through (j) and enclosure (9).

g. Director, NAVCRIMINVSVC shall ensure:

(1) Special agents receive domestic and child abuse responder training as outlined in enclosure (9).

(2) Their field agents liaison with civilian law enforcement agencies (e.g., obtain documents and/or information relative to a case) to facilitate an effective community coordination on all domestic or child abuse cases.

(3) Compliance with DoD fatality notification requirements per references (p) and (w).

(4) Participation on the DoN Fatality Review Team, per reference (d).

(5) Participation on the CNIC FAP HRT.

(6) A special agent participates on local CRCs.

h. Special Assistant for Navy Investigative Matters and Security (CNO) (N09N) will ensure security forces receive initial and periodic refresher first-responder training.

i. Office of the Judge Advocate General (OJAG) shall:

(1) Ensure judge advocates are assigned to participate on installation Family Advocacy Committees (FACs) and CRCs and that Judge Advocates receive initial and periodic refresher first-responder training, per references (a) through (j).

(2) Provide advice, instruction and guidance regarding the legal aspects of domestic and child abuse to those receiving first-responder training.

(3) Provide judge advocate consultation to FAP victim advocates and HCPs regarding the presence or absence of

exceptions under restricted reporting policy for incidents of domestic abuse, per reference (f).

j. NETC, in coordination with the CNIC FAP manager, shall develop, implement and execute the prevention training of this instruction for GMTs, per enclosure (9).

k. Chief, BUMED, shall:

(1) Ensure all HCPs receive initial and periodic refresher training with respect to responding to allegations of domestic and child abuse. As noted in enclosure (9), training is provided in cooperation with the MTF education and training department.

(2) Ensure comprehensive medical management for victims of domestic and child abuse, per reference (r).

(3) Reinforce policy per references (a) through (g), establish guidance and protocols for medical response to incidents of alleged child abuse and to restricted and unrestricted reports of domestic abuse.

(4) Ensure privileged HCP participation in the CRC, ensuring a medical officer chairs the committee.

(5) Provide resources, professional services and technical assistance to support the medical aspects of domestic and child abuse.

(6) Ensure the development of eligibility criteria and procedures for domestic and child abuse client referral for supplemental care.

(7) Ensure participation on the DON Fatality Review Team, per reference (d).

(8) Ensure participation on the FAP HRT.

l. Director of Religious Ministries/Chief of Chaplains of the Navy shall:

(1) Ensure chaplains receive FAP initial and periodic first-responder training, per reference (i) and enclosure (9).

(2) Ensure chaplains provide pastoral and spiritual counseling to individuals and families involved with FAP are well informed about reporting options with respect to domestic abuse and to available support services provided in the Navy and the surrounding community.

10. Data Collection, Reporting, and Forms

a. Incidents of domestic and child abuse shall be reported by the command to the responsible Echelon 2 command using an Operational Report (OPREP)-3 Navy Unit Situation Report or OPREP-3 Navy Blue, as outlined in reference (w).

b. CNIC will coordinate the collection and submission of annual reports to DOD, per references (a) through (d).

c. DD 2873, Military Protective Order, is available at http://www.dtic.mil/whs/directives/infomgt/forms/formsprogram.htm.

d. NAVPERS 1070/613 (Rev. 07-06), Administrative Remarks, is available at https://navalforms.daps.dla.mil/web/public/home.

M. E. Ferguson III

M. E. FERGUSON III
Vice Admiral, U.S. Navy
Deputy Chief of Naval Operations
(Manpower, Personnel, Training
and Education)

Distribution:
Electronic only, via Department of the Navy Issuance Web site:
http://doni.daps.dla.mil

DEFINITIONS

1. Advocacy Services. Services offered to victims of domestic abuse with the goal of increasing victim safety and autonomy. Services will include responding to victim's emergency and ongoing safety concerns and needs, providing information on programs and services available to victims and their children in both civilian and military communities, and providing victims with ongoing support and referrals.

2. Alleged Offender. Any person, who allegedly caused the abuse of a child or spouse, former spouse, intimate partner former intimate partner, or whose act, or failure to act, substantially impaired the health or well-being of the victim.

3. Case Review Committee (CRC). Multi-disciplinary team of professionals responsible for reviewing and determining the status of each incident and monitoring the progress of cases.

4. Child. An unmarried person under 18 years of age eligible for care through a DoD medical treatment program. The term "child" means a biological or adopted child, stepchild, foster child or ward. The term also includes any individual of any age who is incapable of self-support because of a mental or physical incapacity and for whom treatment in a DoD medical treatment program is authorized.

5. Child Maltreatment. The physical or sexual abuse, emotional maltreatment or neglect of a child by a parent, guardian, foster parent or by a caregiver, whether the caregiver is intrafamilial or extrafamilial, under circumstances indicating the child's welfare is harmed or threatened. Such acts by a sibling, other family member or other person shall be deemed to be child maltreatment only when the individual is providing care under express or implied agreement with the parent, guardian or foster parent. The major definitions include:

a. Physical Abuse. Acts such as grabbing, pushing, holding, slapping, choking, punching, kicking, sitting or standing upon, lifting and throwing, burning, immersing in hot liquids or pouring hot liquids upon, hitting with an object (such as a belt or electrical cord), and assaulting with a knife, firearm, or other weapon that may cause bodily injuries. Such injuries might include brain damage or skull fractures,

subdural hemorrhage or hemotoma, bone fractures, dislocations or sprains, internal injury poisoning, burns or scalds, severe cuts, lacerations, bruises or welts. An injury does not have to be visible for physical abuse to have occurred.

b. Sexual Abuse. Sexual activity with a child for the purpose of sexual gratification of the alleged offender or other individual. Such abuse includes child exploitation, molestation, rape, intercourse with a child and sodomy. Actions including, but not limited to: The employment, use, inducement, enticement or coercion of any child to engage in, or having a child assist any other person to engage in, any sexually explicit conduct (or any simulation of such conduct). This also includes internet solicitation, or other sexual activity between the offender or a third party and a child. (This definition is not all inclusive.)

c. Emotional Abuse. Actions including acts or a pattern of acts, omissions or a pattern of omissions, or passive or passive-aggressive inattention to a child's emotional needs resulting in an adverse affect upon the child's psychological well-being. It might also include intentional berating, disparaging or other verbally abusive behavior toward the child, and violent acts which may not cause observable physical injury.

d. Neglect. Actions or omissions by a parent, guardian, or caretaker, which includes, but is not limited to: Deliberate or negligent withholding or deprivation of basic necessities (nourishment, shelter, clothing, and health care), lack of adequate supervision, emotional, or educational neglect, medical neglect and abandonment.

6. Clergy-penitent Relationship. A person has the privilege to refuse to disclose and to prevent another from disclosing a confidential communication by the person to a clergyperson or to a clergyperson's assistant, if such communication was made either as a formal action of religion or as a matter of conscience.

7. Domestic Abuse

a. domestic violence

b. a pattern of behavior resulting in emotional or psychological abuse, economic control, and/or interference with personal liberty when such violence or abuse is directed toward a person of the opposite sex who is:

(1) a current or former spouse;

(2) a person with whom the abuser shares a child in common; or

(3) a current or former intimate partner with whom the abuser shares or has shared a common domicile.

8. Domestic Violence. An offense under the United States Code, the UCMJ or State law which involves the use, attempted use, or threatened use of force or violence against a person of the opposite sex who is, a current or former spouse, a person with whom the abuser shares a child in common, or a current or former intimate partner with whom the abuser shares or has shared a common domicile.

9. Extra-familial Child Abuse. Includes any type of child abuse by strangers or persons in *loco parentis*.

10. Family Advocacy Committee (FAC). A multi-disciplinary body which ensures effective community coordination and response to domestic and child abuse incidents. The FAC generally includes representatives from victim/witness services, family support programs, medical, law enforcement, legal, chaplains, child and youth programs, shelters, installation, operational and tenant commands.

11. Family Advocacy Officer (FAO). A designated official who is responsible for administrative management and effective implementation of the local FAP. An FAO does not decide clinical issues or become involved in intervention plans, but might ensure CRC's meet regularly.

12. Family Advocacy Representative (FAR). A credentialed and privileged provider, who is responsible for implementing and

managing the clinical rehabilitative and intervention aspects of the local FAP.

13. FAP Victim Advocate (VA). A DoD/DoN or military employee, a civilian working under a DoD/DoN contract, or civilian providing services by way of a memorandum of understanding between the installation and a local victim advocacy agency.

The VA role is to provide safety planning services and comprehensive assistance and liaison to and for victims of domestic abuse, and to educate personnel on the installation regarding the most effective responses to domestic abuse on behalf of victims and "at-risk" families.

14. Flag. This term refers to the indicator placed on a member's file in the assignment control system to let detailing personnel know they will require clearance prior to writing PCS orders on an individual. The flagging process is intended to prevent further stress on the Sailor and family members, prevent recurring abuse, and to ensure assignment to a geographic location has adequate services available.

a. Assignment Control Flag. Placed by recommendation of the CRC on domestic and child abuse incidents. This temporary flag is normally removed within 1 year from the date the flag was set.

b. NAVPERSCOM (PERS-8) Control Flag. A flag placed in the personnel data system by NAVPERSCOM (PERS-8) for all suspected child sexual abuse cases. This flag may restrict transfers, reenlistments, advancements and/or promotions until case resolution. A member is notified of these restrictions by NAVPERSCOM via their CO after the case has been reported. The flag is lifted by NAVPERSCOM (PERS-8) at case resolution and if there are no further restrictions.

15. Incest. Sexually explicit activity between a parent or step-parent and a child, a sibling or another relative too closely related to be permitted by applicable law to marry.

16. Incident. A single allegation of one or more acts of domestic or child abuse which occurred in a short period of time. An incident shall usually refer only to one victim, but may include more than one alleged offender.

17. Incident Determination. Possible determinations including:

a. Substantiated. An incident which has been investigated and the preponderance of available information indicate abuse has occurred. This finding indicates available information supports the occurrence of abuse and is of greater weight, or more convincing than the information which indicates the abuse and or neglect did not occur. This may include incidents where abuse is substantiated but the offender is not identified.

b. Unsubstantiated. An alleged incident where available information is insufficient to support the allegation of domestic or child abuse.

(1) Unsubstantiated, Did Not Occur. An incident where the allegation is unsupported. The typical family needs no other family services.

(2) Unsubstantiated, Unresolved. An incident where available information is insufficient to support the allegation of domestic or child abuse. Referral to voluntary family support services may occur.

(3) Unsubstantiated, referred for services. A family is referred for other types of services.

c. Pending. An incident is pending further assessment or investigation. Duration for an incident to be in a "pending" status should not typically exceed 90 days from the first report of abuse or neglect.

18. Juvenile Sex Offender. A person under 18 years of age who has sexually abused or molested another juvenile. Sexual abuse differs from what would be considered age appropriate peer play between children, in that there is an inequality between participants including: presence of exploitation, coercion and control, manipulation, abuse of power or position of authority, age differences, and the sexual behavior itself.

19. Lawyer-Client Privilege. A client has the privilege to refuse to disclose and to prevent any other person from disclosing confidential communications made for the purpose of facilitating the provision of professional legal services to the

client. For example, communications may include those between the client or the client's representative and the lawyer or the lawyer's representative; between the lawyer and the lawyer's representative; by the client or the client's lawyer to a lawyer representing another in a matter of common interest; between representatives of the client or between the client and a representative of the client; or between lawyers representing the client.

20. Major Criminal Offense. An offense punishable under the UCMJ by confinement of a term of more than one year, or similarly framed Federal statutes, State, local or foreign laws or regulations.

21. Major Physical Injury. This includes brain damage, skull fracture, subdural hemorrhage or hematoma, bone fracture, shaken baby syndrome, dislocations, sprain, internal injury, poisoning, burn, scald, severe cut, laceration, bruise, welt, or any combination thereof, which constitutes a substantial risk to the life or well-being of the victim.

22. Rehabilitation/Counseling Failure. An offender who has been determined to have caused domestic or child abuse and thereafter:

a. does not cease their abusive behavior before, during, or after participation in counseling services; or

b. refuses to cooperate or complete counseling programs; or

c. fails to meet the conditions of court orders or probation; or

d. fails to make adequate progress in rehabilitation, education, and counseling as determined by an expert in the rehabilitation, education, and counseling of domestic or child abuse offenders.

23. Stalking. Any person who wrongfully engages in a course of conduct directed at a specific person that would cause a reasonable person to fear death or bodily harm, including sexual assault, to themselves or a member of their immediate family; who has knowledge, or should have knowledge, that the specific person will be placed in reasonable fear of death or bodily

harm, including sexual assault, to themselves or a member of their immediate family; and whose acts induce reasonable fear in the specific person of death or bodily harm, including sexual assault, to themselves or to a member of their immediate family may be prosecuted for stalking under the UCMJ.

24. Victim. A person who alleges abuse or whose welfare is harmed or threatened by acts of omission or commission by another individual or individuals.

INITIAL REPORTING REQUIREMENTS AND COMMAND NOTIFICATION

1. Domestic Abuse. Domestic abuse is the most frequently reported type of family violence in the Navy and frequently co-exists with child abuse. Physical assaults occurring within the family merit the same concern and level of intervention as any physical assault between unrelated persons. As new policy offers "restricted" and "unrestricted" options to victims of domestic abuse, a thorough review of enclosure (4) should be completed and VAs should utilize written guidance released by CNIC.

a. If a domestic abuse report involving physical injury or the use of a dangerous or deadly weapon is received by the installation law enforcement or security department (mandatory reporters), verbal notification will be made to Family Advocacy and the Sailor's command.

b. If a victim of alleged domestic abuse comes to an MTF seeking treatment for injuries related to abuse, the case shall be referred to the VA by the HCP. In the case of major physical injury or indication of a propensity or intent by the alleged offender to inflict major physical injury, the appropriate law enforcement or security department officials shall be notified. The HCP will notify the VA as soon as possible. The VA will ensure victim protection and safety planning, shall assist victims with risk assessment, and assist with accessing shelter or safe housing, as needed.

c. When a victim of alleged domestic abuse comes voluntarily to an FFSC or MTF seeking counseling and there are no current injuries requiring medical attention, and the spouse is responsive, capable of responding to any renewed threat of abuse, and previous injuries are not "major" physical abuse, the provider will assist the alleged victim in making an informed decision for a "restricted" or "unrestricted" report, per enclosure (4).

(1) At a minimum, a risk assessment should be completed, a safety plan should be accomplished, and the VA should be consulted.

(2) If at any time while working with the victim, the HCP comes to believe that the life and or health of the victim

is in imminent danger, the provider is required to report the situation to the VA and appropriate command under consultation with the MTF or installation legal office.

(3) If a victim of domestic abuse comes voluntarily to the FFSC seeking counseling and there are current injuries due to alleged domestic abuse, the victim shall be referred to the MTF for an evaluation.

2. Child Abuse. All DON personnel must report any incident or suspected incident of child abuse occurring on a military installation or involving persons eligible for FAP services to the local FAR. Exceptions are described in paragraph 3. Depending on the outcome of the initial assessment of the report, the FAR will notify the member's command and, consistent with applicable laws, memoranda of understandings, and appropriate state civilian agencies having child protective service (CPS) responsibilities. In cases of major physical injury or an indication of an offender's propensity or intent to inflict major physical injury, the FAR shall also notify appropriate law enforcement/security department staff. For overseas installations, notification will be made per applicable treaties or Status of Forces Agreements (SOFAs). In the absence of FAR, incidents shall be reported directly to the agency having CPS functions and to military law enforcement/security department officials in the case of imminent danger to the child.

a. Child Sexual Abuse (CSA). In addition to the above, incidents or suspected incidents of CSA (incest or extra-familial) must be reported to NAVCRIMINVSVC. Appropriate reports to CNIC and NAVPERSCOM (PERS-8), per reference (k) or higher authority and per the OPREP-3 reporting system (reference (w)) should be made. The FAR must report (within 5 working days) all cases to CNIC. Per references (a) and (b), DoD provides additional guidance.

b. Out-of-home Child Sexual Abuse. In addition to the above, cases of CSA alleged to have occurred in DoD-sanctioned, out-of-home care settings, such as child care or youth centers, schools, recreation programs, or family home care, must be reported immediately to the cognizant installation CO, NAVCRIMINVSVC, FAR, and FAO. Within 24 hours of the initial

report, the command will report by message to CNIC and NAVPERSCOM (PERS-8) as outlined in reference (w).

3. Exceptions to reporting domestic abuse are made for privileged communications between a person and a clergyperson or clergyperson's assistant when such communications are made either as a formal act of religion or as a matter of conscience. A like exception is made for privileged communications to an attorney when the lawyer-client privilege applies. Chaplains are strongly encouraged to recommend to offenders that they voluntarily self-refer to the FAP. Victims should be advised by chaplains and attorneys, as appropriate, regarding available support resources, legal options in military and civilian judicial and administrative proceedings, transitional compensation for abused family members (TRANSCOMP), and other benefits that may be available should the offending servicemember be separated from military service for reason of family violence.

GUIDANCE REGARDING RIGHTS UNDER UNIFORM CODE OF MILITARY JUSTICE (UCMJ), ARTICLE 31(b)

1. The following is provided as guidance based on legal decisions which interpret when UCMJ, article 31(b) warnings must be given. This information is not intended to create any additional rights or expand any existing rights.

2. FAP counselors are not required to provide UCMJ, article 31(b) warnings when interviewing a Sailor for the purpose of diagnosis or treatment. If on the other hand, a FAP or FFSC clinical counselor questions a Sailor for the sole purpose of gathering incriminating statements to advance a criminal investigation (i.e., when there is no medical/clinical reason to ask the question) then the counselor is not acting for the purposes of diagnosis or treatment and should therefore, provide the alleged offender with the attached UCMJ, article 31(b), warning (Suspected Offender's Rights and Acknowledgement/ Statement) prior to questioning the Sailor. If the counselor advises the Sailor of their UCMJ, article 31(b) rights, then the completed statement shall be maintained in the Sailor's FAP file.

3. In those instances in which a counselor either believes a UCMJ, article 31(b) rights warning should be given or is unsure, the counselor should obtain legal advice prior to conducting the interview.

ADMINISTRATIVE REMARKS
NAVPERS 1070/613 (REV. 07-06)
S/N: 0106-LF-132-8700

SHIP OR STATION:

SUBJECT SUSPECTED OFFENDER'S RIGHTS AND ACKNOWLEDGEMENT/ STATEMENT	☐ **PERMANENT** ☐ **TEMPORARY** **AUTHORITY** *(IF PERMANENT)*

INTERVIEWER'S INFORMATION

FULL NAME OF INTERVIEWER
INTERVIEWER'S SSN
BILLET:
DATE AND TIME OF INTERVIEW

RANK/RATE AND BRANCH OF SERVICE:
ORGANIZATION:
LOCATION OF INTERVIEW:

SUSPECTED OFFENDER'S RIGHTS *(PLEASE INITIAL)*

I CERTIFY AND ACKNOWLEGE BY MY SIGNATURE AND INITIALS SET FORTH THAT BEFORE THE INTERVIEWER REQUESTED A STATEMENT FROM ME, THEY WARNED ME THAT:

_____ a. I am suspected of having committed the following Offense(s):

_____ b. I have the right to remain silent; and

_____ c. Any statement I do make may be used as evidence against me in a trial by court-martial

_____ d. I have the right to consult with lawyer counsel prior to any questioning. This lawyer counsel may be a civilian retained by me at my own expense, a military lawyer appointed to act as my counsel without cost to me, or both, and

_____ e. I have the right to have such retained civilian lawyer and/or appointed military lawyer present during this interview

SUSPECTED OFFENDER'S WAIVER OF RIGHTS *(PLEASE INITIAL)*

I further certify and acknowledge that I have read the above statement of my rights and fully understand them, and that,

_____ a. I expressly desire to waive my right to remain silent;

_____ b. I expressly desire to make a statement;

_____ c. I expressly do not desire to consult with either a civilian lawyer retained by me or a military lawyer appointed as my counsel without cost to me prior to any questioning;

_____ d. I expressly do not desire to have such a lawyer present with me during this interview; and

_____ e. This acknowledgement and waiver of rights is made freely and voluntarily by me, and without any promises or threats having been made to me or pressure or coercion of any kind having been used against me.

SIGNATURE OF SUSPECTED OFFENDER	DATE AND TIME
SIGNATURE OF INTERVIEWER	DATE AND TIME
SIGNATURE OF WITNESS	DATE AND TIME

NAME (LAST, FIRST, MIDDLE)	SOCIAL SECURITY NUMBER	BRANCH AND CLASS

FOR OFFICIAL USE ONLY
PRIVACY SENSITIVE

13 ☐

RESTRICTED REPORTING POLICY FOR INCIDENTS OF DOMESTIC ABUSE

1. The Navy is fully committed to ensuring victims of domestic abuse are protected; treated with dignity and respect; and are provided support, advocacy, and care. Assuring privacy and providing options for confidential disclosure are critical to discharging our commitment to fully support victims of domestic abuse. Implementation of confidential reporting requires extensive, in-depth training for Navy personnel and specialized training for commanders, victim advocates, NAVCRIMINVSVC, law enforcement, chaplains, legal staff, and HCPs.

2. For the purpose of this policy, confidentiality or confidential reporting is defined as providing an option for victims of domestic abuse to report incidents of domestic abuse to specified individuals without triggering command notification or investigation of the incident. This option affords a victim access to medical care, counseling, and victim advocacy without initiating the investigative process.

3. Commanders have a responsibility to ensure community safety and due process of law, but they must also recognize the importance of protecting the safety and well-being of victims and family members.

4. Domestic abuse is defined in enclosure (1).

5. While Navy policy prefers personnel to report all suspected incidents of domestic abuse, the requirement for all domestic abuse incidents to be reported can represent a barrier for victims who would not otherwise seek medical and victim services when it requires command or law enforcement notification. Additionally, the Navy also strongly supports effective command awareness and prevention programs and law enforcement and criminal justice activities which will maximize accountability and prosecution of domestic abuse.

6. This policy provides the framework for confidential or restricted reporting for victims of domestic abuse. Restricted reporting is limited to adult victims of domestic abuse who are eligible to receive medical treatment in military facilities. This includes civilians and contractors who are eligible to receive military health care OCONUS on a reimbursable basis. This policy affords adult victims of domestic abuse two options

of reporting referred to as "unrestricted" and "restricted" reporting.

a. Unrestricted Reporting. Domestic abuse victims who want to pursue an official investigation should use the usual reporting procedures (i.e., chain of command, FAP, or law enforcement). A victim advocate will be notified upon receipt of an unrestricted report and will offer the victim advocacy support and information, per references (a) through (c). Additionally, at the victim's discretion and or request, an HCP shall conduct any medical examination or care deemed appropriate. Details regarding the incident will be limited to only those personnel who have a legitimate need to know.

b. Restricted Reporting. Domestic abuse victims who desire restricted reporting must report the abuse to one of the following individuals: a victim advocate, an HCP (both afloat and ashore), or a victim advocate supervisor. In the Navy, FFSC clinical counselors operate as VA supervisors and are considered HCPs. When indicated, a victim under restricted reporting may request a HCP conduct a medical examination for the purposes of collection and preservation of evidence with non-identifying information. For States which require mandatory reporting, specified HCPs are obligated to report the domestic violence to local law enforcement.

7. Victims will acknowledge, in writing, their reporting election and their understanding of the benefits and limitations of restricted or unrestricted reporting. Veteran Affairs will use the Navy Victim Statement of Understanding provided by DoD. In cases where an adult victim elects restricted reporting, the VA and HCP may not disclose covered communications either to the victim's or alleged offender's commander or to law enforcement, except as outlined below. Consistent with current policy, victims may also report domestic abuse to a chaplain and be afforded privileged communication, which is not altered or affected by the restricted reporting requirements.

8. Exceptions to confidential restricted reporting where a victim elects restricted reporting, could be suspended for one of the following reasons:

a. When disclosure to named individuals is authorized by the victim in writing.

b. When in the judgment of the HCP, VA or VA supervisor, the disclosure to command officials or law enforcement is necessary to prevent or lessen a serious and imminent threat to the health or safety of the victim or another person.

c. When, as a result of the victim's disclosure, the VA or HCP has reasonable belief child abuse has also occurred. Disclosure will be to FAP and any other agencies authorized by law to receive child abuse reports. However, disclosure will be limited only to information related to the child abuse.

d. When disclosure by an HCP to disability retirement boards and officials is required for fitness for duty or disability retirement determinations, limited to only which information is necessary to process the disability retirement determination.

e. When disclosure is required for the supervision of direct victim treatment or services.

f. When a military, federal, or state judge issues a subpoena for the covered communication to be presented to a military or civilian court of competent jurisdiction or to other officials or entities.

g. When disclosure is required by federal or state statute or applicable U.S. international agreement.

9. HCP providers may also convey to the victim's commander, if applicable, any possible adverse duty impact related to an active duty victim's medical condition and prognosis, per reference (x). However, such circumstances do not warrant an exception to policy whereby details of the domestic abuse are considered covered communication and may not be disclosed. Confidentiality of medical information will be maintained.

10. If the VA or HCP believes disclosure is warranted or required pursuant to one of the exceptions listed above, the VA or HCP shall first consult with their supervisor and/or servicing legal office prior to disclosure. When there is uncertainty or disagreement on whether an exception applies, the matter will be brought to the attention of the installation commander for decision.

11. The VA or HCP must make every reasonable effort to provide the affected victim advance notice of the intention to disclose a covered communication. This advance notice will include a description of the information to be disclosed, the basis for disclosure, and the individual, group or agency to which it will be disclosed. The disclosure will be limited to information necessary to satisfy the purpose of the exception. Further disclosure will not be made unless the domestic abuse victim authorizes disclosure in writing.

12. When a victim discloses domestic abuse to someone other than a VA, HCP or VA supervisor, disclosure may result in command notification and investigation of the allegations. When information regarding a domestic abuse incident is disclosed to the command or the FAP from a source independent of the restricted reporting avenues, law enforcement shall be notified and will conduct an investigation when appropriate. Commanders acquiring information under these circumstances about a domestic abuse incident shall immediately notify law enforcement and FAP personnel.

13. Improper disclosure of covered communications, improper release of medical information, and other violations of this policy are prohibited and may result in discipline under the UCMJ, loss of privileges, and or other adverse personnel or administrative actions.

14. This policy does not create any actionable rights for the alleged offender or the victim, nor does it constitute a grant of immunity for any actionable conduct by offender or victim. Covered communications which have been disclosed may be used in disciplinary proceedings against the offender or victim, even if the communication was improperly disclosed.

15. DoD Navy leadership recognizes the potential impact of restricted reporting on investigations and the ability of COs to hold perpetrators accountable. Such risks were carefully considered and were outweighed by the overall interest of providing domestic abuse victims access to medical care and support.

FAMILY ADVOCACY CASE REVIEW COMMITTEE (CRC) GUIDELINES

1. Purpose. To establish the functions of CRC. Several levels of decision-making occur in most substantiation discussions and follow-up case planning. Cases involving crimes also being investigated by NAVCRIMINVSVC, the CRC and NAVCRIMINVSVC must coordinated so neither the criminal investigation nor FAP intervention and rehabilitation efforts are prejudiced or compromised.

2. Membership/Responsibilities

a. The CRC should normally be limited to not more than eight permanent members, with consultants for specific cases attending, as appropriate. Permanent members shall be appointed in writing by the installation CO in collaboration with the CO responsible for the permanent member. In order to conduct a CRC meeting, at a minimum, the following permanent members or their alternates must be present:

(1) Line Officer (O4 or above), who is not the FAO and who is not senior in the chain of command to any other permanent member of the CRC,

(2) MTF Physician,

(3) FAR,

(4) Psychologist, psychiatrist, or clinically privileged mental health care provider working in an MTF or in the FFSC,

(5) Staff judge advocate,

(6) Law enforcement representative, and

(7) NAVCRIMINVSVC Agent (non-voting member).

b. Consultants to the CRC may include MTF clinical counselors who are eligible for independent provider status, FFSC clinicians, child protective worker, shelter representative, pediatrician, pediatric or emergency room nurse, community health nurse, security officer, drug and alcohol counselor, base chaplain, child and youth program representative and DoD Dependent School (DODDS) counselor or nurse.

c. Consultants are not permanent members and do not participate in incident status decisions. Appropriate action must be taken to ensure privacy rights are maintained when other agencies outside of DoD attend these meetings.

d. The FAR (or designee) will notify the alleged offender in writing via their CO at least seven working days in advance of the CRC's review of the alleged offender's case. Notification will inform the alleged offender that they have the right to present a written statement, present other relevant written statements, and to have a command representative attend the CRC meeting. In circumstances where there is a pending or ongoing criminal investigation, the FAR should notify NAVCRIMINVSVC to determine whether UCMJ, Article 31(b) rights should be administered as any unwarned statement, not made pursuant to a privilege, could taint further NAVCRIMINVSVC investigation. The case manager will inform the alleged victim of the same rights and under the same guidance as above.

3. Training. New CRC members must receive a minimum of 16 hours of FAP focused training on the topic of either domestic or child abuse, as applicable, within three months of their appointment to the CRC. All members of the CRC will obtain a minimum of 24 hours of applicable training annually.

4. Incident Determinations Made by the CRC

a. The first CRC determination is whether abuse occurred. This is essentially a judgment which domestic or child abuse has happened in a non-accidental fashion. Necessary input is required by medical, social service, and law enforcement professionals who have assessed or examined the victim(s) and the circumstances of the abuse. Medical records, police reports, and other relevant documentation shall be reviewed. The CRC must make all reasonable attempts to obtain all relevant information.

b. The second CRC determination is to decide the identity of the offender. The decision as to who committed the abuse is a combination of clinical and legal information. Input is necessary from the victim, family members, witnesses, alleged offender, NAVCRIMINVSVC or police reports, command, CPS, and Family Court (when rulings are available), as applicable. When the victim and alleged offender have been interviewed together in either domestic or child abuse cases, their statements should be considered, however, they must be assessed for reliability (e.g., victim's fear of alleged offender).

c. The third CRC determination is to decide what type of intervention is needed in the case. The CRC should address what treatment or counseling is needed for offenders, victims and family members; what other assessment is needed; what other support services are needed; and what actions may further diminish risk factors. A risk assessment shall be made available to the CRC to assess the level of severity and risk of imminent and future harm, the immediacy and intensity of response required, degree of safety planning needed, and interventions recommended. Defined risk factors should be the basis for determining the specific type of interventions.

d. The input of CRC members and/or consultants need not be given equal weight during the various phases of CRC discussions. CRC permanent members may speak authoritatively concerning areas in which they are subject matter experts (i.e., a pediatrician concerning medical examinations of children, or a psychologist concerning a mental status examination, or base security person who interviewed the victim of abuse, etc). Command representatives should be provided relevant information and should participate in all discussions, especially if they have relevant information to the incident (e.g., member was restricted to the ship, the night the abuse allegedly occurred).

e. The CRC will create a written record of each reviewed incident. The record will contain the names of the alleged offender and victim(s), the disciplines present at the CRC, how each discipline voted (to include dissenting opinions), what information was considered, the basis for the CRC's findings (e.g., the allegations of abuse were substantiated based on the member's admission and/or the victim's statement), and CRC recommendations. This record material will be forwarded to CNIC

should the member, victim, or command request review of the CRC decision.

5. Incident Status Determination

a. Before making a status determination, the CRC shall ensure that at least seven working days prior to the CRC meeting, they notify the alleged offender and their command of the general nature of the allegations. Notification will inform the alleged offender that they may prepare a written statement which will be presented by the case manager for consideration, and the CO or command representative shall be present at the CRC meeting. The case manager will present a synopsis of all available information. The alleged offender will be provided written information concerning the FAP, the process of handling a domestic or child abuse incident, and the possible consequences. Options for the alleged offender and family shall also be clearly explained.

b. Incident status determinations are to either substantiated or unsubstantiated, and if substantiated, identify the offender. In some cases (e.g., a pre-verbal child), the identity of the offender cannot be determined. In such cases, abuse may be substantiated, while the offender remains unknown. Definition of "incident determinations" is in enclosure (1).

(1) The incident status determination should be reached after discussion and careful consideration of all available information. The fact an alleged offender was not brought to trial, was not found guilty, or was convicted of a lesser charge, may not in and of itself be reason to judge an incident as "unsubstantiated." The CRC may consider prior decisions by the local CPS, despite that they are not bound by that determination. In these cases, the CRC must obtain all reasonably available information and make its own independent decision.

(2) The incident status determination should be made by a simple majority of the permanent voting CRC members. Information from others with personal knowledge of the alleged offender and family should be considered. Dissenting opinions should be reflected in the minutes of the meetings.

(3) When determining the offender in domestic abuse cases, the term "mutual abuse" will not be used. Even though both parties may have used violence in a given incident, a primary aggressor as defined by law enforcement, can usually be identified. CRC's should review all relevant factors such as the pattern of ongoing abusive behavior, motivation for the abuse including self-defense, and the balance of power in the relationship, prior to making a final decision. If the CRC determines, after evaluating these factors, both parties are violent, then two offenders and two victims should be identified.

6. Forms and Notification. The present DoD central registry, managed by Defense Management Data Center (DMDC), has information on:

a. Unsubstantiated reports not linked to an identifiable individual.

b. Information on substantiated reports linked to identifiable active duty and retired servicemembers, DoD civilians, contractors, and their family members. Navy collects FAP case incident numbers by means of the Fleet and Family Support Management Information System (FFSMIS).

(1) For substantiated incidents, the Navy Sailor/sponsor should be placed on administrative hold (flagged by NAVPERSCOM (PERS 48)) to prevent Permanent Change of Station (PCS) orders for severe domestic or child abuse, a series of moderate domestic or child abuse incidents which indicate a pattern of abuse, and for all juvenile family member sex offenders. Flagging is defined at enclosure (1).

(2) If a spouse or child fatality has occurred, the CRC will review the incident to determine if the death was a result of abuse. The incident will be reported as outlined in reference (b). Surviving family members (especially young children) should be assessed and considered "at risk." CRC review of the incident may not interfere with any NAVCRIMINVSVC investigation.

7. Recommendations for Intervention

a. The CRC will address victim safety issues through a risk assessment process as a primary concern and recommend appropriate interventions to the responsible CO throughout the life of the case.

b. The CRC will address assessment of the alleged offender for rehabilitation potential, to include stopping the abusive behavior and other immediate interventions for the alleged offender.

c. The member's CO shall be advised, in writing, of the incident status and written recommendations concerning the nature of command action needed to protect the victim and family. This may include continuation of an MPO or extension of removal of the alleged offender from the home. In addition, the command shall be provided a written report of the CRC decision. This report will include the names of the alleged offender and alleged victim(s); disciplines and positions of CRC members present; a synopsis of the information/documents considered in the decision making process; and findings and recommendations of the CRC.

d. Recommendations to the responsible CO by the CRC should address both immediate and follow-on actions to include:

(1) No need for further intervention (i.e., case closed, monitored).

(2) Recommendations for counseling, rehabilitation and services available for the Sailor.

(3) Other actions such as PCS move, early return of family to the Continental United States (CONUS), evaluation or assessment required, but not locally available, possible transportation of the member and or family to another MTF, early return of member to CONUS, or recommendation for the member to rotate to shore duty or CONUS to participate in a recommended treatment program.

(4) Administrative actions as needed, such as an MPO, removal of a child victim from the home, debarment of the offender from base, revocation of overseas screening, or early

return of family members.

(5) Referral of member to other services (e.g., Drug and Alcohol Counseling, mental health).

(6) Member not eligible for program.

(7) Member's potential for successful completion of counseling, education, and rehabilitation programs.

e. If the recommendation is for early return of victim and or family to CONUS from overseas or an isolated site, all decisions must be documented and mailed to the receiving FAR and FFSC. Written documentation is essential for State (CONUS) assumption of jurisdiction.

8. Incidents of alleged child abuse occurring in DoD sanctioned child or youth program activities or family child care shall be reviewed by the CRC and recommendations provided to the CO and child and youth program director.

9. Decision: When Is The Case Closed? The criteria for closing a case should be determined as part of risk assessment and must be addressed in the rehabilitation plan. A case is usually closed when identified risk factors are reduced or eliminated, rehabilitation, education, and counseling is completed; the offender is determined to be a rehabilitation failure; or the offender is no longer available.

10. All CRC determinations and recommendations, other than tracking cases and flagging records, are forwarded to the responsible CO. All administrative and/or disciplinary actions are taken by the responsible CO.

PROCEDURES FOR REVIEW OF CASE REVIEW COMMITTEE (CRC) DECISIONS

1. General. CRC decisions are considered final except as outlined in the formal review process below. CRC decisions to substantiate or unsubstantiate allegations for each incident involving child sexual abuse are reviewed per enclosure (9). As outlined below, a CRC decision to substantiate or unsubstantiate allegations may be reviewed by the HRT. The HRT will review all available relevant information and make a recommendation to CNIC as to whether the CRC decision should be upheld or overturned. The review will not consider the propriety of any actions taken by a CO as a result of the CRC's findings. A Sailor who considers themselves wronged by the actions of their CO may seek redress through other means, to include requesting mast procedures or filing a complaint under UCMJ, article 138.

2. Review Process Procedures

a. After the CRC has made a determination whether the allegations are substantiated or unsubstantiated, the FAR will forward a report of the CRC's decision to the alleged military offender and/or victim's CO. COs will take appropriate steps to ensure the CRC determination is forwarded to alleged military and civilian offenders and victims. The report shall contain the following information:

(1) names of the parties involved in the incident,

(2) CRC decision and recommendation(s),

(3) positions/disciplines who participated in the decision and recommendation process,

(4) synopsis of the information/documents considered and the information relied upon, and

(5) a Statement of Rights letter for the alleged offender or victim, as appropriate.

b. Upon receipt of the CRC report and recommendations, the alleged offender, victim or sponsor's CO or their designee will:

(1) review and discuss the case summary with the alleged offender, victim, or sponsor, as appropriate. The CO will exercise discretion as to whether the intended response to the CRC's recommendation is to be implemented.

(2) Have the alleged offender, victim, or sponsor review and complete the Statement of Rights which outlines their right to request review.

c. An alleged offender, victim (military or civilian), or the CO may request review of the local CRC determination of substantiated or unsubstantiated allegations of abuse. The installation CRC must have unsubstantiated abuse in the incident against the alleged victim. If the victim is a minor child, their non-offending parent or other responsible adult may submit a request for review.

d. All requests for review must be in writing, submitted within 30 days of receipt of the CRC's formal report, and based on one or more of the following grounds:

(1) Previously undiscovered information. Petitioner must demonstrate that:

(a) information was discovered within 30 days of the date the petitioner was notified of the CRC's decision,

(b) new information is not such that it would have been discovered by the petitioner at the time of CRC case disposition in the exercise of due diligence, and

(c) newly discovered information, if considered by the installation CRC, would probably produce a substantially more favorable result for the petitioner.

(2) Inappropriate actions by the installation CRC. The petitioner must demonstrate inappropriate action substantially influenced the CRC decision. Examples that may warrant granting a request for review are:

(a) confessed or proved perjury in statements or forgery of documentary evidence which substantially influenced the CRC decision.

(b) Willful concealment of information by a CRC member which was favorable to the alleged offender/victim and petitioner can demonstrate a substantial likelihood knowledge of the information may have resulted in a different finding by the CRC.

(3) Procedural errors by the CRC. If a voting member was absent and such absence negatively impacted a finding which the abuse was or was not substantiated. CRC voting members include a judge advocate, physician, psychologist/psychiatrist or clinically privileged mental health care provider, a line officer, and the FAR. The petitioner must demonstrate a substantial likelihood the voting member's presence would have changed the outcome of the installation CRC case disposition. CRC attendance by a designated representative of the absent voting member will negate HRT review on this ground.

(4) Not guilty/guilty finding after a military or civilian full trial on the merits. The alleged offender/victim must demonstrate new or additional evidence was considered during the trial. The following limitations apply:

(a) the charge(s) decided upon during the trial on the merits must be directly related to the incident which formed the basis of substantiated/unsubstantiated abuse findings at the installation CRC case disposition, and;

(b) the petitioner demonstrates a substantial likelihood that the evidence in question, if considered by the installation CRC may have produced a substantially more favorable result for the petitioner, or the evidence in question directly impacted upon the finding of not guilty/guilty.

(5) The decision of the CRC was based upon plain legal or factual error. An examination of the record establishes the decision was based upon a plain error. An example of plain legal error is refusal to substantiate the allegations solely because the criminal statute of limitations has lapsed. An example of plain factual error is the alleged offender was in confinement on the date the alleged assault took place at the victim's home.

3. Format of Request for Review

a. Requests must be made in writing, state the basis for the request for review, and made within 30 days of receipt of the report of the local CRC's decision. Alleged offenders and victims may file a formal written request for review to either the installation CRC or the HRT. There is no requirement to request installation CRC reconsideration before forwarding a request to the HRT, however, the request shall be forwarded via the responsible CO. The responsible CO will request input from the CRC, prior to forwarding the request to the HRT. The CRC will forward their input within 15 working days of the CO's request.

b. The CRC must reconsider any case meeting the criteria above within 30 days of receipt of a request. The FAR shall provide a final opinion to the requester, which follows the same format as the report of the CRC decision. If the requester then elects to file a request for review with the HRT, the FAR will forward the written report of the CRC decision, and copies of all documents relied upon to make that decision to CNIC Millington Detachment for review and disposition.

c. Submission by FAP to the Navy Central Registry of Child and Spouse Abuse incidents shall not be delayed pending review by the installation CRC or the HRT, although the record may be later amended pending changes to the CRC status determination.

4. HRT Review. A formal written request for HRT to review a local CRC decision must be forwarded to CNIC within 30 days of receipt of the report of the CRC decision or within 30 days of receipt of the CRC's reconsideration decision. If the basis for the request is a not guilty/guilty finding, after a full trial on the merits, the request must be submitted within 30 days of the trial's conclusion. Time between a formal request for reconsideration by the installation CRC and the CRC's decision on such a request will not be counted for the purposes of this period.

5. HRT. The HRT is the reviewing authority for all FAP cases where the Sailor, victim or command requests review of the local CRC's substantiation decision per enclosure (9). In child sexual abuse cases, the HRT serves as an advisory group which

presents clinical recommendations to CNIC and NAVPERSCOM (PERS-8). CNIC will appoint the chair of the HRT. The HRT will be made up of representatives of various disciplines using the prescribed membership of local CRC's as a model. At a minimum, a law enforcement or NAVCRIMINVSVC agent, legal officer, psychologist, psychiatrist or clinically privileged health care provider, pediatrician, social worker familiar with the case, and representative from NAVPERSCOM (PERS-8) will be present at each review.

a. The HRT will consider all cases forwarded by either NAVPERSCOM (PERS-8) or CNIC, or under the review procedures outlined in enclosure (9). The HRT shall obtain all relevant information, including any information the alleged victim or alleged offender wishes to provide. All permanent members will vote on each case.

b. A written report of each case reviewed will be forwarded to CNIC which includes a summary and analysis of the facts of the case, the names of members who were present, the HRT's recommendation, and a detailed explanation of the recommendation. If members dissent from the majority decision, the dissent and the reason for it will be stated in the report. Results of HRT meetings will not be final until CNIC reviews and authorizes release. Decisions of the HRT are final and not grievable.

6. Statement of Rights are attached at this enclosure.

STATEMENT OF RIGHTS

1. The following persons may request review of the CRC's determination to substantiate/unsubstantiate allegations of abuse:

a. any alleged offender when the CRC has substantiated allegations of abuse.

b. Alleged victim (military or civilian) when the installation CRC has unsubstantiated abuse in an incident in which the alleged victim was directly involved. If the victim is a minor child, their non-offending parent or other responsible adult may submit a request for review.

c. CO of the alleged offender or victim, the CO of the sponsor of the alleged offender or victim, may request the installation CRC reconsider its decision in an individual case.

2. If you are one of the individuals outlined above; you may submit a written request for review based on the presence of one or more of the following grounds for review:

a. Previously undisclosed information. You must demonstrate that:

(1) the information was discovered within 30 days of the date you were notified of the report of the CRC's decision.

(2) The new information is not such that it would have been discovered by you at the time of CRC case disposition in the exercise of due diligence; and

(3) the newly discovered information, if considered by the installation CRC, would probably produce a substantially more favorable result for you.

b. Inappropriate actions by the installation CRC. You must demonstrate inappropriate actions substantially influenced the CRC. Examples of fraud on the installation CRC which may warrant granting of review are:

(1) Confessed or proved perjury in statements or forgery of documentary evidence which substantially influenced the CRC.

(2) Willful concealment of information by a CRC member which was favorable to the alleged offender/victim and you can demonstrate a substantial likelihood knowledge of the information may have resulted in a different finding by the CRC.

c. Procedural errors by the CRC. If a voting member was absent and such absence negatively impacted upon a finding that the abuse was or was not substantiated. Identified voting members are the judge advocate, the physician, the psychologist, psychiatrist or clinically privileged mental HCP, the line officer, the command representative, and the FAR. You must demonstrate a substantial likelihood the voting member's presence may have changed the outcome of the installation CRC case disposition. CRC attendance by a designated representative of the absent voting member will negate review on this ground.

d. Not guilty/guilty finding after a full trial on the merits. You must demonstrate new or additional evidence was considered during the trial. The following limitations apply:

(1) The charge(s) decided upon during the trial on the merits must be directly related to the incident which formed the basis of substantiated/unsubstantiated abuse findings at the installation CRC case disposition, and;

(2) You demonstrate a substantial likelihood the evidence in question, if considered by the installation CRC, may have produced a substantially more favorable result for alleged offender/victim, or the evidence directly impacted upon the finding of not guilty/guilty.

e. Decision of the CRC was based on plain legal or factual error. A review of the record establishes the decision was based on plain error. An example of plain legal error is refusal to substantiate the allegations because the criminal statute of limitations has lapsed. An example of plain factual error is the alleged offender was in confinement on the date the alleged assault took place at the victim's home.

3. Written requests for review should be submitted via your CO or your sponsor's CO to either the installation CRC or CNIC Millington Detachment, Building 768, 5720 Integrity Drive, Millington, TN 30055-6610. Requests must be made within 30 days from the date of this form (signature below). If your request

is denied by the CRC, you have an additional 30 days from receipt of the CRC reconsideration to request review by the CNIC Detachment HRT. However, requests for review will not be granted unless you are one of the individuals listed above, your request is based upon one of the grounds set forth above, and your request is based upon one of the grounds set forth in paragraph 2.

ADMINISTRATIVE REMARKS
NAVPERS 1070/613 (REV. 07-06)
S/N: 0106-LF-132-8700

SHIP OR STATION:

SUBJECT	☐ PERMANENT ☐ TEMPORARY*
RECONSIDERATION/REVIEW OF CASE REVIEW COMMITTEE (CRC)	AUTHORITY *(IF PERMANENT)*

I HAVE READ AND UNDERSTAND THE RIGHTS OF OPNAVINST 1752.2B ENCLOSURE (6).

_____ I DO/DO NOT ELECT TO REQUEST RECONSIDERATION BY THE CRC OF THEIR DECISION TO SUBSTANTIATE/UNSUBSTANTIATE THE ALLEGATIONS IN MY CASE

_____ I DO/DO NOT ELECT TO REQUEST REVIEW OF THE CRC DECISION BY THE HRT

SIGNATURE OF COMMAND REPRESENTATIVE

SIGNATURE OF ALLEGED OFFENDER/VICTIM

DATE OF RECEIPT BY ALLEGED OFFENDER, VICTIM OR COMMAND

NAME (LAST, FIRST, MIDDLE)	SOCIAL SECURITY NUMBER	BRANCH AND CLASS

FOR OFFICIAL USE ONLY
PRIVACY SENSITIVE

13

MANAGEMENT OF CHILD SEXUAL ABUSE CASES

1. In cases involving allegations against active duty military of child sexual abuse, commands will promptly notify NAVCRIMINVSVC, CNIC, NAVPERSCOM (PERS-8), and the local FAR. Notification to NAVPERSCOM (PERS-8) shall state the substance of the allegation(s), current status of the alleged offender, and any pending disposition of the incident. If a decision as to appropriate disciplinary action is not made within 90 days of the allegation, the command will send a status report to NAVPERSCOM (PERS-8). Status reports will continue every 14 days until resolution of the case.

a. Upon receipt of notification, NAVPERSCOM (PERS-8) will temporarily flag the member's record to preclude transfer, reenlistment, or promotion of the member pending resolution of the case.

b. NAVPERSCOM (PERS-8) and CNIC will share primary control over the monitoring, evaluation, and disposition of the case, including communications with the parent command. CNIC will intake information, maintain informational files, and provides consultation on clinical and safety issues. NAVPERSCOM (PERS-8) will provide oversight and management of the case.

c. NAVPERSCOM (PERS-8) will receive information on these cases and promptly notify the suspected offender via their CO of the allegation and possible outcomes if the allegation is substantiated. Notification will be sent within 10 days of receipt of the allegation and shall address the following:

(1) The requirement to take prompt appropriate disciplinary action to hold the member accountable for their actions, and plan for the safety of family members.

(2) NAVPERSCOM (PERS-8) temporary flagging procedures and the circumstances under which the flag will be removed.

(3) The member's inability to reenlist, transfer out of the immediate area, or be advanced/promoted pending resolution of the case.

(4) Unless the member has been acquitted at a criminal proceeding, NAVPERSCOM (PERS-8) will review the case and direct

mandatory administrative separation processing for substantiated allegations.

(5) If the incident against the Sailor is substantiated for child sexual abuse, the CRC information will be forwarded to CNIC and the Navy Central Registry.

(6) The functions of the local CRC and the importance of the Sailor's, victim's (or adult acting on behalf of the child victim), and the command's right to communicate about the incident. Decision making by the CRC is of primary importance.

(7) NAVPERSCOM (PERS-8) will review each case and must be kept informed of the status of the case, including the disposition of any disciplinary action and whether the allegations are substantiated or unsubstantiated by the CRC.

d. COs are responsible for taking steps to ensure victim safety, including reviewing the CRC's recommendations in regard to safety planning and the issuing of a MPO, if appropriate. Victim(s) and other family members will be provided intervention options by FAP personnel.

e. Suspected offenders may not be interviewed by FAP personnel without the express consent of NAVCRIMINVSVC and prior consultation with the member's CO. The local CRC will review the allegations and inform the member's command and the victim (or an adult acting on behalf of a child victim) of CRC findings and recommendations. The member may receive interim rehabilitation, education, and counseling, however, no long-term services will be provided to the suspected offender without the express consent of NAVPERSCOM (PERS-8) or their designee.

2. Substantiated Allegations. In all cases in which the allegations are substantiated, the member will be held accountable, as appropriate, and victim safety issues will be fully addressed. If disciplinary proceedings are not initiated by the command, NAVPERSCOM (PERS-8) will review the case and direct administrative processing. Administrative processing is mandatory if the case is substantiated for child sexual abuse.

3. Unsubstantiated Allegations. When a CRC determines allegations of incest and/or extra-familial child sexual abuse

are unsubstantiated, normally the case will be closed and the temporary flag will be removed from the Sailor 's record. If either NAVPERSCOM (PERS-8) or CNIC determines the local CRC reached an incorrect decision and the case should be substantiated, then either NAVPERSCOM (PERS-8) or CNIC should refer the case to the Navy HRT for a clinical review. The CRC decision may not be incorrect when it considers all available relevant information, even though other reviewers (i.e., HRT) may disagree with its conclusions.

MILITARY PROTECTIVE ORDERS (MPO)

1. It is DoN policy every appropriate effort will be made to protect victims of abuse from further harm. COs shall issue a MPO when necessary to safeguard victims, quell disturbances, and maintain good order and discipline while victims have time to pursue protection orders through civilian courts or support existing civilian orders of protection.

2. Per reference (g), DD 2873, Military Protective Order of July 2004 will be used to issue an MPO. COs will provide a copy of signed MPOs per the distribution as noted at the end of DD 2873.

3. MPOs are aimed at stabilizing the situation and providing additional time for investigation, while taking into account any hardship which may be imposed on both victims and alleged offenders.

4. MPOs are administrative rather than punitive in nature, and their imposition does not preclude disciplinary action under the UCMJ. Care should be taken in preparing the terms of the MPO to tailor them to the specific facts surrounding the case. Avoid overly harsh provisions which could be construed as punitive or as a form of pre-trial restriction.

5. MPOs shall relate to matters involving the alleged abuse and may include, but are not limited to:

a. Direction to stay away from designated person(s).

b. Direction to stay out of and away from designated areas or places, i.e., military housing, the family home, schools, place of employment and day care centers.

c. Direction to leave a public place if the victim and offender find themselves in the same location or facility (normally the military person is required to leave).

d. Direction to refrain from contacting, harassing, stalking, or touching certain named persons. This can include restrictions of phone conversations, third party communications, and orders to remain outside a geographical location.

e. Direction to do or refrain from doing certain activities pending further direction.

f. Direction to provide adequate financial support for family members per pertinent regulations.

g. Explanation violation of the MPO or an applicable civilian protection order shall constitute a violation of the UCMJ, article 90.

6. Directives to civilians must necessarily be limited to orders commensurate with the CO's authority to maintain security and to control the activities of employees, residents, and guests on naval installations. Available options include orders barring civilians from the installation, employer directives, and housing area directives. Correspondingly, orders may be given to civilians aimed at assuring their safety.

7. Orders to military persons are preferred. An MPO is designed to control a situation in order to protect the safety of the victim, not to punish the Sailor. Commanding Officers orders to civilians are less manageable and are difficult to enforce.

8. MPOs shall be in writing and their receipt recorded in order to ensure enforceability if violated. Verbal orders given to control an immediate situation shall be reduced to writing and acknowledged by the member. Prior to issuing an MPO, commands should consult a judge advocate.

TRAINING FOR KEY RESPONDERS

1. Training is a key component of the FAP. It is the responsibility of CNIC (the Navy FAP manager), NETC, Commander, U.S. Fleet Forces Command (CFFC), Law Enforcement, OJAG, Navy Chaplains, and BUMED to coordinate closely on FAP training. References (h), (i), and (j) outline minimum training topics. Each responder agency is responsible to ensure training is offered in a timely fashion for "key responders".

2. All FAP training shall have a multi-disciplinary focus and the following specific requirements apply:

a. CNIC shall ensure regular and ongoing training for the following:

(1) Members of CRCs and personnel who participate in the management of domestic and child abuse cases. Training shall include the dynamics of child and spouse abuse; case management procedures for child sexual abuse cases; offender-related issues; victim needs and safety issues; rehabilitation options; legal and administrative options; complex/multiple victim case issues; and the multi-disciplinary team approach.

(2) FAOs and FARs will ensure training includes topics toaddress underlying causes, patterns, and dynamics of domestic and child abuse; risk assessment; Navy policy and procedures; resource planning; staffing issues; program management and oversight; reporting procedures; prevention and training strategies; and planning for a coordinated community approach to family violence.

b. OJAG shall ensure judge advocates receive regular and ongoing training to include interdisciplinary issues and program specific challenges facing judge advocates whose practice includes family advocacy issues. Intent is keep judge advocates up-to-date on current legal issues as well as recent developments in the disciplines of medicine, victim advocacy, and social work as these relate to the attendee's family advocacy duties. This interdisciplinary training is intended to be in addition to prosecution or defense related legal courses or seminars offered by commercial or professional organizations.

c. BUMED shall ensure MTFs establish specific crisis intervention and referral protocols for cases of domestic and child abuse. Personnel in emergency and ambulatory care units shall be trained to follow protocols which will include underlying causes, patterns and dynamics of abuse; screening procedures for domestic and child abuse; sensitive and protective patient interviewing; military and civilian reporting requirements; proper collection and transfer of evidence; referral and/or provision of victim advocacy services; provision of basic family violence information; safety planning; and specialized family violence discharge planning.

d. NAVCRIMINSVSVC and law enforcement officials shall establish and follow clear and consistent guidelines for the investigation, collection of evidence, documentation, and reporting of domestic and child abuse incidents. Law enforcement personnel, including base security police and NAVCRIMINSVC special agents shall participate in regular training which includes the underlying causes, patterns, and dynamics of child and spouse abuse; risk factors; sensitive victim interviewing; basic community information and referral; safety planning; and appropriate law enforcement/investigatory responses.

e. The Chief of Chaplains of the Navy shall ensure the provision of regular ongoing training for chaplains as outlined in reference (i). Such training shall include underlying causes, patterns, and dynamics of domestic and child abuse; military and civilian reporting requirements, clerical privilege and its limits; safety planning for victims; community referral information; and appropriate pastoral care for families where domestic and/or child and abuse is occurring.

f. NETC, Center for Professional Development (CPD) will ensure leadership training and GMT at all levels of Navy personnel includes awareness and prevention of domestic and child abuse.

g. Installation COs and FAOs, in coordination with the MTF CO, shall ensure members of the CRC receive training as described in references (h) through (j).

h. Installation COs and FAOs shall ensure appropriate installation personnel, including child care providers, youth

activities staff, DODDS staff members, FAC Sailors, unit commanders and military supervisors (senior enlisted Sailors), and unit FAP points of contact receive appropriate awareness training on a regular and ongoing basis.

i. Per reference (h), COs and senior enlisted advisors must familiarize themselves with installation domestic violence services and resources within 90 days of assuming command or being assigned to the senior enlisted billet as an advisor to the command. They must receive training covering, at minimum, the subjects listed in reference (h). Training can be delivered at command and senior enlisted schools, as well as through distance learning and web based training as appropriate.

GUIDANCE FOR OVERSEAS AND ISOLATED AREAS

1. Accompanied service in overseas and isolated duty stations presents unique challenges. One of those challenges can be fashioning an appropriate response to family advocacy related situations which does not conflict with Status of Forces Agreement (SOFA) or other international agreements, and the jurisdiction which may be entertained by the cognizant foreign court. In isolated sites within U.S. control, unique challenges may exist because there is a lack of trained personnel on site but expeditious transfer to a location where services are available is not practical. Commanders are strongly advised to immediately consult the responsible Staff Judge Advocate (SJA) to ensure legal considerations are managed in a manner which does not inappropriately conflict with victim safety. The following guidance is provided to assist commanders faced with these situations.

2. In any case of alleged child abuse, the safety of the victim shall be the primary concern and shall be assessed immediately by the FAR, command, and law enforcement personnel. The FAR will advise the member's unit commander and the installation commander and recommend appropriate action as necessary. These actions may include:

a. Interview of the child by personnel trained in interviewing children.

(1) The interviewer may be the installation FAR, NAVCRIMINVSVC special agent, physician and/or a credentialed mental health professional. If there is an ongoing NAVCRIMINVSVC investigation, the interviewer should consult with NAVCRIMINVSVC prior to speaking to the child, unless the questioning occurs during the provision of medical care.

(2) The installation commander may order such an interview without the parents' consent if they determine that the interview is required to protect the health and safety of the child and civilian authorities are not reasonably available to direct such an interview.

(3) Commanders should expect the interviewer to take into consideration the following factors when arranging for the interview of a child: age of the child; physical, mental, or

emotional limitations of child; and parental concerns over the child's comfort and well-being.

b. Temporary removal of the child from the home, by order of the installation commander.

(1) The authority of commanders to remove children from their homes without parental consent is limited to situations where there is substantial reason to believe the life and/or health of the child is in real and present danger. It is also appropriate when there is no protecting and responsible adult in the home and the child is located in an overseas location, or in an area under the sole jurisdiction of U.S. military forces.

(2) Use of the commander's inherent authority in this regard may be limited by local law, agreements, or treaties. Commanders should consult with an SJA before issuing any such order unless the delay occasioned by such consultation is, in the opinion of the commander, likely to result in death or serious bodily harm to the child.

(3) Commanders shall consider the following factors before making a decision regarding removal of a child:

(a) Removal of a child from the home is a drastic action which could be challenged by the parents and, as a result, must be documented completely.

(b) Whether the facts pertinent to the child's situation are fully known and whether alternatives to removal may exist. In this regard, input should be obtained from the installation FAR, CRC, and SJA. CNIC FAP Manager and judge advocate staff are available for consultation as needed.

(c) Removal decisions should be based on legal counsel which takes into account all relevant facts, local laws, and, in overseas locations, applicable treaties, SOFAS, and whether the host nation expressed an interest in the case or relinquished jurisdiction.

(d) The consent of the parent allowing removal of the child for treatment and care should be requested and, if possible, obtained, prior to removal. They may consent for the good of the child.

(e) When not inconsistent with the safety and welfare of the child, afford notice and opportunity for the parents to present their perspective on the incident, before removal.

(f) If the commander determines removal from the parent/guardian is indicated, a written Child Removal Order (CRO) should be used.

(4) If the installation commander determines a child is in physical danger, and the parents are unavailable or uncooperative, the commander of the MTF may admit the child to an MTF or provide required medical care without parental authorization. Involvement of a parent or sponsor in the treatment process should always be sought to increase understanding and reduce resistance to medical care; however, this consideration should not be permitted to inappropriately conflict with identified victim safety concerns.

(5) If the commander determines removal from the parent/guardian is indicated, a written CRO should be used and an appropriate factual record of the decision and supporting information should be compiled. The FAR (in conjunction with the sponsor's command and the CRC) is responsible for developing and implementing a safety plan.

(6) The commander's authority to remove the child is temporary. It continues only until:

(a) the immediate threat has passed,

(b) local civilian authorities assume responsibility for the case, or

(c) return of the family to CONUS and local civilian authorities assume responsibility for the case.

3. When medically identified diagnostic or treatment needs are critical, but cannot be met by local resources, temporary transportation of the victim, Sailor, or family to a location having the required services may be recommended by the local FAR or MTF HCP.

a. In cases where diagnostic or treatment needs are expected to be prolonged, the commander may consider other solutions consistent with victim safety, command resources, and mission.

b. Alternatives to temporary transportation include revocation of command sponsorship, directing early return of family members, or recommending PCS orders for the sponsor servicemember.

4. If it is determined long-term foster care and treatment is required, legal decision should be made to return the child (and preferably the parents) to CONUS. Specific guidance regarding early returns is provided in the MILPERSMAN. At overseas locations, the FAR can assist with arrangements. A decision to return families or family members should be made only after a thorough assessment, investigation, and review by the CRC and approval of the CO.

5. Early return decisions may be made in crisis situations requiring urgent action. Early return of children to CONUS without parental accompaniment will only be accomplished if the losing site coordinates with the gaining State Child Protection Services agency. It may be necessary to use telephonic contacts and ad hoc committee meetings to make rapid case determinations. The transfer process is outlined below:

a. In overseas locations, the FAR will be responsible for the following:

(1) Coordinating with the FAR at the receiving location and providing complete case information.

(2) Sending a letter to the gaining command explaining the case and recommending the command contact the local FAR.

(3) Arranging escorts for minors if safety of the minors is a concern.

(4) Requesting follow-up reports from the gaining command, FAR, and CPS if a member is not transferred with the family.

(5) Enrolling the child victim in need of treatment in the Exceptional Family Member Program (EFMP), if applicable.

b. The receiving FAR is responsible for the following:

(1) Reviewing the case to ensure safety of all members and determining how the family's needs will be met by local resources.

(2) Reporting child abuse cases to the local CPS. State social agencies have differing policies regarding acceptance of cases originating outside their jurisdiction.

(3) Assuming normal FAP case management responsibilities.

(4) Providing case updates to the losing (OCONUS) FAR or isolated command if a member did not transfer with the family.

6. The FAR and command will keep the child's interest paramount. They shall use all available resources in making informed decisions and documenting any removal decision and subsequent follow-up actions.

APR 25 2008

SUMMARY OF CHANGES
OPNAVINST 1752.2B
FAMILY ADVOCACY PROGRAM (FAP)

Current Navy operating guidance, OPNAVINST 1752.2A of 17 July 1996 implemented policy and guidance for the Family Advocacy Program (FAP). Between FY03 and FY06, the Defense Task Force on Domestic Violence (later the Family Violence Policy Office), promulgated 16 directive-type memoranda that altered and improved operating procedures for the Department of Defense (DoD) FAP. This revision provides current Navy-specific policy and responsibilities, supports SECNAVINST 1752.2B (issued 10 November 2005) and implements DoD directive-type memoranda guidance. This instruction is designed to supplement, not duplicate, information provided in the SECNAVINST and the two must be viewed together for a full explanation of policies and requirements governing delivery of the FAP. This revision includes changes directed by the Family Violence Policy Office, DoD, Navy Inspector General guidance, and incorporates functional and organizational changes. The following revisions were made:

- In October 2004, FAP (plus all family programs) transferred to Commander, Naval Installations Command (CNIC). Revision assigns responsibility for implementation of FAP to CNIC.

- New OSD, DoD and Navy definitions are included.

- Establishes policy for prioritizing services and/or service delivery for key players.

- Extensively revises former program guidance, to include core programs and services, service delivery, cooperation with community service agencies, and coordination with commanding officers.

- Modifies the Case Management System to include better command interaction by adding the command representative as a voting member of the Case Review Committee.

- Expands training and education for commanding officers, senior enlisted Sailor, chaplains, first line responders, healthcare providers and other FAP staff.

- Outlines "restricted" and "unrestricted" reporting of domestic abuse cases, emphasizing safety and response for victims.