

Headquarters  
US Army Armor Center and Fort Knox  
Fort Knox, Kentucky 40121-6202  
4 September 2008

\*Fort Knox Reg 600-7

## Personnel – General

### ALCOHOL AND DRUG ABUSE IDENTIFICATION, INTERVENTION, AND EDUCATION

**Summary.** Alcohol and drug abuse is incompatible with military service. Alcohol and other drug abuse preventions include all measures taken to reduce abuse or misuse of alcohol and other drugs to the lowest level.

**Applicability.** This regulation applies to all units reporting directly to this headquarters, staff offices and departments, and Fort Knox Partners in Excellence.

**Suggested Improvements.** Proponent of this regulation is the Alcohol and Drug Control Officer, Army Substance and Abuse Program (ASAP), Directorate of Human Resources (DHR), US Army Garrison Command (USAG). Users are invited to send suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) directly to DHR (IMSE-KNX-HRA), USAG, 51 Vine Grove Road, Fort Knox, Kentucky 40121-6202.

**1. Purpose.** To establish installation policies on alcohol and drug abuse identification, intervention, and education.

**2. Reference.** AR 600-85, Army Substance Abuse Program (ASAP), 24 March 2006.

**3. Policy.**

a. The use of alcohol, while socially and legally acceptable under some circumstances, is not acceptable when it endangers the user or innocent bystanders or affects combat readiness. In addition, the use of illegal drugs will not be tolerated. It is important for all Soldiers to receive education and intervention that reduces their risk of encountering substance abuse related problems.

b. Abuse is both a disciplinary and medical problem requiring action by the chain of command. Greater emphasis must be placed on early identification of Soldiers involved with alcohol or other drug abuse before additional problems develop. Early identification and intervention is the key to successfully handling these types of problems; therefore, commanders will refer all Soldiers suspected or identified as alcohol or drug abusers to the Alcohol and Drug Clinic, Ireland Army Community Hospital (624-0321) for evaluation. Refer the Soldier for evaluation rather than waiting for the Soldier's court appearance. Referral is mandatory for the following incidents:

---

\*This regulation supersedes Fort Knox Reg 600-7, 24 July 2008.

- (1) All accidents/incidents related to alcohol/drug use, including underage drinking.
- (2) All incidents of domestic or family violence that involve alcohol/drug use.
- (3) All positive urinalysis results.
- (4) All Soldiers with a blood alcohol level of .05 percent or above while on duty.

c. The Alcohol and Drug Abuse Program is a command program with emphasis on individual readiness and personal responsibility for behavior. It provides the necessary identification, education, and rehabilitation tools to ensure that no person, equipment, or mission fails due to the alcohol/drug abuse of any individual or group of individuals. The command's role in prevention, biochemical testing, early identification of problems, and administrative or judicial actions is essential in providing for an effective program. However, counseling and other treatment services are medical issues under the auspices of qualified clinicians. The commander's authority to manage Soldiers, maintain readiness, and make administrative or disciplinary decisions, which are in the best interest of the Army, is not affected by issues in the medical treatment plan. The clinical staff and unit commander will coordinate administrative and clinical issues. The commander's input into diagnostic assessments and treatment decision is essential. Confidentiality will be maintained at the unit and all levels of the program.

d. Appointments for evaluation and treatment are medical appointments, and regular and consistent attendance is necessary for rehabilitation. Commanders should strive for a 100 percent attendance rate. When there is justifiable cause, a commander, first sergeant, or unit prevention leader (UPL) who is acting for the commander may request an appointment be rescheduled. This action must take place before the date of the appointment.

e. Urinalysis testing has proven to be the most viable tool available to identification of personnel using drugs and ensuring the safety of personnel and equipment. Use of an active and aggressive biochemical (urinalysis) testing program is an important tool in identifying drug abusers and deterring others from abuse. The urinalysis program is automated, and all units must utilize the Department of Defense Drug Testing Program (DTP). The test rate is 10 percent of each unit per month. Any testing deviation must receive prior approval from the Chief of Staff, US Army Armor Center and Fort Knox, with coordination through the Garrison Commander and Alcohol and Drug Control Officer, ASAP. Additional testing is at the discretion of the commander. It is imperative that urinalysis tests are unannounced and Soldiers randomly selected. In accordance with AR 600-85, units are to randomly test at a rate of 100 percent annually. This means there should be one sample collected per number of Soldiers in a particular unit. The only individuals with knowledge of a pending test should be the commander, first sergeant, and UPL. Observers must be grade E-5 or above. The biochemical-testing program is costly, and commanders are charged with testing for optimum results. Smart testing techniques include varying test times and days, to include weekend tests, use of "double-back" testing, and accounting for shift workers. Commanders are required to report confirmed positive urinalysis results to the 280th Military Police Detachment (CID) within 48 hours of notification. The CID will notify the Office of the Provost Marshal (OPM) of positive results.

Personnel entering officer basic and advance courses are required to be tested within 10 working days of arrival.

f. Within 90 days of assignment, all unit commanders and first sergeants must receive an alcohol and drug abuse block of training offered by the ASAP. The purpose of this training is to educate unit leadership on the knowledge and skills necessary to identify and confront alcohol and other drug abuse problems. The training may be received either through the Cadre Training Course, quarterly ASAP Leaders training, or individually arranged with the ASAP staff, phone 624-1532. All Soldiers will receive a minimum of 4 hours of substance abuse education annually. Documentation of training should be maintained by the UPL for 1 year. A copy of the training documentation should be turned in to ASAP.

**4. Responsibilities.** Every level of command is charged to clearly establish the policy of intolerance of driving under the influence (DUI). Commanders will expeditiously:

a. Refer all Soldiers charged with DUI to the Alcohol and Drug Clinic, phone 624-0321, for evaluation, using DA Form 8003, Army Substance Abuse Program (ASAP) Enrollment. Referral should be made within 72 hours of commanders receiving notification of the DUI.

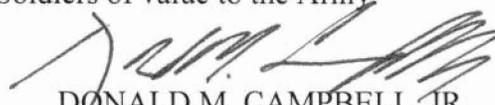
b. Refer Soldiers that have been screened, not enrolled, by the Alcohol and Drug clinic to Alcohol and Drug Awareness Prevention Training, 624-1532, for education on the effects of substance abuse. Commanders may refer to education when they observe a lack of awareness on behalf of a Soldier to the consequences, both personal and career, of high-risk drinking. This class is a proactive commander prevention tool. (Procedures in 3b above are necessary for Soldiers who have had a DUI, underage drinking, alcohol-related domestic violence incident, positive urinalysis, or any illegal drug use.)

c. In accordance with regulatory guidance established in AR 600-85, paragraph 1-16g(2), commanders are required to report all offenses involving illegal possession, use, sale, or trafficking in drugs or drug paraphernalia to the OPM. Furthermore, AR 600-85, paragraph 1-35a(1), requires all Soldiers identified for illegal drug use be referred to the Alcohol and Drug clinic for screening.

d. Company-size units who do not experience a DUI for a 90-day period are eligible to receive a DUI Free streamer. The streamer will be authorized as long as the unit is DUI free. The DUI Free streamer is based on the honor system. In the event a unit receives a DUI, the streamer will be removed from the guidon and returned to ASAP. The streamer will be returned to ASAP within 30 days of the DUI appearing on the blotter. Failure to return a streamer will result in the unit reimbursing the ASAP for the streamer cost. The ASAP will coordinate the DUI Free Recognition Program, which consists of providing streamers for unit guidons, year pins for the streamers, and an annual recognition ceremony. DUI Free Recognition is based on the fiscal year. Students attending school on TDY status and/or attached or assigned to units for UCMJ, rations, and quarters will be included in the total numbers.

Fort Knox Reg 600-7 (4 Sep 08)

**5. Conclusion.** Alcohol and drug abuse is inconsistent with Army service. Through caring, competent, and committed leadership, we will continue to enforce tough standards of conduct and discipline while striving to retain those Soldiers of value to the Army.



DONALD M. CAMPBELL, JR.  
Brigadier General, USA  
Commanding



KENT R. SHAW  
Director, Human Resources

DISTRIBUTION:  
A