DEPARTMENT OF THE ARMY
HEADQUARTERS, 4TH INFANTRY DIVISION AND FORT CARSON
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AFYB-CG

OCT 0 7 2025

MEMORANDUM FOR RECORD

SUBJECT: Policy Letter #16 – Substance Abuse/Misuse

1. References:

a. AR 600-85, The Army Substance Abuse Program, dated 4 October 2024.

b. AR 350-1, Army Training and Leader Development, dated 1 June 2025.

2. Purpose: To define and publish policies and procedures for preventing and reacting to substance use/misuse.

3. Background: Substance misuse/abuse contributes to high-risk behaviors, runs counter to Army Values, and erodes personal readiness. The Army Substance Abuse Program (ASAP) and Substance Use Disorder Clinical Care (SUDCC) are mechanisms of support that, when administered appropriately, through engaged and empowered leadership, support building personal readiness and resilience, and optimizes performance. The command role in substance abuse prevention, treatment, drug and alcohol testing, early identification of problems, and administrative or judicial actions is essential.

4. Policy:

a. Urinalysis Testing. Units are required to randomly select and test a minimum of 10% (not to exceed 40%) of their assigned Soldiers monthly using the "IR" (Individual Random) testing code. All commanders should use this tool to the greatest extent possible. 100% "IU" (Inspection Unit testing may be used in certain circumstances, such as when there is a high incidence of drug use in a particular unit. However, random testing should be the primary method of drug testing in the Army. Tests conducted under the "IU" code are not counted toward the monthly random requirement.

b. Substance Misuse Prevention training. Commanders will provide annual Substance Misuse Prevention training for Soldiers IAW AR 350-1, Table C-1. The trainer for these classes may be a subject matter expert such as an Army Substance Abuse Program (ASAP) Specialist, Substance Use Disorder Clinical Care (SUDCC) employee, a Master Resiliency Trainer, or qualified guest speaker.

c. Commander's Risk Reduction Toolkit (CRRT). CRRT allows Command teams to view high-risk behaviors in their units by consolidating data from multiple Army databases. Access to CRRT can be requested at http://vantage.army.mil. Command teams must request an account within 30 days of assuming command and should access the site at a minimum of Army Harassment Prevention and Response Program (Hazing, Bullying, Discriminatory Harassment and Online Misconduct)

every 30 days to monitor changes and request appropriate resources pertaining to their unit's high-risk behaviors.

d. Substance Use Disorder Treatment. All Soldiers involved in an alcohol or drug-related incident (including positive urinalysis) must be referred to SUDCC for screening and/or enrollment within five days of the incident. Soldiers will be referred to SUDCC using DA Form 8003. Soldiers without an incident, but who are concerned about their own substance use, are encouraged to self-refer to the clinic by calling 719-526-7155.

e. Alcohol and Drug Abuse Prevention Training (ADAPT). In addition to the SUDCC screening above, all Soldiers involved in an alcohol or drug-related incident are required to complete the 2-day ADAPT class provided by ASAP. Completion must be completed within 60 days of the event.

5. Proponent: The points of contact for this policy are William Lana, Army Substance Abuse Program Manager at 520-714-5862 and Vanessa Harris, SUDCC Clinical Director at 719-526-7661.

PATRICK J. ELLIS
Major General, USA
Commanding