

1ST INFANTRY DIVISION & FORT RILEY COUNSELING GUIDE



COUNSELING GUIDE FOREWORD

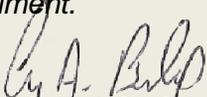
Many leaders will receive this guide and ask why it is necessary. They will say, “I don’t need a guide to know my Soldiers. I do that already.” However, what I’m seeing across the installation is that our current standard for “knowing our Soldiers” is insufficient. This is unacceptable.

For instance, it is unacceptable for a leader not to know that a Soldier has separated from his wife and for months has continued to live off post. It is also unacceptable for a leader not to know if a Soldier pays child support or has designated someone other than his spouse to receive death benefits/SGLI. Leaders must be aware of the central elements of their Soldiers’ lives. All leaders expect their Soldiers to perform at a high level and without problems., but it is inevitable that all people experience turbulence in their personal lives. These are the moments when our Soldiers need engaged and proactive leadership the most. It is not enough to know or guess when catastrophe might happen. Rather, engaged leaders anticipate when turbulence is likely to happen in a Soldier’s life, and do their best to intercede with assistance.

Part of building readiness in our formation is developing resiliency and competency among Soldiers. Engaged leaders can find the best ways to help their Soldiers establish personal and professional goals, then map out a plan to meet them. Units succeed when individuals excel at their current roles, and are focused on preparing to meet future challenges. 1st Infantry Division is no different.

Through this guide, I expect leaders at echelon to understand the following:

- Leaders will **be proactive and engage their Soldiers** through daily interactions and formal counseling when necessary. The spirit of a counseling program is not to produce counselling packets. Instead, counseling is intended to build trust – trust among peers, trust among subordinates, and trust among leaders. Trust is the essential component to understanding what drives our Soldiers.
- Leaders will go beyond the superficial discussion that too often characterizes “counseling.” They will **ask hard, often uncomfortable questions** seeking information and answers that will improve—and possibly save—the lives of their subordinates.
- Battalion Commanders and Command Sergeants Major are responsible for Soldier transitions from company to company, battalion to battalion, and intra-post moves. Carefully managing these transitions, especially with medium and high risk Soldiers is imperative to mitigating risk.
- Finally, leaders will complement the effort to reduce risk with a corresponding campaign **to inspire Soldiers to live the Army Values**. Leaders lead by example. With that in mind, they will seek, identify, and emphasize strengths, help Soldiers achieve personal and professional goals, and continue to be an example worthy of emulation. They accomplish this through effective communication and counseling. Commanders will institute a counseling training program to ensure all leaders understand how to properly counsel subordinates. *Proper counseling is the cornerstone to building mutual trust between leader and subordinate and is the central tenet of this document.*


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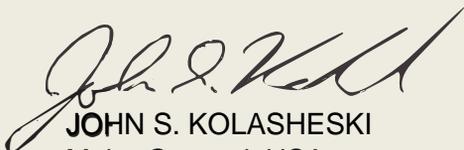

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Purpose (1 of 2)

1. The purpose of this guide is to establish an SOP for use of the 1st Infantry Division Counseling Guide, the standardization of counseling packets, and for intra-division and installation transfers. Every Soldier deserves regular and purposeful counseling. A Soldier should leave a counseling session with a solid understanding of what they have done well, where they can improve, and how the leader and led will work together to meet those goals while achieving the unit's mission. Leaders should leave each counseling session with a better understanding of their Soldier's concerns, problems, goals, successes, and expectations. Quality counseling requires preparation and time from both parties.
2. Leader actions in support of counseling.
 - a. All leaders will maintain a counseling packet for each of their Soldiers IAW this SOP.
 - b. Leaders will secure counseling folders and all PII IAW Army & DOD regulations.
 - c. Leaders in the 1st Infantry Division will read ATP 6-22.1, The Counseling Process, July 2014. Leaders will review packets IAW published guidance. Squad/Section Leaders will review their Soldier's folders monthly. Squad/Section Leaders will have their counseling folders reviewed by their Platoon Sergeant quarterly, and the results issued in a special counseling. Counseling files are subject to commanders and 1SGs/CSMs review at any time.
 - d. Leaders are strictly accountable for counseling packets. The success or failure of the leader's counseling program will be reflected on their periodic counseling and/or evaluation.
4. The purpose of standardizing counseling packets is to establish an objective standard that leaders can enforce.
 - a. We cannot expect junior leaders to understand how to counsel. Use the 8-step training model to train and certify first-line supervisors in the art and science of counseling.
 - b. Part of counseling junior leaders is inspecting their counseling packets and providing guidance on how to improve their processes.
 - c. The list of requirements in this guide (page 7) is not exclusive or exhaustive. Units may add to, but not subtract to the packet.
5. Counseling standards.
 - a. In accordance with ATP 6-22.1, the chain of command will conduct a reception and integration counseling for new Soldiers, regardless of rank, within 24 hours of the Soldier's new assignment to the unit.
 - b. Soldiers will receive developmental counseling monthly, at a minimum. Units will dedicate the time to conduct counseling, and protect that time in their training calendars.
 - c. Leaders must strike a careful balance between the unwieldy and bland counseling packets, both of which are not entirely helpful. We fully expect leaders to understand that some Soldiers require more counseling than others and to develop their counseling packets commensurate with the Soldiers' needs.

Purpose (2 of 2)

6. Intra-division and intra-installation Soldier transfers.

a. Similar to transitions between different phases of an operation, Soldier transitions between units require careful coordination. Valuable understanding and insight into a Soldier's performance and character may be lost if not properly shared between losing and gaining units, which can directly affect a leader's ability to mitigate risks that affect the health and discipline of the force. Leaders must ensure this understanding is passed on to the new unit when a Soldier transition occurs. Managing Soldier transition is a command team responsibility.

b. Prior to approving a Soldier for transfer/transition, First-line supervisors will brief their leadership on issues identified during counseling. This requirement is intended to make Soldier transitions a deliberate event with leader oversight. This information will also be briefed to the gaining unit, as appropriate.

c. Soldiers will be assigned a sponsor prior to moving to a new unit on Fort Riley. It is the responsibility of both the gaining unit and the losing unit to ensure that the sponsor is assigned and that he or she has made contact with the new Soldier.

d. In order to ensure proper transition of Soldiers between units, leaders will conduct the following actions, verified by the Platoon Sergeant or higher:

(1) Ensure the completion of a counseling packet by the losing unit and transfer to the gaining unit.

(2) Ensure mandatory training (as required by AR 350-1) is documented in the Digital Training Management System (DTMS) to ensure individual training records are transferred to the gaining unit.

(3) For intra-brigade transfers, platoon sergeants will accompany Soldiers of the rank of SGT and below when transferring within a unit. The platoon sergeant will ensure that the Soldier's counseling packet is handed to the gaining unit. Soldiers of the rank of SSG and above will hand-carry their counseling packets and submit them to their gaining unit, unless their former chain of command believes the Soldier not responsible enough to perform this task, in which case the former chain of command may elect to hand the Soldier's counseling packet directly to the Soldier's gaining unit.

(4) For intra-post/brigade-to-brigade transfers, the First Sergeant will escort the Soldier to the gaining unit. Units will use their discretion when determining what documents are included in the counseling packet. Leaders should afford Soldiers a fresh-start and not unduly prejudice the unit against the new Soldier. The gaining unit will assign incoming Soldiers a first-line leader (Officer/NCO), who will assess and counsel the Soldier upon arrival.

7. Our intent is to build a team of teams within 1st Infantry Division – one comprised of engaged leaders and Soldiers who communicate well with each other. This environment will lead to better developed Soldiers at echelon. Equally important, it will help us be able to recognize when Soldiers need help in advance of a given problem, and develop a risk-mitigation plan to help that Soldier. We want Soldiers to know that they can ask their leadership for help when they need it. This is about knowing your Soldiers, so you can take care of them. Quality counseling is an investment in each Soldier. While it may be time consuming, it is also team-building and risk-reducing and essential to any formation's success

Situational Vignette

It's Friday and PFC Jones arrives to the Company and is assigned to your squad. PFC Jones is a 22-year-old male and is a recent graduate of the 11B OSUT training at Fort Benning, GA. Fort Riley is his first assignment and at first glance he appears to be squared away. PFC Jones' professional bearing is outstanding, his haircut is a high and tight, and his uniform looks immaculate. You quickly scan through his in-processing packet and pull out his OSUT APFT card, noticing his score of 300. PFC Jones' first impressions are sealed, but things are not always what they seem. PFC Jones is married and informs you his wife didn't accompany him to Fort Riley. PFC Jones tells you he is residing in quarters on Fort Riley. You ask him if he needs anything prior to the weekend and he responds no. As you watch him walk to his vehicle, you notice he is getting into a 2017 GMC Yukon with a young lady sitting in the passenger seat and driving off.

Here is what you wish you knew about him. PFC Jones is married, but it's not a "real" marriage. Rather, it is an arranged marriage to get the BAH, which he is splitting with a person he knows back home. PFC Jones is staying with a SPC Johnson who only requires him to pay the "water bill" in lieu of rent. SPC Johnson is in another brigade and is being chaptered out of the Army for patterns of misconduct due to multiple positive drug tests. Further, PFC Jones has a motorcycle and keeps it at a storage facility for safe keeping. PFC Jones's experience in motorcycle riding dates back years so he doesn't feel it's necessary to do any additional training. The young lady you see in his Yukon is his real girlfriend whom he just met at Mustang's. PFC Jones' DD93 instructs his sister is to be notified of his death and receive his remains but, PFC Jones' father is the beneficiary of his SGLI. He doesn't like to reveal information about himself to anyone...he doesn't feel that it is anyone's business but his own. To PFC Jones, this is a job and only a job, not a profession.

Why don't we know these facts about PFC Jones?

Would it help us take care of him, and be best for the unit, if we knew PFC Jones better?

Who should ask him these deeper questions?

What tools should PFC Jones' leaders use to get to know him?

... What must we do?

This guide offers tools to assist in the execution of beneficial counseling. Every Soldier is different, and will require a tailored approach. These methods offer an excellent and comprehensive starting point for the junior leaders in this Division to learn the art of counseling.

The Soldier and Leader Risk Reduction Tool (SLRRT) forms the foundation for these counseling methods, and the additional tools in this guide place an emphasis on goal-setting and growth. First line leaders who engage Soldiers through earnest dialogue are the key to effective counseling.

The Counseling Packet

The Comprehensive Counseling Packet is the 1st Infantry Division and Fort Riley standard for counseling packets. Each tab, numbered from front to back, will consist of the below specified items at a minimum. Subordinate members of the NCO chain of support can add to the counseling packet, *but they should keep in mind that the intent is a quick reference of the major documents that help explain a Soldier's life and not a book that details everything a Soldier does or fails to do.*

Tab 1: Personal Information

- Personal Data Sheet/ Soldier Data Card
- ERB/ORB
- LES
- DD-93 (Record of Emergency Data)
- SGLI
- Profile*
- Family Care Plan*
- EFMP summary sheet*
- Strip map to quarters

Tab 2: Professional Development

- Personal Goal Sheet
- Professional Development Model by MOS
- DA-3355 (Promotion Point Worksheet)
- DA-3595-R (Record Fire Scorecard)
- DA-705 (APFT Scorecard)
- DA-5500 (Body Fat Content Worksheet)*

Tab 3: Unit Records

- Training Certificates
- Hand Receipts
- OCIE Statement
- CIF Record

Tab 4: NCOER/Developmental Counseling

- DA-4856 (Integration & Reception Counseling)
- DA-4856 (Event-Oriented Counseling)
- DA-4856 (Performance/Professional Growth Counseling)
- DA-2166-9-1A (NCOER Support Form)*
- Previous NCOER*
- NCO Rating Scheme*

Tab 5: Adverse Counseling*

- DA-4856 (Adverse Counseling)
- Article 15(s)
- Bar to Reenlistment
- Flag Report

Tab 6: SLRRT

- Fort Riley SLRRT

*If necessary

The following pages outline how to develop this packet, and to read the documents created by other systems. To ensure effective and good use of everyone's time, leaders performing counseling must prepare by collecting the necessary information, and planning for topics of discussion.

Tab 1: Personal Information

Soldier Data Card

The Soldier Profile Card is a useful tool to consolidate the Soldier's key administrative data and provide a history of life events that affect the Soldier's overall resiliency, job performance, financial health, and so on. Leaders maintain this tool as a snapshot of each Soldier, then use it to convey risk assessments to the platoon leadership. Units may adapt it to meet their specific needs (i.e. adjust the data fields or embed a picture of the Soldier's off-post quarters), as well as adjust the milestone timeline slide to fit the Soldier's unique situation. A good practice is to keep a timeline for each year of the Soldier's career, capturing highs and lows to paint a picture for the current and future commands. Leaders, however, are encouraged to use discretion regarding how much the timeline captures based on the age, experience, and maturity of the Soldier.

Soldier Data Cards should be standardized at the company level (at a minimum). Useful sections include:

- Admin Data (name, rank, section, assigned leader, etc.)
- Photo
- Areas of Stress/concern, with details
- Areas of success/emphasis
- Plan of action moving forward, either to continue the Soldier's development or to rehabilitate from an adverse action
- Timeline of the Soldier – major events in their personal and professional life

ERB, LES, and Profiles

These documents are an important part of telling a Soldier's "story." In order for leader and led to successfully understand various stressors and indicators in a Soldier's life, as well as create a plan for personal and professional development, both must understand how to read these documents. The following pages provide a guide.

Tab 1: Personal Information

Reading an ERB (1 of 3)

SECTION I Assignment Information

Deployment info - how long and number of times. Maximum six most recent overseas tours (AR 614-30).

Dwell time should reflect 0 Mo 0 D while SM is deployed.

PMOS - Primary MOS awarded

SMOS - Secondary MOS awarded (Same as above if applicable)

BONUS MOS - The MOS the Soldier received an enlistment/re-enlistment bonus. Therefore, on the Unit Manning Report, slot the Soldier against this PMOS.

BONUS ENL ELIG DATE - Bonus enlistment eligibility date.

PROMOTION POINTS/YRMO - The number of promotion points a Soldier who is competing for promotion to SGT or SSG and the effective year and month.

PREV PROMOTION POINTS/YRMO - The previous number of promotion points a Soldier who is competing for promotion to SGT or SSG and the effective year and month.

PROM SEQ # - promotion sequence number, the number given to a senior NCO when selected for promotion to SFC and higher.

PROMOTION MOS - promotion MOS (the promotable MOS for a Soldier identified for promotion).

SQI - Special Qualification Identifier, this is MOS immaterial, meaning that any MOS can obtain any SQI.

ASI - Additional Skill Identifier, a code used to identify any additional skills pertinent to the Soldier's MOS obtained through military schooling.

AEA/DT - Assignment Eligibility Availability code and the expiration date

FLAG CODE/FLAG START DT/FLAG EXPIRATION DT - Contains information on Suspension of Favorable Personnel Actions (FLAG) currently invoked against a Soldier

SECTION II Security

Indicates the Soldier's security clearance and investigation date. Verify that Soldier has requisite security clearance level

SECTION III Service data

BASD- Basic active service date, this date establishes the beginning of creditable service for retirement purposes

PEBD - Pay Entry Basic Date,

BESD - Basic Entry Service Date,

ETS - Expiration Term of Service,

DIEMS - Date Initial Entry Military Service, the first time a person committed to military service, this includes entry into the delayed entry program.

REEN PROHIB - Reenlistment eligibility code,

TIME LOST - Lists periods, in turns of time when a Soldier did not receive credit for svc. AGCM/DT - Army Good Conduct Medal date,

AGCM ELIG DT - Eligibility date for the next award of the Good Conduct Medal (3 year increments)

SECTION IV Personal/Family Data- will let you know date of birth, birthplace, gender/race, number of adult and child dependents, marital status, spouse's date of birth, PULHES, height/weight, home of record and mailing address.

PUHLES= (P= physical capacity, U= upper extremities, L= lower extremities, H= hearing, E= eyes, S= psychiatric) This data is updated via MEDPROS.

Tab 1: Personal Information

Reading an ERB (2 of 3)

SECTION V Foreign Language

Foreign languages that the Soldier has or had proficiency in; requires DA Form 330 to add or change. Listen/Speak/Read- date.

YMPTL- Year and month last tested

SECTION VI

Top line of section VI is the MEL/MES (military education level/status)- Highest military education level achieved for career development.

Military education- Course name/year, maximum of 10 schools/courses recorded in this block. Should include all courses attended. All courses must be 40hrs or more.

SECTION VII Highest civilian education level completed.

Accredited school, official transcripts are required for updating. Display examples: associates, bachelors, masters.

SECTION VIII Awards and Decorations

A max of 16 awards and 8 badges by precedence will be shown on the ERB.

SECTION IX – Assignment History

Maximum of 20 assignments reflected by a change in organization (to include deployments), duty title or duty MOS.

Current- current assignment; the unit number and organization cannot be changed for the current assignment only the duty title and from date can be adjusted or changed.

From- Date assigned to current unit or position.

MO- # Months in assignment

Unit No.- This will be the first four characters of the Unit identification code (UIC) for TDA units. For MTOE units a four digit numerical unit designation will be used; i.e. 0003 for 89th MP Bde

Organization- Description of unit of assignment. 19 Characters maximum (current cannot be changed).

Station- Post, camp, station or city of assignment; this will always be the home station of the unit and will not change if/when the unit deploys. It will only read an overseas location if a unit's home station is there, not for TCS deployments such as OIF, AEF, OND.

LOC- Location of assignment

COMD- Two letter code representing the major command of assignment.

Duty title- This will be the duty position held during the time period of the assignment as found on the units MTOE or TDA document. Duty titles recorded should match the duty title on the Evaluation for the same period. The duty title may be abbreviate to fit into the allotted space. Duty title will reflect deployments IAW MILPER MSG 09-183. For a deployed Soldier the duty title will annotate FWD and two digit country code i.e. Platoon Leader FWD (IZ) ; this is the only place where TCS deployments will be annotated in Section IX.

DMOS – Duty MOS during the assignment. Same rules apply as for duty title.

Date of last NCOER- This will be the thru date of the last NCOER for the Soldier posted to the interactive web response system (IWRS).

SECTION X – Remarks

HIV YRMO - Date of last HIV Test

RGMT AFL- regimental affiliation

Date Last Photo- YYYYMM of last photo that is on file.

Tab 1: Personal Information

Reading an LES (2 of 2)

DEFENSE FINANCE AND ACCOUNTING SERVICE MILITARY LEAVE AND EARNINGS STATEMENT											
ID	NAME (Last, First, MI)	SOC. SEC. NO.	GRADE	PAY DATE	YRS SVC	ETS	BRANCH	ADSN/DSSN	PERIOD COVERED		
						141205	ARMY	4818	1-30 APR 11		
ENTITLEMENTS						SUMMARY					
TOTAL						5942.74	1967.92				
LEAVE		BF Bal	Emd	Used	Cr Bal	ETS Bal	Lv Lost	Lv Paid	Use/Lose		
		35.8	17.5	10	42.5	150.5	.0	.0	.0		
FICA TAXES		Wage Period	Soc Wage YTD	Med Wage YTD	Soc Tax YTD	Med Tax YTD	STATE TAXES	St	Wage		
		2620.20	10480.80	440.20	10480.80	151.96	AK				
PAY DATA		BAQ Type	BAQ Depn	VHA Zip	Rent Amt	Share	Stat	JFTR	Depns		
		WIDEP	SPOUSE	99703	.00	1	R	AK049	5		
UNEMP		Base Pay Rate	Base Pay Current	Spec Pay Rate	Spec Pay Current	Inc Pay Current	Inc Pay Current	Bonus Pay Rate	Bonus Pay Current		
								.00	.00		
<p>IF TSP ELECTION AMT EXCEEDS NET AMT DUE, TSP WILL NOT BE DEDUCTED.</p> <p>-IF YOU RECEIVED APRIL MID-MONTH PAY, YOU WERE PAID FROM 1-8 APR 11 BECAUSE OF AN UNSIGNED BUDGET TO PAY BEYOND 8 APR. HOWEVER, AFTER THE BUDGET WAS SIGNED YOU RECEIVED PAYMENT FOR 9-15 APR AS A CASUAL PAY, MAKING YOUR MID-MONTH APRIL 2011 WHOLE.</p> <p>-REVIEW YOUR LES EVERY MONTH TO ENSURE YOU ARE RECEIVING THE CORRECT PAY AND ENTITLEMENTS. IF NOT, SEE YOUR COMMANDER AND PAYMASTER TODAY.</p> <p>-WOUNDED, INJURED, OR ILL? SHARE YOUR CONCERNS. CALL WOUNDED SOLDIER AND FAMILY HOTLINE AT 1-800-984-8523.</p> <p>-DFAS IS NOW ON FACEBOOK AT WWW.FACEBOOK.COM/DEFENSEFINANCEANDACCO</p>											
<p>UNTINGSERVICE.</p> <p>TAX EXEMPT LV BAL = 0.0</p> <p>MIL PAY/ALLOW DEBT BAL \$204.16</p> <p>MIL PAY/ALLOW DEBT BAL \$112.50</p> <p>MIL PAY/ALLOW DEBT BAL \$81.66</p> <p>TOTAL INDEBTEDNESS \$261.00(111)</p> <p>PARTIAL PAYMENT TO EFT 110413</p> <p>PARTIAL PAY 110415(037)</p> <p>CANCEL PARTIAL PAY 110415(101)</p> <p>RESUME INDEBTEDNESS 110412(102)</p> <p>RESUME INDEBTEDNESS 110412(102)</p> <p>RESUME INDEBTEDNESS 110412(102)</p> <p>BAH BASED ON WIDEP, ZIP 99703</p> <p>BANK: USAA FEDERAL SAVINGS BANK</p> <p>ACCT # [REDACTED]</p> <p>COLA LOCATION - FAIRBANKS ALASKA</p>											

The "PAY DATA" row will indicate if the Soldier receives BAQ with dependents and "BAQ Depn" show what type of dependent entitles the Soldier to BAQ. Spouse will be the default BAQ Dependent when there is more than one dependent.

Leave:
BF Balance: Balance at the beginning of the year
Emd: Leave earned this year
Used: Leave used this year
Cr Bal: Leave remaining
ETS Bal: Leave when ETS, if no changes
Lv Lost: Leave lost last year. On October 01, leave in excess of 60 days is lost
Use/Lose: Leave that will be lost next October if the Soldier does not use leave

Any indebtedness a Soldier owes to the government will be shown here along with the type of indebtedness. Indebtedness may be an indicator of financial, marital, or other issues. Monitor closely since too many deductions may result in a "no pay" to a Soldier.

Article 15 will read "DEBT" and will only show as an Article 15 deduction on the UCFR; it will be annotated with an amount on the last column title "C/M ART 15".

When debts are posted to a Soldier's pay record, there will be annotations in the 'REMARKS' section of the LES.

The remarks will inform you of any changes that were posted to a Soldier's pay record. Usually, reading the remarks can help you better understand the LES.

Tab 1: Personal Information

Reading a DD-93

RECORD OF EMERGENCY DATA		SECTION 2 - BENEFITS RELATED INFORMATION	
<p>PRIVACY ACT AUTHORITY: 5 USC 552, 10 USC 2605, 1475 to 1480 and 2771, 38 USC 562 PRINCIPAL PURPOSES: This form is used by military personnel and DoD as civilians, when applicable. For military personnel, it is used to designate death. It is also a guide for disposition of that member's pay and allowances to the person(s) the Service member desires to be notified in case of emergency process in the event of an emergency and/or the death of the member. This form may not be applicable. ROUTINE USES: None. DISCLOSURE: Voluntary; however, failure to provide accurate personal information may result in the processing of benefits to designated beneficiaries if applicable.</p> <p>INSTRUCTIONS TO SERVICE MEMBER This extremely important form is to be used by you to show the names and addresses of your spouse, children, parents, and any other person(s) you would like notified if you become a casualty (other family members or family and, to designate beneficiaries for certain benefits if you die. IT IS YOUR RESPONSIBILITY to keep your Record of Emergency Data up to date to show your desires as to beneficiaries to receive certain death payments, and to show changes in your family or other personnel listed, for example, as a result of marriage, civil court action, death, or address change.</p> <p>IMPORTANT: This form is divided into two sections: Section 1 - Emergency Contact Information and Section 2 - Benefits Related Information. READ THE INSTRUCTIONS ON PAGES 3 AND 4 BEFORE COMPLETING THIS FORM.</p> <p>SECTION 1 - EMERGENCY CONTACT INFORMATION</p> <p>1. NAME (Last, First, Middle Initial) [REDACTED] 2. SSN [REDACTED]</p> <p>3a. SERVICE/CIVILIAN CATEGORY <input checked="" type="checkbox"/> ARMY <input type="checkbox"/> NAVY <input type="checkbox"/> MARINE CORPS <input type="checkbox"/> AIR FORCE <input type="checkbox"/> DoD <input type="checkbox"/> CIVILIAN <input type="checkbox"/> CONTRACTOR b. REPORTING UNIT CODE/DUTY STATION [REDACTED]</p> <p>4. SPOUSE NAME (if applicable) (Last, First, Middle Initial) [REDACTED] b. ADDRESS (include ZIP Code) AND TELEPHONE NUMBER [REDACTED]</p> <p><input type="checkbox"/> SINGLE <input type="checkbox"/> DIVORCED <input type="checkbox"/> WIDOWED</p> <p>5. CHILDREN a. NAME (Last, First, Middle Initial) [REDACTED] b. RELATIONSHIP [REDACTED] c. DATE OF BIRTH (YYYYMMDD) [REDACTED] d. ADDRESS (include ZIP Code) AND TELEPHONE NUMBER [REDACTED]</p> <p>6a. FATHER NAME (Last, First, Middle Initial) [REDACTED] b. ADDRESS (include ZIP Code) AND TELEPHONE NUMBER [REDACTED]</p> <p>ERASINE JORDAN W (Deceased) 22</p> <p>7a. MOTHER NAME (Last, First, Middle Initial) [REDACTED] b. ADDRESS (include ZIP Code) AND TELEPHONE NUMBER [REDACTED]</p> <p>ERASINE SANDRA L 15040 AIRPORT ROAD LANESBORO NH 03426</p> <p>8a. DO NOT NOTIFY DUE TO ILL HEALTH [None] b. NOTIFY INSTEAD [None]</p> <p>9a. DESIGNATED PERSON(S) (Military only) [None] b. ADDRESS (include ZIP Code) AND TELEPHONE NUMBER [None]</p> <p>10. CONTRACTING AGENCY AND TELEPHONE NUMBER (Contractor only) [None]</p>		<p>b. RELATIONSHIP c. ADDRESS (include ZIP Code) AND TELEPHONE NUMBER d. PERCENTAGE</p> <p>MOTHER [REDACTED] 50</p> <p>WIFE [REDACTED] 50</p> <p>12a. BENEFICIARY(IES) FOR UNPAID PAY/ALLOWANCES (Military only) NAME AND RELATIONSHIP [REDACTED] b. ADDRESS (include ZIP Code) AND TELEPHONE NUMBER [REDACTED] c. PERCENTAGE 100</p> <p>13a. PERSON AUTHORIZED TO DIRECT DISPOSITION (PAD) (Military only) NAME AND RELATIONSHIP [REDACTED] b. ADDRESS (include ZIP Code) AND TELEPHONE NUMBER [REDACTED]</p> <p>14. CONTINUATION/REMARKS Insurance: NONE NA General Remarks: NON-MEDICAL ATTENDANT: [REDACTED]</p> <p>15. SIGNATURE OF SERVICE MEMBER/CIVILIAN (include rank, rate, or grade if applicable) [REDACTED] 16. SIGNATURE OF WITNESS (include rank, rate, or grade as appropriate) [REDACTED] 17. DATE SIGNED (YYYYMMDD) 20110705</p> <p>RANK: src RANK: [REDACTED]</p>	

Ensure the administrative information in "SECTION 1-EMERGENCY CONTACT INFORMATION" matches the Soldier's ORB/ERB, LES, and SGLV.

Spouse and children must be enrolled in DEERS to add them on to the DD93.

Ensure the number of dependents listed on the DD93 match ORB/ERB, and LES.

All dependents must be added.

If the dependent addresses are different from the Soldier's address; this may indicate marital or custody concerns.

If the "Do Not Notify Due to Ill Health" has a name listed, question the Soldier. The Soldier may have a family member or next of kin that is sick and may require your assistance.

The areas with the Soldier's parental information is important. It lets us know how far their family is located and if the Soldier remains in contact with the parents.

Tab 1: Personal Information

Profiles

Profiles need to be kept on hand to understand a Soldiers' limitations, but more importantly, to understand what a Soldier CAN do. If a profile is not written in a way that clearly explains what a Soldier can do, seek clarification through the chain of command to the Battalion Physicians Assistant or Medical Officer.

Family Care Plan

Leaders need to discuss a Family Care Plan with any Soldier who is dual military and has dependent children. The FCP should address short term requirements, such as training exercises and duty, and long term requirements like deployments. Establishing a plan is not sufficient, the leader must evaluate if the FCP is feasible. The plan should be revisited once per quarter.

EFMP Summary

The Exceptional Family Member Program is an important factor in a Soldier's life and career, and leaders need to understand the requirements of their Soldiers who have exceptional family members. The counseling packet should have a summary of the EFMP, and highlight key points that the chain of command needs to be aware of.

Strip Map

Soldiers who live off post need to provide a strip map to their residence. Leaders and Soldiers should coordinate for a time when the leader can validate the strip map.

Tab 1: Personal Information

What a good profile looks like (1 of 2)

PHYSICAL PROFILE RECORD												
The proponent agency for this form is the Office of the Surgeon General												
SECTION 1: SOLDIER INFORMATION												
1. NAME (Last, First, Middle Initial)	2. RANK	3. DoD ID NUMBER	4. COMPONENT	5. CURORG	6. UIC							
7. UNIT, ORG., STATION, ZIP CODE OR APO, MAJOR COMMAND					8. AOC/MOS/SQU/JOB/TITLE							
SECTION 2: PERMANENT PROFILE												
9. REASON FOR PROFILE: (In Lay Terminology)			P	U	L	H	E	S	11. PROFILE CODES	12. PROFILING PROVIDER	13. APPROVING AUTHORITY	14. DATE
1			COMBINED PULHES					3				
SECTION 3: ACTIVE TEMPORARY PROFILE(S) AS OF:												
15. REASON FOR PROFILE: (In Lay Terminology)			16. SEVERITY	17. MECHANISM OF INJURY	18. DUTY STATUS	19. EXPIRATION DATE	20. DAYS ON PROFILE	21. PROFILING PROVIDER				
2										2		
22. TOTAL DAYS ON TEMPORARY PROFILE IN THE LAST: 12 months: ___ 24 Months: ___ DATE: ___												
SECTION 4: FUNCTIONAL ACTIVITIES												
24. A SOLDIER MUST BE REFERRED TO THE DISABILITY EVALUATION SYSTEM (DES) IF THERE IS AT LEAST ONE PERMANENT (P) "3" IN THE PULHES AND LIMITATION(S) NOTED IN THE FUNCTIONAL ACTIVITIES. TEMPORARY (T) LIMITATIONS DO NOT CAUSE REFERRAL TO DES.					23. IS SOLDIER AVAILABLE TO TAKE RECORD APFT? <input type="checkbox"/> YES <input type="checkbox"/> NO IF "NO", ANTICIPATED APFT AVAILABILITY DATE: _____							
INDICATE THOSE ACTIVITIES THAT THE SOLDIER CANNOT PERFORM BY PLACING AN "N" IN THE APPROPRIATE COLUMN(S).												
a. Physically and/or mentally able to carry and fire individual assigned weapon? P T												
b. Ride in a military vehicle wearing usual protective gear without worsening condition?												
c. Wear helmet, body armor, and load bearing equipment (LBE) without worsening condition?												
d. Wear protective mask and MOPP 4 for at least 2 continuous hours per day?												
e. Move greater than 40 lbs. (e.g. duffle bag) while wearing usual protective gear (helmet, weapon, body armor, LBE) up to 100 yards?												
f. Live and function, without restrictions in any geographic or climatic area without worsening condition?												
25. ADDITIONAL PHYSICAL RESTRICTIONS (CHECK IF APPLICABLE)												
<input type="checkbox"/> a. LIFTING/CARRYING RESTRICTION: MAXIMUM WEIGHT RESTRICTION: Permanent: ___ lbs. Temporary: ___ lbs.												
<input type="checkbox"/> b. STANDING LIMITATION: Permanent: ___ min Temporary: ___ min												
<input type="checkbox"/> c. MARCHING WITH STANDARD FIELD GEAR: Permanent: Time: ___ min / Distance: ___ mi												
26. SOLDIER NEEDS REFERRAL TO: <input type="checkbox"/> MEB <input type="checkbox"/> MAR2 <input type="checkbox"/> ND-PEB (USAR/ARNG ONLY)												
SECTION 5: MEDICAL INSTRUCTIONS TO UNIT COMMANDER (PERMANENT Temporary: Time: ___ min / Distance: ___ mi)												
RESTRICTIONS LISTED IN BOLD												
NAME:			RANK:		DoD ID NUMBER:		DATE:					
6			SECTION 6: ARMY PHYSICAL FITNESS TEST (SEE FM 7-22)					7				
28. APFT EVENT		YES	NO	YES	NO	29. ALTERNATE APFT (Only if Soldier is unable to do APFT 2 mile run)		YES	NO	YES	NO	
2 MILE RUN						APFT WALK						
SIT-UPS						APFT SWIM						
PUSH-UPS						APFT BIKE						
SECTION 7: PHYSICAL READINESS TRAINING CAPABILITIES (SEE FM 7-22; ACTIVITIES RELATED TO PERMANENT CONDITIONS ARE IN BOLD TYPE)												
30. 8												
SECTION 8: UNIT COMMANDER												
31. COMMANDING OFFICER:								32. DATE:				

DA FORM DA 3349,

2016

PREVIOUS EDITIONS ARE OBSOLETE

PAGE 1 OF 1

Tab 1: Personal Information

What a good profile looks like (2 of 2)

1. This section, 'Section 2: Permanent Profile', lists any permanent profile conditions (there could be several; for example: a hearing 2 profile and a lower extremity 2 profile). The 'Combined PULHES (Physical, Upper Extremity, Lower Extremity and Back, Hearing, Eye, Psychological) aggregates all of the permanent conditions with an overall PULHES. The text will be in bold.

2. This section, 'Section 3: Active Temporary Profile', lists any temporary profiles that the Soldier has currently. The text is not in bold (this is to distinguish it from the Permanent Profile section). In block 22 there is a listing of how many days the Soldier has been on a temporary profile within the last 12 months and within the last 24 months. Note that this figure is not specific to any individual condition and a Soldier could have been on a temporary profile for their shoulder for 3 months and then later their knee for an additional 2 months – i.e. it is just calculating total days on any temporary profile.

3. Block 23 indicates if the Soldier can take a record Physical Fitness test. If they can't then a best estimate is entered for when they are expected to be able to complete one.

4. This section lists an 'N' for any Soldier functional tasks that cannot be performed. Those listed in bold text correspond to permanent profile conditions and those in regular text correspond to the temporary conditions. If there is not an 'N' listed then the Soldier may perform this activity.

5. Block 25 lists some additional limitations related to lifting or carrying weight, prolonged standing and marching with field gear.

6. This section, 'Section 5: Medical Instructions to Unit Commander', lists instructions specific to the commander from the provider. Instructions in bold text are from the permanent profile. It is possible that the instructions in regular text (temporary profile instructions) contradict the ones in bold. If so **always follow those that are more restrictive**. A well written profile will also indicate in this section if the provider is recommending that a commander use an override for deployability or if the Soldier should be considered non-deployable and use of an override is not recommended.

7. This section, 'Section 6: Army Physical Fitness Test', lists what event the Soldier can perform and any alternate cardiovascular events. The indications in bold are from the permanent profile and those in regular text are from the temporary profile. Sometimes these can conflict as one may be more restrictive than the other. Go with the most restrictive indicator [Example: Soldier has a Permanent Hearing 2 profile which indicates they can do the run, pushups and sit-ups but the Soldier also has a temporary profile for their back which indicates no sit-ups and an alternate walk or bike for the PT test; for this Soldier the highest level of restriction would be that they perform pushups and then walk or bike for the cardiovascular event.]

8. This section, 'Section 7: Physical Readiness Training Capabilities', discusses activities that can be done and those that can't or must be modified. Often providers use premade templates inside of MEDPROS to generate these. For example, for a knee condition a provider could rate as mild, moderate or severe which will then auto-generate suggested restrictions in this block. A provider can of course modify as needed and must ensure that the restrictions in this block are in agreement with Soldier functional tasks and Physical Fitness test limitations. Any time that there is a possible conflict please call your provider for clarification.

Tab 2: Professional Development

Personal Goal Sheet (1 of 4)

Setting goals helps Soldiers take an active part in their professional and personal development. It allows them to think about the future, and helps to build resiliency and long-term thinking. Finally, it helps leaders and Soldiers better understand each other, and creates a way for them to work together in development. A method for setting goals is listed below, and the following page provides an example goal worksheets.

- ❑ **Step 1 (Define Your Dream):** One of the most important strategies for setting effective goals is to choose goals that are personally relevant and meaningful. These types of goals inspire and motivate you to push past obstacles and to persevere through hardships as well as just getting you excited to get out of bed in the morning.
- ❑ **Step 2 (Know Where You are Right Now):** The time for dreaming big must be balanced with an objectively honest self-analysis about where you are at this very moment. This is where you evaluate what assets you have to leverage, and what limitations are standing in your way.
- ❑ **Step 3 (Decide What You Need to Develop):** To begin closing the gap between where you are and where you want to go, you'll have to focus your attention and energy on the activities and thoughts that will have the greatest benefit and that are under your control. This means setting priorities: identifying which skill areas, knowledge areas, and competencies you need to build up in order to achieve your outcome goal.
- ❑ **Step 4 (Make a Plan for Steady Improvement):** Once you have figured out your priorities, you will need to figure out what needs to be accomplished daily and weekly. It is important to consider both the actions for each priority and the attitude that you want to have which are affirmations. Figure out what you need to do and how you want to be in order to reach your goals.
- ❑ **Step 5 (Set and Pursue Short-term Goals):** There is no short-term goal more important than the one you make for today. The present moment is the only place where you have any true control, which means that your personal life and your Army career are nothing more than the sum of all your "todays." If you can accomplish a small mission "today" and every day that follows, you can't help but move towards your dreams.
- ❑ **Step 6 (Commit Yourself Completely):** Sacrifice, discomfort, and setbacks are a part of the process. Do not let them erode your confidence and motivation. Find creative and strategic ways to post your goals so that your trip over them every day. Be sure to share your goals with those whom will reinforce your successes and hold you accountable when you're tired or distracted.
- ❑ **Step 7 (Continually Monitor Your Progress):** Monitoring your progress is important for two reasons. First, you are able to see progress and therefore stay motivated. Second, it shows you if something is not working so that you can change it.

Tab 2: Professional Development Personal Goal Sheet (2 of 4)

GOAL SHEET

RANK

1. Outcome Goal

2. Know Where You are Right Now

6. What is Your Commitment Strategy?

7. Monitor Your Progress

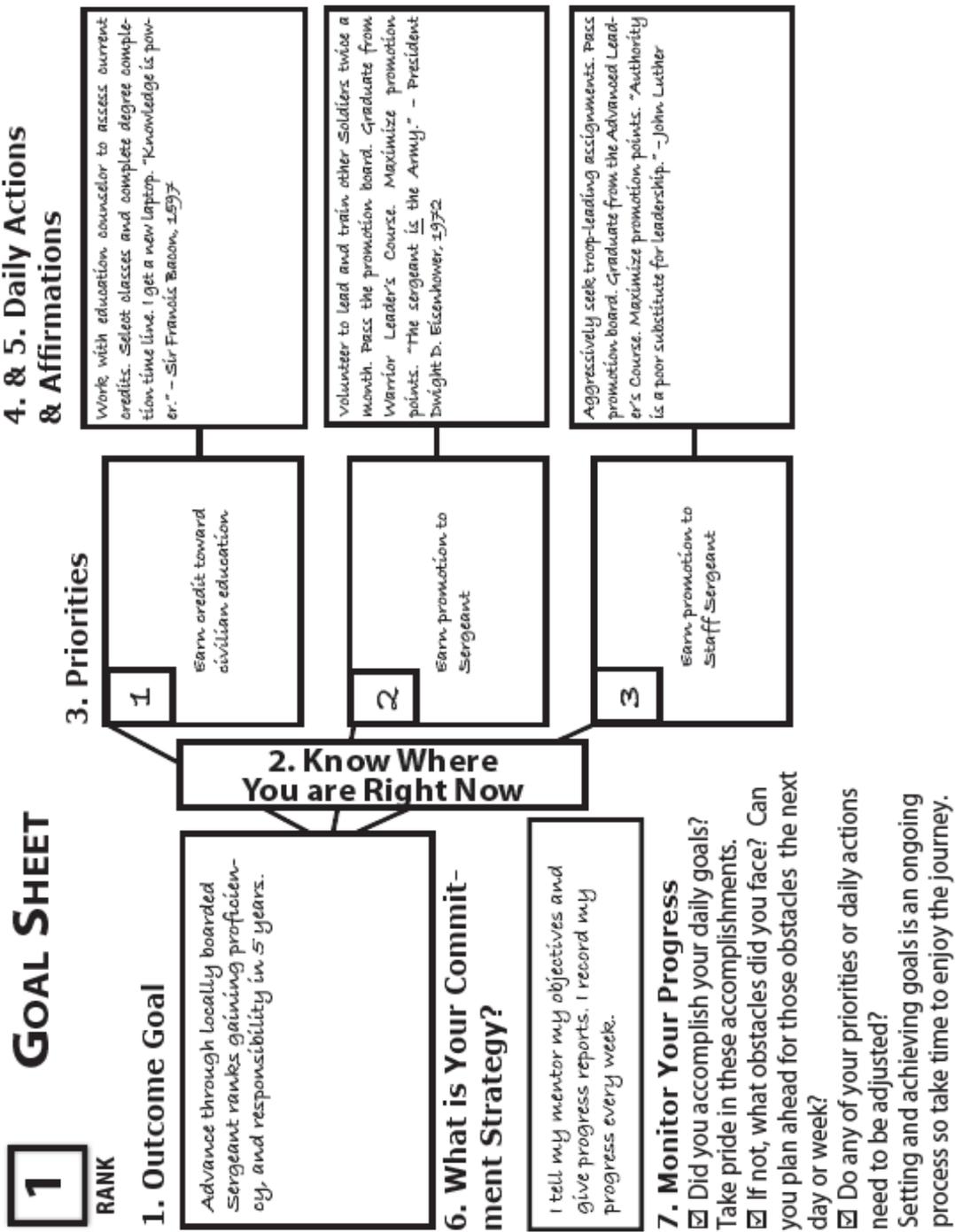
- Did you accomplish your daily goals? Take pride in these accomplishments.
- If not, what obstacles did you face? Can you plan ahead for those obstacles the next day or week?
- Do any of your priorities or daily actions need to be adjusted? Setting and achieving goals is an ongoing process so take time to enjoy the journey.

3. Priorities

4. & 5. Daily Actions & Affirmations

Tab 2: Professional Development Personal Goal Sheet (3 of 4)

Example Goal Sheet: Advance through locally boarded Sergeant ranks gaining proficiency and responsibility in 5 years.



Tab 2: Professional Development Personal Goal Sheet (4 of 4)

Graduate From Ranger School This Year

Steadily increase my physical fitness

- I lift shoulders and back twice a week for 40 minutes, varying the intensity of each workout.
- I run five days a week, averaging a 7:15 pace for at least 40 miles per week.
- I swim at least once a week for 800 meters.
- I march with a 35-pound pack six or more miles weekly.
- I shoulder more than my share of the task, whatever it may be, more than 100 percent.
- "If you want to shine, you got to burn."

Conduct mental preparations

- I talk to other Rangers for guidance.
- I read the book, "No Excuse Leadership."
- I keep a motivation tab in my patrol cap.
- I say the Ranger Creed daily.
- I can and have survived food and sleep deprivation.
- I am mentally alert, physically strong, and morally straight.
- My intestinal fortitude is rock solid and unwavering.
- "All I need now is to want it bad enough!"

I practice Infantry-based Leadership

- I read a section from FM 7-8 at least three times weekly.
- I practice writing OPORDs.
- I carry the Ranger Handbook with me at all times.
- I am a technically and tactically competent team player who makes my battle buddies successful.
- I know the basics of patrolling. I know the battle drills. I know troop leading procedures.
- Gallantly, I show the world I am a specially selected and well-trained Soldier.

I stay healthy throughout my preparations

- I eat four healthy meals a day and stay hydrated by drinking two liters of water daily.
- I stretch before and after all workouts.
- I tend to my feet and deal with all blisters and hot spots before they become issues.
- My equipment is well-maintained; my boots are broken in and comfortable.
- I am fresh and injury free on report day.
- Ranger School begins long before Ranger School begins.
- Pain is temporary, the tab is forever.



Tab 2: Professional Development

Professional Development Model by MOS

DA PAM 600-25 provides an overview of a “typical” developmental trajectory would be for any given MOS. This path is summarized, by MOS, on the milconnect website. At a minimum, NCOs will have the professional development model for their MOS in their counseling packet so that the NCO and leader understand together how to shape the junior NCO’s career. The developmental model can be found at:

<https://www.milsuite.mil/book/groups/smartbook-da-pam-600-25/overview>

Promotion Points Worksheet (DA-3555)

For processing of promotions, HRC automatically calculates promotion points based on the Soldier’s data in eMILPO and ATRRS. However, it is important for leader and led to understand where a Soldier stands, and how to improve their chance of promotion. This can be done with DA Form 3555, the Promotion Points Worksheet. Instructions for determining points can be found in AR 600-8-19.

Record Fire Scorecard (DA-3595-R), APFT Scorecard (DA-705), and Body Fat Content Worksheet (DA-5500)

These documents will help both the Soldier and the leader determine promotion points, and will also ensure that both understand how Warrior Tasks can be improved. The Body Fat Content Worksheet is only if required.

Tab 3: Unit Records

Training Certificates

Training information for a Soldier should be kept up to date in digital systems like ATRRS and DTMS, but it is also useful to keep a copy of those certificates in the counseling packet. It helps to teach the Soldier what is important information to have on hand, and it helps the leader and Soldier together manage when certain requirements are due, or what types of schooling would be most beneficial for the Soldier and unit.

Hand Receipts, OCIE Statement, and CIF Record

All Soldiers, regardless of rank, are expected to maintain accountability of their equipment. A copy of any hand receipts that the Soldier signs should be kept in the counseling packet, to include their OCIE Statement and CIF Record. This will allow the leader to assist with teaching the Soldier correct methods for property accountability, and to ensure that the Soldier has everything that they need to perform their duties. This information can also be used during counseling for discussion questions. For example: “How/where do you store your OCIE?” or “What equipment do you think you could use to do your job better?”

Tab 4: NCOER/Developmental Counseling

Regular developmental counseling is the Army's most important tool for developing future leaders. Counseling responsibilities are inherent in leadership. Leaders at all levels must understand the counseling process. More importantly, Army leaders must understand that effective counseling helps achieve desired goals and effects, manages expectations, and improves the organization.

Integration & Reception Counseling (DA-4856)

Within 24 hours of arrival to a new unit, Soldiers receive a reception and integration counseling. The reception and integration counseling serves two purposes:

- It identifies and helps alleviate any issues or concerns that new member may have, including any issues resulting from the new duty location
- It familiarizes new team members with organizational standards, roles and assignments

Other Event-Oriented Counseling (DA-4856)

Specific Instance of Superior or Substandard Performance: a counseling sessions tied to a specific instance of superior or substandard duty performance. Leaders use the counseling session to convey to the subordinate whether or not the performance met the standard and what the subordinate did right or wrong. Successful counseling for specific performance occurs as close to the event as possible.

Promotion Counseling: Leaders must conduct promotion counseling for all specialists, corporals and sergeants who are eligible for advancement without waivers. Army regulations require that Soldiers within this category receive initial (event-oriented) counseling when they attain full promotion eligibility and the periodic (performance/professional growth) counseling thereafter. Soldiers not recommended for promotion must be counseled as to why they were not recommended, complete with a plan of action to address these shortcomings.

Performance Counseling (DA-4856)

Performance-oriented counseling is a review of a subordinate's duty performance during a specified period. The leader and the subordinate jointly establish performance objectives and clear standards for the next counseling period. The counseling focus on the subordinate's strengths, areas to improve, and provides guidance on how subordinates can improve their performance.

Professional Growth Counseling (DA-4856)

Professional growth counseling includes planning for the accomplishment of individual and professional goals. During the counseling, leader and subordinate conduct a review to identify and discuss the subordinate's strengths and weaknesses. This conversation helps develop an individual development plan that builds upon strengths and improves shortcomings. Leaders can assist subordinates in prioritizing development efforts based upon perceived strengths and weaknesses. As part of professional growth counseling, leaders and subordinates develop a plan of action to assist the subordinates achieve their short and long term goals.

Frequency

Performance-oriented and professional growth counseling are routinely conducted together and are commonly referred to as "monthly counseling." Performance/Professional growth counseling is conducted monthly for E-1 to E-4 and quarterly for NCOs and Officers.

Tab 4: NCOER/Developmental Counseling Example Integration & Reception Counseling

DEVELOPMENTAL COUNSELING FORM		
For use of this form, see ATP 6-22.1; the proponent agency is TRADOC.		
DATA REQUIRED BY THE PRIVACY ACT OF 1974		
AUTHORITY:	5 USC 301, Departmental Regulations; 10 USC 3013, Secretary of the Army.	
PRINCIPAL PURPOSE:	To assist leaders in conducting and recording counseling data pertaining to subordinates.	
ROUTINE USES:	The DoD Blanket Routine Uses set forth at the beginning of the Army's compilation of systems or records notices also apply to this system.	
DISCLOSURE:	Disclosure is voluntary.	
PART I - ADMINISTRATIVE DATA		
Name (Last, First, MI)	Rank/Grade	Date of Counseling
Organization	Name and Title of Counselor	
PART II - BACKGROUND INFORMATION		
Purpose of Counseling: (Leader states the reason for the counseling, e.g. Performance/Professional or Event-Oriented counseling, and includes the leader's facts and observations prior to the counseling.)		
Reception and Integration:		
<input type="checkbox"/> Appearance <input type="checkbox"/> Physical Fitness <input type="checkbox"/> Formation / Appointments <input type="checkbox"/> Discipline <input type="checkbox"/> Personal Growth / Development <input type="checkbox"/> DUI / Drugs / Sexual Harassment / EO <input type="checkbox"/> Duty Position		
PART III - SUMMARY OF COUNSELING		
Complete this section during or immediately subsequent to counseling.		
Key Points of Discussion:		
This is your initial counseling; this counseling will inform you of what is expected from you during your time as a member of this platoon.		
Appearance: You will maintain the standard outline in AR 670-1 in addition to any policies / procedures. You will show up to first formation in the proper uniform with a proper hair cut and be clean shaven. You are required to carry your ID card, ID tags, paper and a pen at all times while in uniform.		
Physical Fitness: PRT is conducted Monday through Friday from 0630 to 0730. I expect you to participate and give 100% at all times. The Army Standard is 60 points in each event for a combined score of 180 points. I strongly encourage you to do your best as your PT score can make or break your promotion. The Platoon goal is a combined score of 250 points. You must maintain the standard established in AR 600-9 Army Height and Weight Program. If you fail to meet the standards you will be enrolled into remedial PRT or the Army Body Composition Program.		
Formation / Appointments: You will make all required formations. Should a situation arise in which you cannot attend a formation, ensure that you notify your Squad Leader or Section Sergeant. Failure to be on time as with all issues will be dealt with according to the severity of the situation. All first call formations will be at the company 15 minutes prior to 0630, unless otherwise stated. You will inform your NCO as soon as you schedule any appointments and provide them an appointment slip.		
Discipline: The true measure of discipline is doing the right thing even when no one is watching. I expect you to maintain good standards of self discipline, military bearing. You are an adult therefore you are responsible for your actions good or bad, if you hang around self destructing people you will become self destructive.		
Personal Growth / Development: You will enroll in SSD1 and you are strongly encouraged to take college level courses to further your education. Evaluate your short / long term goals and develop a plan of action in order to reach these goals. Keep motivated, take on new challenges and responsibility. Stay up to date with finances, save for emergencies, and look into investing for a better future.		
Drugs / DUI / Sexual Harassment / EO: Violations of these policies will not be tolerated; the maximum punishment will be sought after. Ensure you call a cab, have a DD, or use the squadron taxi fund. Say no to drugs, racist remarks, and sexual harassment.		
19D10 Skill Level: Performs duties as a crew member, operates and performs operator maintenance on scout vehicles. Cavalry Fighting Vehicle, crew-served weapons, and communication equipment. Loads, clears, and fires individual and crew-served weapons. Operates and performs operator maintenance on wheeled vehicles. Assists in the recovery of wheeled and tracked vehicles. Secures, prepares, and stows ammunition on scout vehicles. Performs mount and dismounted navigation. Serves as a member of an observation and listening post. Gathers and reports information on terrain features and enemy strength, disposition and equipment. Collects data for the classification of routes, fords, tunnels, and bridges. Performs dismounted patrols. Employs principles of cover and concealment. Requests and adjusts indirect fire.		
Your Chain of Command: Platoon Leader Platoon Sergeant Section / Squad Leader Team Leader		
OTHER INSTRUCTIONS		
This form will be destroyed upon: reassignment (other than rehabilitative transfers), separation at ETS, or upon retirement. For separation requirements and notification of loss of benefits/consequences see local directives and AR 635-200.		

Tab 4: NCOER/Developmental Counseling Example Performance/Professional Growth Counseling

DEVELOPMENTAL COUNSELING FORM For use of this form, see ATP 6-22.1; the proponent agency is TRADOC.		
DATA REQUIRED BY THE PRIVACY ACT OF 1974		
AUTHORITY:	5 USC 301, Departmental Regulations; 10 USC 3013, Secretary of the Army.	
PRINCIPAL PURPOSE:	To assist leaders in conducting and recording counseling data pertaining to subordinates.	
ROUTINE USES:	The DoD Blanket Routine Uses set forth at the beginning of the Army's compilation of systems or records notices also apply to this system.	
DISCLOSURE:	Disclosure is voluntary.	
PART I - ADMINISTRATIVE DATA		
Name (Last, First, MI)	Rank/Grade	Date of Counseling
Organization	Name and Title of Counselor	
PART II - BACKGROUND INFORMATION		
Purpose of Counseling: (Leader states the reason for the counseling, e.g. Performance/Professional or Event-Oriented counseling, and includes the leader's facts and observations prior to the counseling.)		
Performance and Professional Growth Counseling End of Month Counseling for _____		
PART III - SUMMARY OF COUNSELING		
Complete this section during or immediately subsequent to counseling.		
Key Points of Discussion:		
Duty Performance: Appearance: Physical Fitness: Accountability and Responsibility: Self Development: Promotion: Upcoming Events: The Fort Riley SLRRT is a tool used during developmental counseling to develop a comprehensive picture of the health and welfare of Soldiers and to manage and mitigate risk factors. As your direct supervisor, we have discussed specific behaviors that could be considered key indicators of risky behavior. During the session, I have identified your initial risk level as (circle one): Low / Medium / High		
OTHER INSTRUCTIONS		
This form will be destroyed upon: reassignment (other than rehabilitative transfers), separation at ETS, or upon retirement. For separation requirements and notification of loss of benefits/consequences see local directives and AR 635-200.		

Tab 4: NCOER/Developmental Counseling

NCOER Support Form (DA-2166-9-1A)

The NCOER Support Form provides a template for developing NCOs and tracking their progress. Regular developmental counseling will provide a way for leader and led to discuss ways to improve all aspects of a Soldier's life and career, as well as capture some of the accomplishments of the Soldier. The NCOER Support form provides a place to ensure that the NCO's most important accomplishments are kept on record. Keeping it up to date, and revisiting during each counseling session will allow the rater to develop a strong NCOER over the course of the rating period, rather than trying to remember key events when the time comes for a rating.

The Support Form can also provide a way to stress the importance of setting personal and professional goals. It should be developed along with the goals worksheet mentioned earlier. While discussing the input for the Support Form, the leader and led can also have a conversation on the Army Values and the attributes and competencies of the rated NCO. It gives the rated NCO a clear understanding of how they are seen by their rater and by others, and allows them to create a developmental plan.

Finally, the form lists out the rated NCO's rating chain.

Previous NCOERs

At least the last two NCOERs should be in the counseling packet. This allows the leader to discuss the best ways for an NCO to improve, and also identify areas that have already shown progress.

Tab 5: Adverse Counseling

Adverse Counseling (DA-4856)

Unfortunately, some Soldiers make poor decisions or show a lack of discipline, resulting in adverse actions. Counseling in these situations becomes even more important. Good, useful counseling does not simply reprimand a Soldier for their mistake. Rather, it should spark a conversation between leader and led to determine the reasons and stressors that might have led to the action. Why does the Soldier think they acted in that way? What does the Soldier think they could have done differently?

In addition to clearly understanding the situation, the leader and Soldier need to develop a reasonable plan of action to prevent further poor decisions. The plan should address ways to not only to avoid future problems, but to address the underlying issues and determine ways that the Soldier can continue to develop in a positive direction.

Article 15(s), Bar to Reenlistment, Flag Report

Maintaining documents related to adverse actions in the counseling packet help the Soldier and leader keep track of what punishments are still in place. It helps to make sure the Soldier and leader are both aware of any extra duty or restrictions, and also keep track of administrative actions that might need to be removed after a certain time period.

Tab 6: Tools to Help Learn Your Soldier

The Soldier and Leader Risk Reduction Tool

The Soldier and Leader Risk Reduction Tool (SLRRT) is not mandated for use during counseling. However, if a leader chooses to use another method, they must ensure that it is equally comprehensive, and can serve to form a foundation between Soldier and Leader that is based on trust, mutual respect, and empathy.

When used correctly, the SLRRT is an excellent method for developing mutual understanding and a solid relationship between Soldier and their first-line supervisors. The SLRRT and the questions that it asks are INEFFECTIVE when simply presented to the Soldier to fill out, or when used as a “check the box.” The tool is amazingly effective when used as a basis for an open-ended conversation.

Using the SLRRT as an outline, the following pages provide examples of open-ended questions that a leader might ask during counseling sessions. The leader must assess each Soldier individually – no set of questions will apply to everyone. After developing a relationship, they will better understand which counseling methods work best for each Soldier.

The actual counseling session is only the beginning of the process for the leader. While the first line leader will trust that the Soldier is providing honest and forthright answers, they must verify those answers through the use of available tools at echelon. Failing to do so puts the Soldier at risk and could result in a discipline failure or serious incident. We owe it to our Soldiers to show them we care about them and that they are part of the team by asking the hard questions and developing a plan of action to help them.

SLRRT Definitions of Risk:

Low	Soldier has no significant problems for which they are receiving appropriate support. The potential for adverse outcomes appears to be low.
Medium	Behaviors or concerns that place the Soldier at risk of serious problems if not addressed through appropriate actions (3.g., Soldier is experiencing serious financial, legal, family/relationship, alcohol, or other concerns, and is experiencing difficulty getting adequate assistance; Soldier is exhibiting a pattern of serious risk taking behavior). Senior leadership (Battalion commander/equivalent should be notified.
High	Behaviors or concerns that potentially place the Soldier or others in danger or harms way (e.g., life threatening risk taking behavior, serious performance problems that jeopardize team members safety, threat to self or others). Senior leadership (Brigade commander/equivalent and appropriate support channels should be notified immediately.

Tab 6: Tools to Help Learn Your Soldier

Harnessing the Knowledge of Peers

No matter how much effort a leader exerts, he may never be able to learn enough about a subordinate. Some subordinates put up a wall between themselves and their leader, making it extremely difficult for leaders to understand them. In these instances, leaders can harness the knowledge of that Soldier's peers. Peers often know more about each other than most leaders ever will. The methods in which leaders harness the knowledge of peers is limited only to that leader's imagination. Below are a few techniques that leaders can use to acquire peer feedback on subordinates:

- Peer survey (see below).
- Ask subordinates to anonymously fill out a note card in regard to a specific query. Example: *"Write down who you think will get in trouble this weekend."*
- Small group discussions.

Peer Survey Questions

Which Soldiers are most likely to get arrested within the next three months?

Which Soldiers are most likely to get hurt during a personal recreational activity?

Which Soldiers is the least responsible Soldiers off-duty?

Which Soldiers are most likely to get in a fight with their spouse/girlfriend?

Which Soldiers are most likely to get in a fight?

Which Soldiers drink too much?

Which Soldiers are most likely to use illegal drugs?

Which Soldiers have financial trouble?

Which Soldiers have recently gotten in trouble off-duty and the chain of command does not know about it but should?

Which Soldiers have behavioral health problems, are not seeking help, and should seek help?

Which Soldiers are most likely to hurt themselves?

Which Soldiers outside of your Platoon do you believe are at risk?

SLRRT Financial

Does the Soldier have financial or employment concerns, such as inability to cover basic monthly expenses, home foreclosure, difficulty meeting child support payments, or inability to repay loans?

Conversational Questions

1. Describe your military pay compensation. This will indicate whether or not the Soldier understands how military pay compensation plan?
2. How much do you save each month? Why?
3. How much are you paying for rent? Do you think that is too much?
4. Do you financially support family or friends back home?
5. Walk me through your monthly expenses and budget.

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Created a comprehensive budget and abides by it	
	Has multiple incomes and few dependents	
MEDIUM	Attended a budget class	
	Does not pay off credit cards monthly	
HIGH	Has loans over 15% interest	
	Lives beyond his means	

Remarks:

Note any additional risk activities and mitigation factors below and explain the overall assessment of the Soldier on this SLRRT.

You can use a comment section like this in your counseling packet to add to the risk assessment developed by using conversational questions. The following pages of this guide do not contain a comment section when listing example conversational questions.

SLRRT Health (1 of 5)

Has the Soldier experienced an accident, injury, illness, or medical condition that resulted in current fitness for duty limitations?

Conversational Questions

1. Describe in your own words what you think the physical requirements are for the military job you have. What does the medical recovery plan look like? What does the Soldier's personal plan look like?
2. Have you had surgery in the past year? Do you have surgery planned? For what?
3. On a scale of one to ten, how would you rank your health? Why?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Performs all physical duties without trouble	
	No planned surgeries	
MEDIUM	Can perform most MOS core tasks	
	Minor surgeries planned in the future	
HIGH	On a long term profile for an illness or surgery recovery	
	Cannot accomplish an MOS core task	

Does the Soldier have a current medical profile (temporary or permanent)?

Conversational Questions

1. How do you feel about having a profile?
2. What is your profile for and what does it restrict you from? (compare with actual profile)
3. How does your chain of command prevent a stigma being attached to those on profile?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Few tasks affected by profile	
	Mood not affected by profile	
MEDIUM	Profile is used as an excuse to get out of key training	
	Profile prohibits PT with unit	
HIGH	Core MOS tasks prohibited by profile	
	Profile prohibits participation in enjoyable recreation for a prolonged period	

SLRRT Health (2 of 5)

Has the Soldier deployed to a location where there was hostile fire or they received hazardous duty pay?

Does the Soldier have any current deployment related concerns?

Conversational Questions

1. How has your reintegration with friends and family been?
2. What has been your toughest struggle since you came back?
3. Expand on any instances you may have experienced the following: fear, anxiety, lack of focus, sadness, changes in your sleep schedule, crying spells, or nightmares?
4. What are your thoughts on deploying? Do you want to deploy? Why?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	At peace with the deployment	
	Has an active support network	
MEDIUM	Experienced direct combat	
	Diagnosed with PTSD	
HIGH	Wounded in combat	
	Lost someone close	

Is the Soldier currently experiencing problems related to sleep (e.g. trouble falling asleep, trouble staying asleep, performance problems related to sleep, using alcohol or other substances to fall asleep)?

Conversational Questions

1. How much do you sleep on average per night? (7-9 is optimal) Is that more or less than normal? Is that amount enough?
2. How often do you have trouble getting your standard amount of sleep? What do you think are the reasons?
3. What have you done to try to get more sleep? Is it working?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	No trouble falling asleep	
	Regularly gets seven or more hours of sleep	
MEDIUM	Regularly uses prescription drugs to fall asleep	
	Has had spells of sleeplessness	
HIGH	Less than five hours of sleep per night	
	Performance significantly impacted by lack of sleep	

SLRRT Health (3 of 5)

Does the Soldier tend to withdraw or socially isolate themselves from others?

Conversational Questions

1. Describe your fire team / squad you are assigned to. Illustrate how you view yourself inside of that team?
2. Who do you hang out with in your unit?
3. What are your hobbies? Does anyone else in the unit do them?
4. Are you an introvert or an extrovert? When would you spend time with a group vs spending time by yourself?
5. How often do you pray or attend church? If so, what church do you attend?
6. Can you describe how (if) you seek spiritual or faith support?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Regularly socializes with squadmates outside of work	
	Participates in weekend activities	
MEDIUM	Rarely leaves his room	
	Dislikes several squadmates	
HIGH	Few, if any, friends in the area	
	No known source of external support or strength	

Has the Soldier exhibited excessive anger or aggression in the past three months?

Conversational Questions

1. After a stressful day, how do you typically relax?
2. Describe your behavior around your family and friends when you are frustrated. Illustrate any coping mechanisms you use when dealing with the frustration?
3. Describe how you deal with your anger?
4. Expound how you think your anger affects your work performance or relationships (professional and personal)?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Conscious of his anger and controls it appropriately	
	Familiar with anger reduction techniques	
MEDIUM	Acknowledges anger affects his mood/work	
	Uses physical coping mechanisms (i.e. punching bag)	
HIGH	Anger leads to regrettable decisions	
	Does not deal with anger; lets anger build up	

SLRRT Health (4 of 5)

Has the Soldier experienced any condition that may be considered cruel, abusive, oppressive, or harmful, to include hazing or assault?

Conversational Questions

1. Take a few minutes to characterize and describe your fire team / squad. Describe your professional relationships with each teammate?
2. How would you describe your relationship with your parents/family?
3. Describe your fire team / squad's interpretation of the Army's values?
4. Who is your roommate? How would you describe them? Illustrate any points of contention you may have with your roommate?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Well accepted by squadmates	
	Morally opposed to hazing	
MEDIUM	Some confrontations with squadmates	
	Experienced hazing personally	
HIGH	Routinely harassed by squadmates	
	Poor relationship with parents	

Has the Soldier experienced difficulty coping with a loss (e.g. death of a close friend, family member, team member, social group)?

Conversational Questions

1. What recent losses have occurred recently in your family and friends? How do you think it has affected you?
2. What steps have you taken to help cope with your loss? Are they working?
3. How has your family taken the loss?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Experienced death before	
	Frequently talks to friends and family about his loss	
MEDIUM	Dependent not coping with loss well	
	Regrets associated with the loss	
HIGH	Lost someone close	
	First loss of someone close	

SLRRT Health (5 of 5)

Is the Soldier experiencing any difficulties getting the assistance he needs on- or off-post?

Conversational Questions

1. What services do you feel the Army, Fort Riley, and the 1st Infantry Division adequately provide to assist with health concerns of you and your family? How could we do it better? Why?
2. Where do you and your family receive health services? On or off post? Location? Describe the services given and your satisfaction in services received?
3. What appointments have you had the most trouble with? Why?
4. How are you treated by others because of your health appointments?

* The majority of off-post providers are psychiatry or pain management related; therefore a counselor should consider if the Soldier is on polypharmacy (four or more daily medications, must have a profile stating such, and is on the BDE Surgeon memo to commanders) and if the Soldier had a recent admission for psychiatry, surgery, trauma, or another medical emergency (verifiable with the BDE SURG)

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	No serious complaints about medical/health related services	
	No recurrent health concerns	
MEDIUM	Has reoccurring problems with medical/health related services	
	Large family and/or young children	
HIGH	EFMP	
	Shunned by others because of appointments	

Does the Soldier have any concerns about medical care, medications, or supplements they are taking?

Conversational Questions

1. What is your opinion about the doctor's diagnosis of your current condition?
2. How does your current medications and/or supplements affect your work performance and/or your relationships (both personal and professional)?
3. Is the care you are receiving/have received beneficial? What do you want to change about it?
4. Describe the medications you are currently taking?
5. Illustrate any problems you or your family have experienced getting follow-up appointments or prescription medication refills?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	Well informed about the limitations his medications place on him	
	Work performance not affected	
MEDIUM	Dislikes his medication or ordered to take medication	
	Problems with refills	
HIGH	Irregularly takes medication	
	Mood, performance, and/or relationships negatively affected	

SLRRT Family/Relationships (1 of 2)

Is the Soldier experiencing serious marital/relationship issues or immediate family concerns, such as serious illness in a family member?

Conversational Questions

1. Characterize your personal relationships at home in regards to boyfriend/girlfriend, spouse, parents, and friends?
2. When a contention arises in one of your personal relationships, who do you seek out to talk to?
3. What do you think you would do if your worst case scenario happened?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	Capable of keeping work and personal life separate	
	Active support network	
MEDIUM	Breakup with significant other	
	Serious argument with spouse/significant other	
HIGH	Divorce not friendly	
	Recent unfavorable diagnosis to self or family member	

Has the Soldier been involved in any incident of domestic violence or child abuse/neglect?

Conversational Questions

1. Describe any experience you may have with both domestic violence and child abuse/neglect both in your childhood and your adulthood?
2. Illustrate any personal relationship disagreement / argument where the intensity of your anger tempted you to act in a violent manner?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	Had a happy childhood	
	Had good grades growing up	
MEDIUM	A close friend or family member was abused	
	Grew up in foster homes	
HIGH	Received/committed abuse	
	Left family before	

SLRRT Family/Relationships (2 of 2)

Has anyone (e.g. spouse, other family member, friends, fellow Soldier) expressed concern about the Soldier's behavior?

Conversational Questions

1. How do you think others describe you?
2. Depict any conversations you have had with friends, family members, or fellow Soldiers in regards to your personal and professional behavior?
3. Describe how you think your friends, family members, or fellow Soldiers would approach you or your chain of command if they thought you were in trouble / harm?
4. What part about you do you want to change?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Has a realistic opinion of himself	
	Does not want to change anything major about himself without a realistic plan	
MEDIUM	Complains frequently	
	Approached about his behavior before	
HIGH	Spouse/friend alerted the chain of command about his behavior	
	Recently displayed erratic/unusual behavior	

Has the Soldier expressed any suicidal thoughts or actions, or expressed a desire to harm others?

Conversational Questions

1. Describe any instances where you have felt sad, lonely, low self-esteem, guilt, worthlessness, or difficulty in concentrating, remembering details, and making decisions (symptoms of depression). Did this occur in the past 30, 60, 90 days?
2. What do you think about when you are depressed?
3. Explain any time you were aggressively seeking approval in such a way that it made you the center of attention?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	No signs of depression	
	No change to patterns	
MEDIUM	Sees behavioral health about suicidal thoughts	
	Craves attention, negative or positive	
HIGH	Aggressively expresses thoughts of suicide	
	Self inflicted injuries	

SLRRT Professional/Discipline (1 of 6)

Has the Soldier received negative counseling or evaluations since arriving at the current unit or organization?

Conversational Questions

1. What event sparked your last negative counseling and when did you receive it?
2. When did you last receive a positive counseling and for what event?
3. Describe both the last meaningful positive and negative counseling you received?

Assessment Suggestions

<u>Assessment Level</u>		<u>Mitigation</u>
LOW	First/minor counseling incident, admits wrongdoing, accepts responsibility fully	
	Wants to move forward and recover from the incident and prove himself in the future	
MEDIUM	Not sure the Army was the right choice but not certain of what he wants to do	
	Is not sure a recovery is possible but believes in trying	
HIGH	Multiple/major counseling refuses to accept any responsibility	
	Dislikes the Army, wants out immediately	

Has the Soldier been unsuccessful in meeting military requirements of standards (e.g. duty performance, PT, weight control, weapons qualification, MOS training)?

Conversational Questions

1. When was the last good conduct medal you were awarded?
2. When is your reenlistment window and what are your intentions/plans?
3. What are your commander's current training requirements? Illustrate any challenges you have in meeting those training requirements?
4. Where do you feel you could improve as a professional?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Created a plan to overcome his failure	
	Failed due to temporary condition (medical, family)	
MEDIUM	Previously failed an Army standard	
	Wants to stay in the Army but showing no visible efforts to meet Army standards	
HIGH	Currently failing to comply to Army standards	
	FLAGGED and/or barred	

SLRRT Professional/Discipline (2 of 6)

Has the Soldier been denied promotion or attendance to schools, or barred from reenlistment for any reason?

Conversational Questions

1. What have some of the Army professional schools/training opportunities that you want to attend? What has prevented you from attending/participating?
2. Illustrate where you think your professional performance currently resides in regards to your rank?
3. How would you compare your opportunities in the current civilian sector to a career in the Army?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	Has effectively identified the problem and is actively addressing it	
	Demonstrated tangible progress towards overcoming bar	
MEDIUM	Identified problem but is not addressing It appropriately	
	Not certain the Army is the correct career choice	
HIGH	Has not identified or admitted that there is a problem to be addressed.	
	Dislikes the Army and is certain of ETS	

Is the Soldier currently undergoing a UCMJ action?

Conversational Questions

1. How are you dealing with the stress of your most recent UCMJ or disciplinary action?
2. Are you receiving support? (ie TDS, chaplain, chain of command, family)

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	First/minor UCMJ violation, admits wrong doing, accepts responsibility	
	Cares about the Army and wants to be a good Soldier	
MEDIUM	Not sure the Army was the right choice but not certain of what he wants to do	
	Is not sure a recovery is possible but believes in trying	
HIGH	Multiple/Major UCMJ violation and refuses to accept any responsibility	
	Dislikes the Army; wants out immediately	

SLRRT Professional/Discipline (3 of 6)

Has the Soldier ever been involved in alcohol or drug related incidents (in the past three years) and/or tested positive on a urinalysis? Refer to Army Substance Abuse Program at the time of incident and closely monitor Soldier's progress.

Conversational Questions

1. When was the last time you were selected for a drug / alcohol test?
2. Describe any time your friends or family members were involved in Substance Abuse?
3. Are any of your current friends or family members involved in Substance Abuse?
4. Do you think you will ever do it again? Why?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	Takes full responsibility for actions/ wants to stay in the Army	
	No/Low contact with Alcohol/Drug situations or individuals	
MEDIUM	Tries to mitigate/reduce personal responsibility for actions	
	Completed Army Substance Abuse Program	
HIGH	Takes no responsibility for action blames the Army or others	
	Maintains routine contact with Drug/Alcohol situations or individuals	

Has the Soldier been command referred for any assistance (e.g. legal, financial, spiritual, alcohol, family/relationship, behavioral health, other)?

Conversational Questions

1. Are you willing to expand on the last time you talked with a Chaplain, MFLC, and counselor? Would you care to discuss with me what you talked about?
2. What type of support have you felt like you needed from a professional?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	Completed in the past and no signs of remission	
	Major stabilizing life changes between referral and present (happily married, promoted)	
MEDIUM	Currently attending	
	Appealing referral	
HIGH	Referred because of negative behavior	
	Shows no sign of remorse	

SLRRT Professional/Discipline (4 of 6)

Has the Soldier received a citation for speeding (ten mph over the limit) or reckless driving in the past six months?

Conversational Questions

1. State the last time you were pulled over by law enforcement?
2. How much over the speed limit do you normally drive? Why?
3. What type of car(s) do you own? Why did you buy it?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	Owens low/standard performance vehicle	
	Has not received moving violation in past 24 months	
MEDIUM	Owens above average performance vehicle	
	Received a moving violation in the past 24 months.	
HIGH	On-post driving privileges revoked previously	
	Received multiple moving violations in the past 24 months	

Has the Soldier been cited for engaging in risky behavior while in a vehicle (e.g. texting while driving, not utilizing a hands-free cell phone while driving, riding without a seatbelt)? Has the Soldier been informed that such activities are inherently unsafe, in violation of law and policy, and potentially punishable under UCMJ?

Conversational Questions

1. When was the last time you were counseled about the effects of reckless driving on yourself and others?
2. What is the current cell phone policy on Ft Riley and in the State of Kansas?
3. What is the punishment for being caught for violating these laws?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	Does not own or drive a car.	
	Shows clear understanding of Ft Riley cell phone driving policy and adheres to it.	
MEDIUM	Shows moderate understanding of the Ft Riley cell phone driving policy and adheres to it.	
	Believes policy is too strict and does not agree with it.	
HIGH	Previous violation of cell phone driving Law/Policy.	
	Shows no understanding or willingness to comply with Law/Policy	

SLRRT Professional/Discipline (5 of 6)

Does the Soldier drive a motorcycle? If yes, does the Soldier have the required privately operated motorcycle (POM) training IAW AR 385-10 and post requirements?

Conversational Questions

1. How many times have you attended motorcycle training? When and where did you participate?
2. What are the minimum standards to operate a motorcycle on post?
3. What are the differences between riding your motorcycle the minimal standards on- and off-post?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Displays clear understanding of motorcycle policies and adheres to them	
	Has been a motorcycle operator longer than 24 months	
MEDIUM	Displays baseline understanding of motorcycle policies and adheres to them	
	Has been a motorcycle operator for six to 24 months	
HIGH	Has no clear understanding of motorcycle policies	
	Has been a motorcycle operator for less than six months	

Does the Soldier engage in any other potentially hazardous recreational activities while off-duty (e.g. skydiving, riding all-terrain vehicles, rock climbing)?

Conversational Questions

1. What are some of your hobbies?
2. What are some activities that you would like to get involved in?
3. Expound on the legal training requirements in these activities?

Assessment Suggestions

<u>Assessment Level</u>	<u>Activity</u>	<u>Mitigation</u>
LOW	Does not participate in high risk activities	
	Participates in one high risk activity with previous training and experience	
MEDIUM	Participates in multiple high risk activities with previous training and experience	
	Moderately participates in high risk activities with training and previous experience	
HIGH	Participates in a high risk activity(ies) with no training and limited or no experience	
	Previously hurt in a high risk activity	

SLRRT Professional/Discipline (6 of 6)

AR 190-11 requires all privately owned weapons that are brought onto military installations be properly registered with the Provost Marshall. Is the Soldier in compliance with the provisions of AR 190-11 as they apply to registration of privately owned weapons? If yes, has the Soldier attended an approved firearms safety class/course?

Conversational Questions

1. Describe the number and type of personally owned weapons you have. In what state did you receive a carry and conceal license?
2. How often do you participate in shooting activities off-post (going to a range, completion, friend's property)?
3. Explain the current Fort Riley policy on privately owned weapons?

Assessment Suggestions

Assessment Level	Activity	Mitigation
LOW	Displays clear understand of Ft Riley policy and adheres to it	
	Firearms recreation is purpose (i.e. hunting, skeet, competition)	
MEDIUM	Not completely clear on Ft Riley Gun policy, may have accidentally violated it	
	Limited firearms experience but still owns firearm	
HIGH	Carries weapon in vehicle or on person off post for personal defense but has no Concealed Carry License	
	No firearms experience prior to military	

Tab 6: Tools to Help Learn Your Soldier

The Suicide Intervention Assessment Tool (SIAT)

All first line leaders on Fort Riley go through Suicide Intervention Assessment Tool training. If you are new to the organization, ensure that your company leadership is aware if you have been through the simple training. Battalion Unit Ministry Teams (UMT) and Company Leadership are capable of providing the easy training.

Once first line leaders know and understand their Soldiers better, they can see if something is wrong – if there might be something in a Soldier’s life that is driving them toward suicidal thoughts or actions. The SIAT is a simple tool to help the leader assess the situation and determine what action to take next. As with any tool, what is most important is to use common sense and good judgement.

SUICIDE INTERVENTION ASSESSMENT TOOL

1. Current Plan

No identified plan	0
General suicide idea	0.5
Specific plan with means	1

2. Prior Factors

No suicidal/MH history	0
Impacted by suicide/MH	0.5
Previous attempt/gesture	1

3. Resources

Strong support system	0
Limited support system	0.5
No support system	1

MH=Mental Health

SUICIDE INTERVENTION ASSESSMENT TOOL

Total Points	Threat Level	Course of Action
0	Low	Monitor & assess as necessary, follow-up
0.5	Medium	Refer to Chaplain, Medical Clinic or CS (non-emergency)
1		
1.5	High	Urgent referral to Chaplain, Aid Station or BH for assessment
2		
2.5	Critical	Escort immediately to BH, ER or CS for care
3		

Remember the Common Sense Factor
If you think they need help, GET IT!

CS=Combat Stress, BH=Behavioral Health

Conclusion

A counseling session should *rarely* be a one way conversation from the leader to the Soldier, but rather an opportunity for the leader to learn and understand the Soldier through a two-way dialogue. Therefore, the Soldier should do most of the talking and the leader to merely prompt. Regardless of the strategy or techniques used, the qualities of a good leader remain unchanged: display respect for the Soldier, self-awareness, cultural awareness, empathy, and credibility. Every counseling session includes a risk mitigation discussion and a growth discussion. Typically, counseling for a high-risk Soldier includes a larger risk-mitigation discussion and counseling for a low-risk Soldier focuses more on growth. Eye contact, a body posture that reflects the desired mood, and non-verbal recognition cues, together known as active listening, are instrumental in any counseling session. Note taking is critical to capture the discussion for future reference.

Generally, a good counseling session follows this format: 1. open the session with a clear purpose statement; 2. discuss the identified issues; 3. develop a plan of action together, including leader responsibilities and assessment criteria; and 4. close the session by summarizing the key points and ensuring the subordinate understands what was discussed and agrees to the plan of action.

Should the leader identify any risk indicators that require immediate attention (e.g. suicidal thoughts), they should deviate from the counseling plan and conduct immediate mitigation using related and available resources (e.g. chaplain, behavioral health, etc.). If the Soldier makes statements that could be criminally/administratively self-incriminating, the leader must halt the session, inform them of the offense for which they are now suspected and advise the Soldier of their Article 31 Rights in accordance with DA Form 3881.

When discussing the Soldier's capability and training, keep the fundamentals in mind. The 1st Infantry Division and Fort Riley use the BRO Big 9 and Phantom Warrior 5 as the standard in everything we do. We need to master these concepts, and keep ourselves and our Soldiers focused on them.

Remember: live the Army Values and treat others as you would be treated. It all boils down to engaged leaders that lead by example, all the time. 1ID and Fort Riley Soldiers will always be Brave, Responsible, and On-Point for the Nation.

Duty First!

**NO MISSION TOO DIFFICULT,
NO SACRIFICE TOO GREAT**



DUTY FIRST!