



DEPARTMENT OF THE ARMY
U.S. ARMY MANEUVER SUPPORT CENTER OF EXCELLENCE
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FORT LEONARD WOOD, MO 65473-8300

AMIM-LDW-A (15-1a1)

17 MAR 2021

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Fort Leonard Wood Commander's Ready and Resilient Council Charter

1. Purpose: To renew the Fort Leonard Wood Commander's Ready and Resilient Council (CR2C) Charter.
2. References:
 - a. AR 600-20 (Army Command Policy).
 - b. AR 600-63 (Army Health Promotion).
 - c. HQDA EXOD 037-13, Ready and Resilient Quick Wins.
 - d. Department of Army Pamphlet 600-24, Health Promotion, Risk Reduction, and Suicide Prevention.
3. Mission: The mission of the CR2C is to identify health promotion needs for the community of Fort Leonard Wood (FLW). This will be done by evaluating population needs, assessing and integrating existing programs, identifying health promotion-related redundancies and voids, and coordinating targeted interventions. The CR2C will support a comprehensive collaborative effort to optimize the well-being of the total force and the supporting community.
4. Scope: Army health promotion is defined as any combination of health education and programs to include, political and economic interventions designed to facilitate behavioral and environmental changes conducive to the health and well-being of the Army Community. For the purpose of the CR2C, this charter focuses on the local Army community which includes Service members, Families, Department of Defense (DoD) Civilian employees, Retirees, and community members affected by the programs that CR2C impacts. The CR2C focus is the FLW community which includes, Service members, Family members, DoD Civilians, Retirees, and community partners external to the installation. Outreach to these constituencies should be done keeping the target market in mind while utilizing all forms of media available to advertise the initiatives of the CR2C is to maximize readiness; that is, increase warfighting ability and work performance while observing risk-reduction strategies and implementing or invigorating

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programs which support readiness. Ready and Resilient programs must consider a broad range of health related factors and should address the following domains of readiness: behavioral health, spiritual health, social health, environmental health, and physical health.

a. Behavioral and spiritual health interventions reduce self-destructive behaviors decrease the risk of suicides, foster spiritual well-being, and overall resilience.

b. Environmental and social programs promote and sustain healthy lifestyles, strengthen community action, and encourage proactive public health and wellness policies.

c. Physical health programs achieve optimal physical wellness and nutritional behaviors.

5. Responsibilities:

a. The Senior Commander (SC) will:

(1) Chair the quarterly CR2C General Officer Steering Committee (GOSC); and represent the Maneuver Support Center of Excellence (MSCoE) at the Training and Doctrine Command (TRADOC) Ready and Resilience Council engagements.

(2) Appoint personnel to facilitate the CR2C Council of Colonels (CoC).

(3) Appoint a Community Ready and Resilient Integrator (CR2I).

(4) Ensure the CR2C is staffed with members who have the authority and responsibility to provide resources to assist with the achievement of the CR2C goals, and are qualified and effective in synchronizing installation efforts and affecting change.

b. The MSCoE Chief of Staff (CoS) will:

(1) Chair the CR2C CoC.

(2) Designate initial and subsequent members, when required, to ensure the CR2C membership consists of members who are qualified and effective in synchronizing installation efforts and affecting change.

(3) Provide guidance, oversight, and resources to the CR2C.

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(4) In the SC's absence, represent MSCoE at the TRADOC CR2C engagements.

c. The Garrison (Installation) Senior Chaplain coordinates and oversees the Installation Resilience Campus.

d. The Garrison Commander (GC) directs and coordinates subject matter expertise to include Army Community Service, Army Substance Abuse Program, Directorate of Garrison Human Resources, Directorate of Family and Morale, Welfare, and Recreation, and the Directorate of Emergency Services.

e. The U.S. Army Medical Department Activity (MEDDAC), FLW Commander:

(1) Facilitates the Installation Senior Medical Council.

(2) Serves as the principal advisor to the SC for the Army Health Promotion Program.

(3) Resources health promotion programs within U.S. Army Medical Command (MEDCOM) guidance and budgetary constraints.

f. Bridgade and ITRO Commanders:

(1) Participate in the CR2C process.

(2) If unable to participate, ensure that their CR2C representative has the authority and responsibility to commit organizational resources to achieve CR2C goals, objectives, and installation health promotion priorities.

g. Community Ready and Resilient Integrator:

(1) Serves as a special staff to the SC for installation ready and resilience; coordinates, facilitates, and records CoC and GOSC CR2C events.

(2) Implements and monitors the installation's ready and resilience static plan. Develops measureable activities, developing standards and metrics. Oversees installation health promotion improvement using existing measures and metrics where possible and develops additional measures and metrics as needed.

(3) Ensures the evaluation of the community needs and baseline assessments; quality assurance review is conducted once per year or as otherwise directed by the

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SC. The purpose of the review is to objectively evaluate installation ready and resilience programs, identify areas that need improvement, develop an improvement plan, and identify required/needed resources.

(4) Maintains a comprehensive view of installation health promotion programs; processes and analyzes data resulting from any assessments or evaluations derived from the assessments and evaluations.

(5) Identifies and eliminates redundancies and voids in the programs and services offered by evaluating population needs and assessing existing programs.

(6) Initiates and coordinates preventive interventions which directly impact the total population to include Service members, Families, DoD Civilians, Retirees, and the community.

(7) Promotes and oversees Ready and Resilient initiatives that address community needs such as; behavioral health interventions; media awareness campaigns; classes, seminars, and workshops; policy changes, resource coordination/reorganization; and other initiatives to accomplish required goals. Existing programs may be used to meet these needs.

(8) Develops and implements means to allow commanders to monitor ready and resilient goals and objectives for their commands.

(9) Ensures necessary ready and resilient knowledge, skills, and training are available for the total population.

(10) Utilizes the TRADOC deliverables matrix to evaluate program efficacy. The TRADOC deliverables matrix includes the generation for the Program Status Report (PSR) which clearly defines metrics of performance. The reporting of the metrics will be completed through the submission of the PST quarterly.

(11) Coordinate the quality of assurance review and evaluates CR2C satisfaction and effectiveness surveys, reporting on findings as required.

6. Core Membership

a. The CoC and GOSC will meet quarterly. The Community will identify decisions, RFIs, and best practices for presentation at the quarterly TRADOC CR2C meetings.

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b. The CR2C GOSC participants include (those with * indicate voting members and A indicates quarterly attendance):

- (1) Senior Commander (Chair)*
- (2) Commandants *
- (3) Command Sergeant Major (CSM), MSCoE*
- (4) CoS, MSCoE A
- (5) GC A
- (6) CSM, U.S. Army Garrison (USAG), FLW A
- (7) Brigade Commanders A
- (8) USMC Detachment Commander A
- (9) U.S. Navy Detachment Commander A
- (10) U.S. Air Force Detachment Commander A
- (11) Commander, MEDDAC A
- (12) Garrison (Installation) Senior Chaplain A

c. The CR2C CoC participants include (those with * indicates voting members and A indicates quarterly attendance)

- (1) CoS, MSCoE (Chair) *
- (2) GC *
- (3) Brigade Commanders *
- (4) USMC Detachment Commander *
- (5) U.S. Navy Commander A
- (6) U.S. Air Force Detachment Commander A

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- (7) Commander, MEDDAC *
- (8) Garrison (Installation) Chaplain *
- (9) CR2I A
- (10) Staff Judge Advocate A
- (11) Director, Emergency Services A
- (12) Director, Human Resources A
- (13) Director, Family, Morale, Welfare, and Recreation A
- (14) Director, MSCoE Safety Office A
- (15) Manager, Garrison Safety Office A
- (16) SHARP Coordinator A
- (17) Manager, Army Substance Abuse Program A
- (18) Manager, Equal Employment Opportunity Office A
- (19) Manager, Equal Opportunity Office A
- (20) Manager, Ready and Resilient Center A
- (21) Criminal Investigation Command A
- (22) Chief, Army Community Service A
- (23) Chief, Behavioral Health Service Line A
- (24) Chief, Preventive Medicine A
- (25) Chief, Army Public Health Nursing A
- (26) Army Wellness Center Supervisor A


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(27) Consultants will attend as needed. For example, this includes but is not limited to Casualty Assistance Center, Inspector General, Veterinary Services, Environmental Science, American Red Cross, Nutrition Care Division, and other selected community members.

7. Initiatives and work areas will be approved and managed through the CoC. The CoS is responsible to establish the standard operating procedure to ensure productivity and progress IAW this charter.

8. POC for matters pertaining to this charter and CR2C is Ms Rachelle Harvey at (573) 596-7170.


JAMES E. BONNER
Major General, US
Commanding

DISTRIBUTION:
CR2C Members