AFRC-CPR-HRCP

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: 1st Mission Support Command Support (1st MSC) Suicide Prevention Program Standard Operating Procedure (SOP)

1. References:

a. AR 600-92 Army Suicide Prevention Program, 8 September 2023.

b. AR 600-63, Army Health Promotion,

c. DoDI 6490.16, Defense Suicide Prevention Program,2 February 2023.

d. DoDI 6400.09, DOD Policy on Integrated Primary Prevention of Self-Directed Harm and Prohibited Abuse or Harm, 11 September 2020.

2. Eligibility: All service members, DA civilian’s employees and family members assigned to the 1st MSC are eligible to receive suicide prevention services.

3. Purpose: This Standard Operating Procedure (SOP) outlines the duties of Suicide Prevention Program Manager within the 1st MSC. This SOP duties include training, response to suicide victims, notification and reporting, data collection, and addressing request for information.

4. Definitions:

 a. **Suicide Prevention Program Manager (SPPM**): Serves as subject matter expert for any suicide attempt, ideation and dead by suicide within the command, also is familiarized with rules and regulations and provides recommendations to the Commanding General (CG). Also provides direct support to commanders for planning suicide prevention training and identifies local resources available to assist in the event of an incident.

 b. **Suicide Prevention Program Liaison Representative** (**SPPLR**): It should be the person that will conduct interventions at unit level. It is also responsible to conduct ACE and ACE- SI annual mandatory trainings and to monitor DTMS reports and annually inspect implementation of the Soldiers and Leader Risk Reduction Tool (SLRRT).

 c. **Suicide Ideation**: Is a service member/ civilian (SM/CIV) thinking about considering or planning suicide.

 d. **Suicide attempt**: Is when a service member/ civilian presents a non-fatal, self-directed, potentially injurious behavior with an intent to die as a result of the behavior.

 e. **Suicide:** Death caused by self-directed injurious behavior with an intent to die as a result of the behavior.

 f. **Self-harm:** Is a behavior directed toward oneself that deliberately results in injury of the potential for injury to oneself.

 5. Training: The first component of Suicide Prevention Program is training. The program is design to educate personnel on respective services and commanders’ response to suicide attempts, suicide victims, notification, reporting, data collection, and policies; to help service members understand the complex and serious nature of suicide prevention in the military.

 a. It’s a requirement for all services members to annually take ACE training and upload on DTMS.

 b. Suicide preventions liaison representative at each unit should take 16 hours of ACE SI training and 4 hours SLRRT.

 c. Brigade Chaplain will be managed the program at brigade level.

 d. Upon receiving command, all company commanders have 60 days to appoint a minimum of two Suicide Prevention Liaison Representative per unit.

 e. SPPLR will send a copy of the list of soldiers trained in ACE, ACE Fighting Stigma, ACE Active Listening, to the SPPM through email.

6. Response:

 a. Suicide ideations, attempts and deaths by suicide will be documented IAW AR 600-63 and the proper intervention protocol.

 b. Chaplains, Chaplains Assistants and SPPRL will conduct interventions at unit level.

7.Notification and Reporting:

1. Suicide ideations, attempts and deaths by suicide require that the unit completes and submits a Company Commander Incident Report 23 to BN S-1. BN the submits CCIR to RSG S-1 and RSG submits the report to SPPM and Provost Marshal (PMO).
2. When a service member/civilian die as a result of suicide a 15-6, (administrative instigation) is ordered by the Brigadier General (BG). The administrative investigations is used as the basis for many investigations requiring the detailed gathering and analyzing of facts, and the making of recommendations based on those facts IAW AR 15-6.

8. Data Collection:

 a. SPPRL are responsible for recorded of all CCIR and SPPM is responsible for maintaining statistics.

 b. The commander’s binder is part of the data collection and inspectable item.

9. Case Management:

1. Contact SPPRL and SPPM for guidance during and after interventions. (see annex)

10. Commanders Responsibility: Commanders at all levels ensure that their soldiers operate IAW and within scope of AR 600-92, AR 600-63, and 1st MSC Suicide Prevention Policy.

11. Suicide prevention seeks to enable protective factors (unit cohesion, financial readiness, and BH care access) and prevent self-harm among those identified as at-risk through command visibility tools or individual warning signs. Prevention refers to all efforts that build resilience, reduce stigma, and build understanding of suicide and related behaviors. The strategies for the Suicide Prevention Program are promote a connectedness by implementing policies and activities that increase support, reduce stress, foster camaraderie, and creating a positive and protective environment. **Remember, Time is critical for suicide prevention and everyone is important in our organization.**

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 Manager

 1st MSC Suicide Prevention Program

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