



DEPARTMENT OF THE ARMY
BROOKE ARMY MEDICAL CENTER
FORT SAM HOUSTON, TEXAS 78234-6200

REPLY TO
ATTENTION OF
MCHE-TC

6 November 2003

MEMORANDUM FOR TROOP COMMAND, BROOKE ARMY MEDICAL CENTER
(BAMC), PERSONNEL, FORT SAM HOUSTON, TX 78234-6200

SUBJECT: Post Deployment Leave Policy (Policy Memorandum #34)

1. REFERENCES.

- a. DOD Directive 1235.10, Activation, Mobilization, and Demobilization of the Ready Reserve. 1 Jul 1995
- b. Personnel and Pay Policy for c. Reserve Component Members Ordered to Active Duty in Response to World Trade Center and Pentagon Attacks signed Dr. David C. Chu, Under Secretary of Defense dtd Sep 20 2001 w/addendum dated Jul 19 2002
- c. JCS Joint Pub 1-0, Joint Doctrine for Personnel Support to Joint Operations, 19 Nov 1998
- d. AR 600-8-101, Personnel Processing (In-and-Out and Mobilization Processing), 12 January 1990
- e. AR 600-20, Army Command Policy, 13 May 2002
- f. AR 608-101, Army Community Service Center, 31 August 2000
- g. AR 690-11, Mobilization Planning and Management, 14 September 1990
- h. FM 3-0, Operations, 14 June 2001
- i. FM 12-6, Personnel Doctrine, 9 September 1994
- j. FM 100-9 (FM 4-100-9), Reconstitution, 13 January 1992
- k. FM 100-17-5, Redeployment, 29 September 1999
- l. DA Pam 600-72, Army Manpower Mobilization, 8 July 1990
- m. DA Pam 600-81, Information Handbook for Operating Continental United States (CONUS) Replacement Centers and Individual Deployment Sites, 15 July 2001
- n. DA Pam 690-47, DA Civilian Employee Deployment Guide, 1 November 1995
- o. Army Mobilization and Operations Planning and Execution System (AMOPES), Volume 1-4
- p. FORSCOM Regulation 500-3-10 (FORMDEPS) Volume X
- q. HQDA (DAPE-PRO) Message, 171635Z Sep 02, SUBJ: Consolidated PPG for Operation NOBLE EAGLE and ENDURING FREEDOM.
- r. CFLCC Redeployment OPORD 03-034 (U), 4 May 03
- s. DA Deployment Cycle Support CONPLAN, 2 May 03
- t. FORSCOM RC Training Guidance, 23 April 03
- u. MEDCOM Redeployment/ Demobilization Plan (DRAFT), 3 May 03

2. PURPOSE. To provide policy and procedures pertaining to post deployment reintegration and leave for soldiers who supported Operation Enduring Freedom (OEF) and Iraqi Freedom (OIF).

3. POLICY. All personnel deployed overseas in support of Operation Enduring Freedom (OEF) and Iraqi Freedom (OIF) will go through a Reconstitution Phase in order to be reintroduced to a pre-conflict environment, establish healthy family reunion/reintegration, and reestablishment personal and deployment readiness. This includes those soldiers who departed theatre/AOR on emergency leave, medical evacuation and other individual redeployment scenarios. Leave will not be granted until all of the identified tasks have been completed and verified by the soldier's company commander.

4. BAMC SOLDIER PROCEDURES.

a. Upon return, all BAMC soldiers will report to S-1 to sign in and proceed to their respective company to begin the Reconstitution Phase. All tasks in this phase must be completed prior to being authorized any leave.

b. Soldiers will be placed on a four-hour or half-day work schedule for the first five weekday days following their return in order to provide for the basic elements of unit recovery and soldier personal time. Soldier personal time applies equally to single and married soldiers. During this five-day period soldiers will not be assigned to shift work or weekend duty. The soldier's primary focus during these duty hours is to complete the tasks of the Reconstitution Phase. Soldier's who have completed the tasks prior to the fifth day but are not requesting leave may be assigned regular duties in accordance with the half-day schedule.

c. Upon completion of the Reconstitution Phase, soldiers requesting ordinary leave are automatically authorized 14 days. Soldiers may request an additional 14 days at the discretion of their supervisor. Soldiers must submit a proper DA 31 through their company and receive a signed copy prior to departing on any leave.

5. MEDICAL HOLDING COMPANY SOLDIER PROCEDURES.

a. Soldiers medically evacuated from the theatre in support of OEF and OIF in an outpatient status and are not anticipated to return to theatre, are directed to begin completing the tasks of all three phases; Re-Deployment, Post-Deployment and Reconstitution. Soldiers in an inpatient status may complete some tasks as directed by their physician. Upon being discharged to an outpatient status, soldiers are to automatically begin completing the tasks.

b. Medical appointments take priority over scheduling one of the post-deployment tasks in the Reconstitution Phase. However, completion of the post-deployment tasks is mandatory and may possibly be accomplished around medical appointments. The tasks should be finished as soon as possible – avoid unnecessary delays.

c. Soldiers are not authorized to take ordinary leave until all tasks are completed.

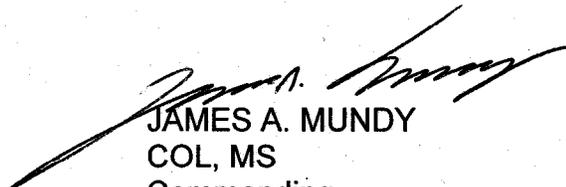
6. RESPONSIBILITIES.

a. Soldiers are responsible for signing into S-1 and their respective company immediately upon return in order to begin the Reconstitution Phase. Soldiers who fail to appropriately sign in to S-1 and their company but have begun regular work duties for more than 5 days will not be granted any type of reconstitution half-day schedule. Soldiers who fall into this category will not be granted any ordinary leave until all tasks have been completed.

b. Department Chiefs and NCOIC's are responsible for ensuring their assigned soldiers stay in accordance in with the half-day work schedule and are focused on completing the necessary tasks prior to beginning any regular work duties and responsibilities.

c. Company commanders are responsible for providing soldiers with the appropriate task lists and validating that their soldiers have completed all tasks in the Re-Deployment Phase (Annex A), Post-Deployment Phase (Annex B) and Reconstitution Phase (Annex C) prior to authorizing any leave.

7. The POC for this memorandum is the Chief, Military Personnel Branch at 916-9770.



JAMES A. MUNDY
COL, MS
Commanding

ANNEX A (REDEPLOYMENT PHASE TASKS)

Soldier Name _____ SSN _____

Deployment Departure Date _____ Return Date _____

Individual Actions (These should have been accomplished in the RAA prior to departure from Theater)

#	Task	Responsibility to Provide	Date Accomplished	Official Initials
1.1.1	Utilize soldier / small unit leader reintegration tip card to identify individuals requiring monitoring, follow-up or referral (Appendix 1 to Annex A)	Unit Leadership		
1.1.2	Receive Reunion Training	Unit / Unit Ministry Teams		
1.1.3	Receive Suicide Awareness and Prevention Training	Unit / Unit Ministry Teams		
1.1.4	Receive Medical Threat Brief	Unit Leadership (Medical staff)		
1.1.5	Establish debriefing opportunity for Soldiers to integrate deployment experience as a life experience	Unit Leadership		
1.1.6	Document exposures in Theater (DD 2796)	Unit Leadership (Medical staff)		

**ANNEX A – APPENDIX 1
UNIT RISK REDUCTION LEADER TIP CARD**

Leaders and commanders should use this tool to identify soldiers at risk. Any check deserves leader counseling, monitoring and/or follow-up referral to the Chaplain, or other appropriate behavioral health professional. Recommend this be distributed down to squad level.

Did/has/was/is any soldier:

- Involved in an alcohol incident and enrolled in the Drug/Alcohol program prior to deployment?
- Had a drug positive prior to deployment?
- Have any acts of indiscipline prior to deployment or during deployment?
- Gone AWOL prior to deployment?
- Have any negative encounters with chain of command prior to or during deployment?
- Have any negative encounters with anyone else in the unit prior to or during deployment?
- Express anger or seem sullen and withdrawn prior to or during deployment?
- Seem to be a "loner"?
- Have any incidents of domestic violence prior to deployment?
- Have significant changes in family or relationships during deployment—death of parent, separation/divorce from spouse, lose boyfriend or girlfriend?
- Express any suicidal thoughts or actions?
- Have severe financial problems before or during deployment?
- Involved in a serious accident during deployment?
- Bothered by events/combat while in theater?

ANNEX B (POST-DEPLOYMENT PHASE TASKS)

Soldier Name _____ SNN _____

Deployment Departure Date _____ Return Date _____

Completion of tasks in Post-deployment is event driven not time driven.

#	Task	Responsibility to Provide	Date Accomplished	Official Initials
2.1.1	Receive Reunion Training	Unit Leadership/ UMT/ ACS		
2.1.2	Receive Suicide Awareness & Prevention Training in all units	Unit Ministry Teams		
2.1.3	Receive health threat brief	Unit Leadership (Medical staff)		
2.1.4	Receive briefing on how to identify signs and symptoms of distress	Unit Leadership (Medical staff)		
2.1.5	Receive briefing and information on Post-Deployment Stress	Unit Leadership (Medical staff)		
2.1.6	Normalization of Experiences	Unit Leadership (Medical staff)		
2.1.9	Receive training on changes in relationships	Unit Ministry Team/ACS		
2.1.11	Receive training on communication with children	Unit Ministry Team/ACS		
2.1.12	Married redeploying Soldiers take a marital enrichment assessment instrument	Unit Ministry Teams/STAR C /FACs		
2.1.13	Receive safety briefings covering at a minimum: POV, Alcohol, Water Sports, STD	Unit Leadership		
2.1.14	Individual Soldiers revalidate driver / safety training	Unit Leadership		

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ANNEX C (RECONSTITUTION PHASE TASKS)

All actions for both AC and RC are accomplished at Home Station

Gaining command is responsible for completion of any tasks left incomplete by previous phases.

Soldier Name _____ SNN _____

Deployment Departure Date _____ Return Date _____

Soldier Actions

#	Task	Responsibility to Provide	Date Accomplished	Official Initials
	Completed Redeployment Phase Tasks			
	Completed Post Deployment Phase Tasks			
3.1.1	Married redeploying Soldiers complete task to take a marital assessment instrument	Unit Ministry Teams/STAR C/FACs		