



PERSONNEL AND
READINESS

UNDER SECRETARY OF DEFENSE

4000 DEFENSE PENTAGON
WASHINGTON, DC 20301-4000

August 12, 2011

Incorporating Change 1, January 3, 2012

MEMORANDUM FOR: SEE DISTRIBUTION

SUBJECT: Directive-Type Memorandum (DTM) 11-011, "Mental Health Assessments for Members of the Military Services Deployed in Connection with a Contingency Operation"

References: See Attachment 1

Purpose. This DTM, in accordance with the authority in DoD Directive 5124.02 (Reference (a)):

- Establishes the policy for person-to-person mental health assessments for each Service member deployed in connection with a contingency operation in accordance with section 708 of Public Law 111-84 (Reference (b)).
- Implements policy in accordance with Assistant Secretary of Defense for Health Affairs Memorandum (Reference (c)).
- Implements policy for serial mental health assessments in accordance with Secretary of Defense Memorandum (Reference (d)).
- This DTM is effective upon its publication to the DoD Issuances Website; it shall be converted to a new DoD Instruction (DoDI). This DTM shall expire effective ~~February 20, 2012~~ *September 20, 2012*.

Applicability. This DTM applies to the OSD, the Military Departments, (including the Coast Guard at all times, including when it is a Service in the Department of Homeland Security by agreement with that Department), the Office of the Chairman of the Joint Chiefs of Staff and the Joint Staff, the Combatant Commands, the Office of the Inspector General of the Department of Defense, the Defense Agencies, the DoD Field Activities, and all other organizational entities within DoD. The term "Military Services," as used herein, includes Active and Reserve Components of the Army, Navy, Air Force, Marine Corps, and Coast Guard (including their Service Academies).

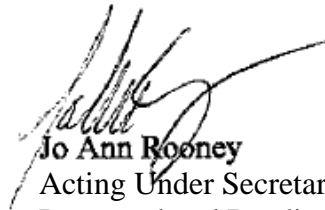
Policy. It is DoD policy that person-to-person mental health assessments will be conducted for each Service member who is deployed in connection with a contingency operation. The mental health assessments will be conducted during four time frames in a consistent manner across the Military Services:

- Within 2 months before the estimated date of deployment.
- Between 3 and 6 months after return from deployment.
- Between 7 and 12 months after return from deployment.
- Between 16 and 24 months after return from deployment.

Responsibilities. See Attachment 2.

Procedures. See Attachment 3.

Releasability. UNLIMITED. This DTM is approved for public release and is available on the DoD Issuances Website at <http://www.dtic.mil/whs/directives>.



Jo Ann Rooney
Acting Under Secretary of Defense for
Personnel and Readiness

Attachments:
As stated

DISTRIBUTION:

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ATTACHMENT 1

REFERENCES

- (a) DoD Directive 5124.02, "Under Secretary of Defense for Personnel and Readiness (USD(P&R))," June 23, 2008
- (b) Section 708 of Public Law 111-84, "National Defense Authorization Act for Fiscal Year 2010," October 28, 2009
- (c) Assistant Secretary of Defense for Health Affairs Memorandum, "Mental Health Assessments for Members of the Armed Forces Deployed in Connection with a Contingency Operation," July 19, 2010
- (d) Secretary of Defense Memorandum, "Final Recommendations of the Ft. Hood Follow-on Review," August 18, 2010
- (e) DoD Instruction 6490.03, "Deployment Health," August 11, 2006
- (f) DoD Instruction 6040.45, "Service Treatment Record (STR) and Non-Service Treatment Record (NSTR) Life Cycle Management," October 28, 2010
- (g) DoD Instruction 6200.05, "Force Health Protection (FHP) Quality Assurance (QA) Program," February 16, 2007

ATTACHMENT 2

RESPONSIBILITIES

1. UNDER SECRETARY OF DEFENSE FOR PERSONNEL AND READINESS (USD(P&R)). The USD(P&R), in coordination with the Assistant Secretary of Defense for Health Affairs (ASD(HA)), shall provide criteria, guidance, and instruction to incorporate mental health assessment requirements into appropriate DoD policy, program, and budget documents.

2. ASD(HA). The ASD(HA), under the authority, direction, and control of the USD(P&R), shall ensure compliance with this DTM.

3. DEPUTY ASSISTANT SECRETARY OF DEFENSE FOR FORCE HEALTH PROTECTION AND READINESS (DASD(FHP&R)). The DASD(FHP&R), under the authority, direction, and control of the ASD(HA), shall coordinate an evidence-based assessment of the effectiveness of mental health assessments in accordance with the required “Reports on Implementation of Guidance” specified in section 708 of Reference (b).

4. ASSISTANT SECRETARY OF DEFENSE FOR RESERVE AFFAIRS (ASD(RA)). The ASD(RA), under the authority, direction, and control of the USD(P&R), shall ensure that relevant requirements and procedures for the Reserve Components are consistent with those established for Active Components as appropriate.

5. SECRETARIES OF THE MILITARY DEPARTMENTS. The Secretaries of the Military Departments shall:
 - a. Ensure that all health care providers are trained and certified to perform mental health assessments and to make appropriate clinical referrals in accordance with this Instruction. Licensed mental health professionals are considered previously trained and certified and do not require the additional training described in this Instruction.

 - b. Establish implementing guidance in accordance with this DTM.

 - c. Assist the DASD(FHP&R) in conducting an evidence-based assessment of the effectiveness of mental health assessments in accordance with Reference (b), by providing the requisite data and information.

ATTACHMENT 3

PROCEDURES

1. GENERAL

a. Reference (b) required DoD to institute a person-to-person mental health assessment for each Service member who is deployed in connection with a contingency operation.

b. The definition of deployment, leadership responsibilities to ensure compliance, types of providers (other than licensed mental health professionals) who can conduct person-to-person assessments, and the instructions and exemptions for a comprehensive deployment health program, are delineated in DoDI 6490.03 (Reference (e)).

c. The purpose of the mental health assessment is to identify mental health conditions, including post-traumatic stress disorder, suicidal tendencies, and other behavioral health conditions that require referral for additional care and treatment. These assessments must include a person-to-person dialogue (e.g., face-to-face, by telephone, video teleconference in accordance with applicable DoD policy and Service regulations) and must be conducted in a private setting to foster trust and openness in discussing sensitive health concerns. The Service member and health care provider components of the mental health assessment are provided at <http://fhpr.osd.mil/mentalhealthassessment>, or <http://fhpr.osd.mil/mha>. The four mental health assessments must be conducted within the time frames cited in the policy section of this DTM, and at least 90 days apart.

d. Currently, administered periodic health assessments and other person-to-person assessments (e.g., the Post-Deployment Health Reassessment) will meet the time requirements for mental health assessments only if they use all the psychological and social questions outlined in Reference (c), and if they are conducted in a manner specified in paragraph 1.c of this attachment.

e. If an individual begins preparing to deploy again before completing the 3 to 6 month post-deployment mental health assessment, and as part of that process, completes a pre-deployment mental health assessment, the individual's deployment mental health assessment cycle will then reset, and the requirement to complete the 3 to 6 month post-deployment mental health assessment will be considered satisfied.

f. These mandatory deployment mental health assessments will be administered to all members of the Armed Forces of the United States, as defined in DoDI 6040.45 (Reference (f)), including the Ready Reserve, Standby Reserve, and Retired Reserve Components who are deployed in connection with a contingency operation.

g. Either licensed mental health professionals or trained and certified health care personnel (specifically a physician, physician assistant, nurse practitioner, advanced practice nurse, independent duty corpsman, special forces medical sergeant, independent duty medical

technician, or independent health services technician) can conduct these mental health assessments.

2. MENTAL HEALTH ASSESSMENTS

a. The mental health assessment follows a three-stage process as described in Reference (c) and is available at <http://fhpr.osd.mil/mentalhealthassessment>, or <http://fhpr.osd.mil/mha>.

b. Specific self-report questions for Service members and specific questions for health care providers to conduct a mental health assessment are described in Reference (c).

c. Results from these mental health assessments must be recorded in the Service member's medical record for life cycle management consistent with Reference (f) to assist with health surveillance of the deploying force and to allow mental health assessment data to be shared with providers from the Department of Veterans Affairs, consistent with applicable information sharing protocols.

3. TRAINING AND CERTIFICATION. To ensure consistency across the Military Departments, mandatory self-directed training for these mental health assessments is available at: <http://fhpr.osd.mil/mentalhealthassessment>, or <http://fhpr.osd.mil/mha>. A certificate of completion of the training will be provided following the successful completion of the post-test assessment.

4. QUALITY ASSURANCE. The Force Health Protection Quality Assurance Program will perform verification of provider training and compliance, as described in Reference (c), in accordance with DoDI 6200.05 (Reference (g)).

GLOSSARY

ABBREVIATIONS AND ACRONYMS

ASD(HA)	Assistant Secretary of Defense for Health Affairs
ASD(RA)	Assistant Secretary of Defense for Reserve Affairs
DASD(FHP&R)	Deputy Assistant Secretary of Defense for Force Health Protection and Readiness
DoDI	DoD Instruction
DTM	Directive-Type Memorandum
USD(P&R)	Under Secretary of Defense for Personnel and Readiness