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U.S. NAVAL SUPPORT ACTIVITY
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NAVSUPPACT NAPLES INST 1752.3B
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NAVSUPPACT NAPLES INSTRUCTION 1752.3B

From: Commanding Officer, U.S. Naval Support Activity, Naples, Italy

Subj: FAMILY ADVOCACY PROGRAM

Ref: (a) DOD DIRECTIVE 6400.1 (series)
(b) SECNAVINST 1752.3 (series)
(c) OPNAVINST 1752.2 (series)
(d) CNIC FAP-002 Guidance of 12 May 06

Encl: (1) Definitions
(2) Reporting and Notifications
(3) Restricted Reporting for Incidents of Domestic Abuse

1. Purpose. To revise policy and assign responsibilities for the operation of the Naples, Italy area Family Advocacy Program (FAP). This instruction is a complete revision and should be reviewed in its entirety.

2. Cancellation. NAVSUPPACT NAPLES INSTRUCTION 1752.3A.

3. Definitions. Terms related to the FAP, and used in this instruction are defined in reference (c) and enclosure (1). For the purpose of this instruction, child abuse includes both abuse (physical, emotional or sexual) and neglect.

4. Applicability. Allegations of child or domestic abuse involving the following persons shall be assessed and managed by the NAVSUPPACT Naples FAP:

a. Active duty members of all U.S. military and their legal family members who are eligible for a military-issued identification card.

b. DOD civilian personnel and their family members assigned to military activities in the Naples area to include personnel who receive military health care on a fee-per-service basis.

c. Military reserve components members and their legal family members while on active duty.

d. Former spouses and intimate partners as defined per enclosure (1). Victims of child or domestic abuse occurring under Department of Defense (DOD) jurisdiction are eligible, regardless of military affiliation, for victim advocacy services on a humanitarian basis.

5. Discussion. The FAP was established to provide a consistent and standardized response to incidents of child or domestic abuse within the military family. The Navy's FAP is a line-managed, multi-disciplinary program managed by Commander, Navy Installations Command (CNIC). Factors that contribute to abuse and neglect often include marital discord, abuser's beliefs regarding power and control, financial difficulties, child care responsibilities, lack of parenting skills, exposure to abuse/neglect in childhood, social isolation, substance abuse, and special stresses unique to military service.

6. Policy. This instruction implements the policies set forth in references (a) through (d). Enclosure (2) provides specific guidance for reporting of child and domestic abuse. Enclosure (3) provides detailed guidance regarding options for victims of domestic abuse who voluntarily seek services.

a. Child and domestic abuse are unacceptable and incompatible with the high standards of professional and personal discipline required of members of the military services. Abusive behavior destroys families, detracts from military performance, negatively affects the efficient functioning of military units, and diminishes the reputation of the military service. All personnel will participate in a continuous effort to reduce and eliminate child and domestic abuse at every level of command.

b. The goals of NAVSUPPACT Naples FAP are the prevention of abuse and neglect within our military and DOD civilian families, victim safety and protection, offender accountability, rehabilitation education and counseling, and community responsibility for a consistent, appropriate response.

c. Victims and witnesses of child and domestic abuse will have access to appropriate protection, safety, care, support, and services to the extent allowable by law and resources. Victims will not be re-victimized through unnecessary interventions. All service members and DOD employees will ensure appropriate confidentiality and sensitive handling of FAP case information.

d. All service members and DOD employees will ensure effective coordination and cooperation with involved military and civilian community entities.

e. Information regarding domestic abuse restricted reporting options will be widely disseminated. The restricted reporting option enables domestic abuse victims to receive medical, counseling, and advocacy services without command and law enforcement notifications, with certain exceptions (e.g., serious and imminent danger or child abuse). Restricted reports must be made to a Fleet and Family Support Center (FFSC) clinician, or healthcare provider.

f. Early intervention can be achieved by encouraging military and civilian personnel to seek help prior to an incident of child or domestic abuse. Service members may voluntarily refer themselves to a FFSC counselor or Military Treatment Facility (MTF) Health Care Provider (HCP) for assistance. However, self-referral for abuse does not insulate a potential offender from initiation of disciplinary and/or administrative action and does not limit the use of the member's statements in court-martial, non-judicial punishment, or administrative separation proceedings.

7. Action.

a. Commanding Officer, NAVSUPPACT Naples, Italy.

(1) Ensure a comprehensive, coordinated FAP to support personnel and tenant commands.

(2) Publish NAVSUPPACT Naples instructions, protocols, and Memoranda of Understanding, as needed.

(3) Designate the Director of Family Programs/FFSC Site Manager as the Family Advocacy Officer (FAO) to administratively manage and implement the FAP in coordination with the CNREURAFSWA Regional Counseling, Advocacy and Prevention Coordinator.

(4) Establish a Family Advocacy Committee (FAC) and appoint members as needed to maintain required membership.

(5) Establish a Case Review Committee (CRC) to maintain required membership, appointing members in writing, in collaboration with the CO responsible for the permanent member.

(6) Ensure regular and ongoing FAP training is provided for all FAP related personnel, unit commanders, military supervisors, Command FAP point of contacts (POCs), FAC members, and CRC members.

(7) Ensure maximum coordination among all involved installation entities and civilian agencies, as needed, in the prevention of and response to reports of child or domestic abuse.

b. All Commanding Officers/Officers in Charge (CO/OIC).

(1) Designate an appropriate officer or senior enlisted member, preferably an E-7 or above to serve as the Command FAP POC. The Command FAP POC is responsible to receive reports from the Family Advocacy Representative (FAR), coordinate intervention with the FAR, monitor the status of each case, and attend CRC meetings for cases involving service members attached to their command.

(2) Ensure all incidents or suspected incidents of child and domestic abuse that come to the attention of the command are promptly reported to the chain of command, FAR and to others (e.g., law enforcement), as appropriate.

(3) Take reasonable actions to ensure the safety of service members and their families to include consideration of issuing Military Protective Orders (MPOs).

(4) Promptly hold military offenders accountable by applying a range of disciplinary or administrative sanctions, as appropriate, and/or by directing the service member to participate in a FAP sponsored rehabilitation program.

(5) Ensure all command members receive regular and ongoing FAP training. All COs/OICs should attend FAP Training within 90 days of taking command. All senior personnel should receive FAP training annually.

c. Family Advocacy Officer.

(1) Provide administrative management and implementation of the FAP. Facilitate program development; provide oversight, coordination, administration, and evaluation.

(2) Maintain coordination and collaboration among command and other military and civilian community partners.

(3) Ensure personnel are nominated, as appropriate, for appointment to the FAC and CRC.

d. Family Advocacy Committee (FAC).

(1) Meet at least quarterly.

(2) Membership normally includes the following members who must receive FAP training at least annually:

(a) Co-chair of Line Officer (04 or above);

(b) Clinically privileged member of the U.S. Naval Hospital Naples, who will act as co-chair;

(c) FAO/FFSC Site Manager;

(d) FAR;

(e) Base Security Officer;

(f) Judge Advocate;

(g) Chaplain;

(h) Child Care/Youth Services Representative(s);

(i) Naval Criminal Investigative Service (NCIS) Agent;

(j) Naval Drug Alcohol Counselor;

(k) Active duty personnel in leadership positions in installation and tenant commands;

(l) Housing representative; and

(m) Other personnel, as appropriate.

(3) The FAC performs the following functions:

(a) Provide an ongoing needs assessment and evaluation of the FAP.

(b) Identify long-range, intermediate, and immediate needs and initiate appropriate action.

(c) Encourage maximum participation and a team approach among all activities, agencies, and personnel involved with the FAP. Assist in identifying roles and responsibilities of military agencies in responding to specific incidents of child and domestic abuse.

(d) Coordinate military and civilian interface and social service delivery.

(e) Provide recommendations for FAP policies, procedures, resources, and programs.

e. Case Review Committee (CRC).

(1) Meet at least monthly.

(2) Membership of core members and their alternates must be appointed in writing.

(a) Five core permanent voting members include a Line Officer (O-4 or above) who is not senior in the chain of command to any other permanent members, a physician, the FAR, a Clinically Privileged Mental Health Care provider, and a Judge Advocate. The core members or their alternates must be present to conduct a CRC meeting. Other voting members may include, (e.g., security, emergency room nurse). The total number of permanent members should not exceed eight. Naval Criminal Investigative Agent is included as a permanent, non-voting member.

(b) Consultants (e.g., law enforcement officer, DAPA, chaplain, clinical counselor, New Parent Support Home Visitation Program representative) may attend for one or more specific cases. The service member's commanding officer (or command representative) is invited to attend the CRC during the time the member's FAP case is discussed and decided upon, in a consultant status. Consultants do not vote on the case status decision.

(c) All CRC members must receive, at a minimum, 16 hours of child and domestic abuse training within six months of their appointment and 24 hours of FAP related training on an annual basis.

(3) The CRC performs the following functions:

(a) Consider all cases initially (normally within 90 days of the receipt of the report by FAP) to make case status determinations (for open unrestricted FAP cases) or conduct quality assurance reviews for family-in-need of services (FINS) cases.

(b) Make recommendations and set assignment control flag lifting dates, as appropriate.

(c) Review open case quarterly for monitoring.

(d) Make decisions regarding case status changes and case closures.

f. Director of Family Readiness Programs/FFSC Site Manager.

(1) Serve as the FAO.

(2) Ensures the FFSC provides the following scope of FAP services (in-house or via referral); prevention and awareness programs, education and training programs, identification and reporting, information and consultation, new parent support, crisis intervention, safety assessment and safety planning, victim advocacy and support, clinical risk focused assessment, intervention planning, clinical counseling, referrals, and monitoring and follow-up.

(3) Designate a Clinically Privileged Counselor to serve as the FAR to implement and manage the case management, intervention, and rehabilitation aspects of the FAP. Designate other FFSC staff members, as needed, to serve as the Acting FAR and/or to perform certain FAP responsibilities.

g. FAR/Counseling and Advocacy Programs Supervisor. Performs and/or coordinates the following responsibilities:

(1) Receive all reports of incidents or suspected incidents of child and domestic abuse during normal working hours. Provide intake, eligibility decision, crisis intervention, information, consultation, assistance, safety assessment, safety planning/response; risk focused assessment, and intervention planning, as appropriate.

(2) Make all required notifications to community and military entities (e.g., NSA CDO, NCIS, Installation Security, Command FAP POCs, U.S. Naval Hospital, CNIC). Notify the FAO/Director, Fleet and Family Support Center of child abuse occurring in Navy sanctioned out-of-home care settings, fatalities, serious injuries, multiple victim child sexual abuse cases, cases involving media interest, or high level command interest. The FAO will promptly notify the Naval Support Activity Commanding Officer or Executive Officer.

(3) Ensure advocacy, information, and support services for victims by providing and/or making referrals for such services.

(4) Serve as POC for commands concerning FAP cases, including safety measures and intervention/rehabilitation matters.

(5) Ensure provision of rehabilitation, education, and counseling by providing and/or referrals for such services.

h. OICs and Department Heads involved in FAP Operations.

(1) Examples include Installation Security, NCIS, Navy Legal Services, Fleet and Family Support Programs, Housing, Child Development/Youth Programs, DODDS and Chaplains.

(2) Implement and support the operation of the FAP in accordance with references (a) through (c) and/or their respective governing instructions. Establish procedures and provide access to FAP-related services as appropriate (e.g. medical care, law enforcement response, investigations, legal guidance, etc.).

(3) Collaborate with other FAP related military and civilian partners for an effective, coordinated community response.

(4) Report all incidents or suspected incidents of child and domestic abuse to the FAR within one working day (when not precluded from doing so by professional privilege) and to other authorities (e.g., NCIS, CNIC) as required by law, instruction, or policy.

(5) Designate appropriate representatives to serve on the FAC and CRC, as needed.

(6) Ensure personnel receive regular and ongoing FAP training.

i. Installation Command Duty Officers (CDOs).

(1) Receive reports of incidents or suspected incidents of child and domestic abuse outside of the normal working hours.

(2) Take any necessary steps to ensure safety to and

provision of needed services (e.g., MPOs, medical care, investigations, and shelter services).

(3) Notify and coordinate actions with other involved personnel (e.g., Installation Security, NCIS, Command FAP POCs, on-call FAP social worker).

j. All Hands. Unless precluded by professional privilege, report incidents or suspected incidents of child and domestic abuse occurring on a military installation or involving persons eligible for FAP services. During normal working hours, reports are made to the FAR. For incidents requiring law enforcement or medical intervention, immediately contact the appropriate emergency responder (e.g., law enforcement/NCIS) as appropriate.

CDR XO

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By direction

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DEFINITIONS

1. Advocacy Services. Services offered to victims of domestic abuse with the goal of increasing victim safety and autonomy. Services will include responding to victim's emergency and ongoing safety concerns and needs, providing information on programs and services available to victims and their children in both civilian and military communities and providing victims with ongoing support and referrals.

2. Alleged Offender (AO). Any person, who allegedly caused the abuse of a child or spouse, former spouse, intimate partner, former intimate partner, or whose act, or failure to act, substantially impaired the health or well-being of the victim.

3. Case. All incidents involving a single victim who may be identified in one or multiple abuse incidents. Cases of child neglect in which a specific act involves more than one child may be combined into one case.

4. Case Review Committee (CRC). A multi-disciplinary team of professionals responsible for reviewing and determining the status of each case and monitoring case progress.

5. Case Status Determination. At the conclusion of the review of all relevant information by the CRC, a vote by a simple majority of the core members determines the case status. Possible determinations include:

a. Substantiated. A case which has been assessed and the preponderance of the available information indicate abuse or neglect has occurred. Preponderance of information means the information to support the occurrence of abuse is of greater weight, or more convincing than the information to support that abuse or neglect did not occur. This may include incidents where abuse is substantiated but the offender is not identified.

b. Unsubstantiated, did not occur. A case which has been assessed and the weight of the available information support that child or domestic abuse did not occur. The family does not need further FAP services and the case is closed.

c. Unsubstantiated, Unresolved. A case which has been assessed and the available information is insufficient or not available to determine whether abuse did or did not occur. Individuals may be referred for voluntary services. The FAP case is closed.

6. Child. The term "child" shall include the biological child, adopted child, stepchild, foster child, or ward who is a dependent of a military member and is under the age of 18 years. The term also includes civilian children who are under 18 years of age where there is alleged abuse by a Navy service member or family members. The term shall include an individual of any age who is incapable of self-support due to mental or physical incapacity and for whom treatment in a military MTF has been authorized.

7. Child Abuse/Neglect. The physical injury, sexual abuse, emotional abuse, deprivation of necessities, or other abuse of a child by a parent, guardian, and employee of a residential facility or child-care provider who is responsible for the child's welfare, under circumstances that indicate the child's welfare is harmed or threatened. The term encompasses both acts and omissions on the part of such a responsible person.

8. Domestic Abuse/Domestic Violence. A pattern of behavior resulting in emotional/ psychological abuse, economic control, and/or interference with personal liberty that is directed toward a person of the opposite sex who is:

a. A current or former spouse;

b. A person with whom the abuser shares a child in common; and

c. A current or former intimate partner with whom the abuser shares or has shared a common domicile.

9. Domestic Violence. An offense under the United States Code (U.S.C.), the Uniform Code of Military Justice (UCMJ), or State law that involves the use, attempted use, or threatened use of force or violence against a person of the opposite sex, or a violation of a lawful order issued for the protection of a

person of the opposite sex, who is:

a. A current or former spouse;

b. A person with whom the abuser shares a child in common; and

c. A current or former intimate partner with whom the abuser shares or has shared a common domicile.

10. Family Advocacy Committee (FAC). A multi-disciplinary body which ensures effective community coordination and response to incidents of child and domestic abuse. The FAC provides oversight and recommendations to the installation FAP.

11. Family Advocacy Officer (FAO). A designated official who is responsible for the administrative management and implementation of the installation FAP. The FAO for Naval Support Activity Naples FAP is the Director, Fleet and Family Support Center.

12. Family Advocacy Representative (FAR). A credentialed and privileged provider who is responsible for implementing and managing the clinical, rehabilitative and intervention aspects of the installation FAP. The FAR provides recommendations to the installation commander regarding the FAP. The Counseling, Advocacy and Prevention Supervisor (CAPS) serves as the FAR for Naval Support Activity Naples, providing the day-to-day oversight of the FAP and serves as the point of contact for identification, rehabilitation/behavioral counseling, and intervention regarding specific cases and assistance to commands in coordinating actions to ensure safety and protection of victims.

13. Flag. Term referring to the indicator placed on a member's personnel file in the assignment control system to let detailing personnel know they will require clearance prior to writing permanent change of station (PCS) orders for a service member. The flagging process is intended to prevent further stress on the Sailor and family members, reduce the likelihood of further abuse, and to ensure assignment to a geographic location with adequate services.

a. Assignment Control Flag. A Flag placed, at the recommendation of the CRC, on substantiated child and domestic abuse cases, generally where the risk for future abuse has been assessed as moderately high or high. All substantiated child sexual abuse cases in which the offender is a juvenile are flagged, regardless of the overall level of risk. This temporary flag is normally removed within one year from the date the flag was set.

b. Navy Personnel Command (PERS-8) Control Flag. A flag placed in the personnel data system by PERS-8 for all suspected child sexual abuse cases involving an active duty Navy member as the alleged offender. This flag restricts transfers, reenlistments, advancements and/or promotions until case resolution. A service member is notified of these restrictions by PERS-8 via their Commanding Officer after the case has been reported. The flag is lifted by PERS-8 at case resolution and if there are no further restrictions.

14. Juvenile Sex Offender. A person under 18 years of age who has sexually abused or molested another juvenile. Sexual abuse differs from what would be considered age appropriate peer play between children in that there is an inequality between participants including: presence of exploitation, coercion and control, manipulation, abuse of power or position of authority, age differences, and the sexual behavior itself.

15. Major Physical Injury. Includes brain damage, skull fracture, subdural hemorrhage or hematoma, bone fracture, shaken baby syndrome, dislocations, sprain, internal injury, poisoning, burn, scald, sever cut, laceration, bruise, welt, or any combination thereof, which constitutes a substantial risk to the life or well being of the victim.

16. Rehabilitation/Treatment Failure. In accordance with reference (b), a repetition of an offense for which rehabilitation/behavioral education and counseling services have previously been afforded or failure to meet the conditions of court orders or terms of probation and should normally result in processing for administrative separation. Additionally, military members who have admitted guilt or have been found guilty at CO's Mast, Office Hours, or a criminal trial of child

or domestic abuse and thereafter refuse rehabilitation, refuse to cooperate with or complete behavior modification programs, or who are not able to cease their abusive behavior during or after an education or counseling program, should be processed for separation.

17. Stalking. Any person who wrongfully engages in a course of conduct directed at a specific person that would cause a reasonable person to fear death or bodily harm, including sexual assault, to themselves or a member of their immediate family; who has knowledge, or should have knowledge, that the specific person will be placed in reasonable fear of death or bodily harm, including sexual assault, to themselves or to a member of their immediate family may be prosecuted for stalking under the UCMJ.

18. Military Protective Order (MPO). During the investigation and processing of FAP cases and any associated disciplinary actions, the command must take reasonable actions to ensure the safety of the members under their command and family members of assigned personnel. Responsive actions could include issuing a MPO when necessary to safeguard victims while pursuing protective orders through civilian courts or to support existing orders of protection. MPOs are administrative rather than punitive in nature and their imposition does not preclude disciplinary action under the UCMJ. MPOs shall be related to matters involving the alleged abuse and shall be in writing and their receipt recorded in order to ensure enforceability, if violated.

19. Victim. Person who alleges abuse or whose welfare is harmed or threatened by acts of omission or commission by another individual or individuals.

REPORTING AND NOTIFICATIONS

1. Domestic Abuse. In addition to the reporting options listed below, current policy offers, under certain conditions, "restricted" and "unrestricted" options to victims of domestic abuse who voluntarily seek medical or counseling services from a MTF or FFSC. Enclosure (3) provides detailed guidance on restricted/unrestricted reporting options for victims.

a. If a domestic abuse report involving physical injury or the use of a dangerous or deadly weapon is received by the installation law enforcement department, verbal notification will be made immediately to the FAR or the on-call social worker and to the service member's command. A written report shall be made to the member's command and the FAR within 24 hours.

b. Following a report of domestic abuse, the member's command and law enforcement are obligated to take immediate steps to provide appropriate and reasonable assurances of safety and protection for victims and witnesses. Such actions could include providing victim advocacy services, issuance of a MPO, removal of an offending service member from the family home, temporary barring of an offending civilian spouse from the military installation and/or military housing, etc.

c. If a victim of an alleged domestic abuse comes to a MTF seeking treatment for injuries related to abuse, the case shall be referred to the FAR or the on call social worker. In the case of major physical injury or indication of a propensity or intent by the alleged offender to inflict major physical injury, NCIS shall be notified.

d. When a victim of an alleged domestic abuse comes voluntarily to a FFSC or MTF seeking counseling and there are no current injuries requiring medical attention, the spouse is responsive and capable of responding to any renewed threat of abuse, previous injuries are not "major" physical abuse, and the victim does not want the abuse to be reported, then the provider will assist the alleged victim in making an informed decision as to his/her options. At a minimum, a safety assessment should be completed and the FAR should be consulted.

e. The sexual assault of a spouse or intimate partner is

domestic abuse or domestic violence, as defined in enclosure (1) and will be referred to the FAR, and law enforcement as appropriate.

2. Child Abuse. All DON personnel must report any incident or suspected incident of child abuse occurring on a military installation or involving persons eligible for FAP services to the FAR. Exceptions are described in paragraph 3 of this enclosure.

a. Depending on the outcome of the initial assessment of the report, the FAR will notify the member's command and, consistent with applicable laws, memorandum of understandings, and state child protective services.

b. In cases of major physical injury or an indication of an offender's propensity or intent to inflict major physical injury, the FAR shall also notify NCIS.

c. Child Sexual Abuse (CSA). All reports of CSA, known or suspected, must be reported to NCIS.

d. Out-of-Home CSA. In addition to the above, cases of CSA alleged to have occurred in DOD sanctioned out-of-home care settings, such as child care centers, or youth centers, schools, recreation programs, or family home care, must be reported immediately to the Commanding Officer or Executive Officer of Naval Support Activity Naples, NCIS, FAR, and FAO.

3. Exceptions to Reporting Domestic Abuse.

a. Clergy-Penitent Relationship. A person has the privilege to refuse to disclose and to prevent another from disclosing a confidential communication by the person to a clergyperson or to a clergyperson's assistant, if such communication was made either as a formal action of religion or as a matter of conscience.

b. Lawyer-Client Privilege. A client has the privilege to refuse to disclose and to prevent any other person from disclosing confidential communications made for the purpose of facilitating the provision of professional legal services to the client.

RESTRICTED REPORTING POLICY FOR INCIDENTS OF DOMESTIC ABUSE

1. The Navy is fully committed to ensuring victims of domestic abuse are protected; treated with dignity and respect; and are provided support, advocacy, and care. Assuring privacy and providing options for confidential disclosure are critical to discharging our commitment to fully support victims of domestic abuse.

2. For the purpose of this policy, confidential reporting is defined as providing an option for victims of domestic abuse to report incidents of domestic abuse to specific individuals without triggering command notification or investigation of the incident. This option affords a victim access to medical care, counseling, and victim advocacy without initiating the investigative process.

3. Commanders have a responsibility to ensure community safety and due process of law, but they must also recognize the importance of protecting the safety and well-being of victims and family members.

4. Domestic abuse is defined in enclosure (1).

5. While Navy policy prefers personnel to report all suspected incidents of domestic abuse, the requirement for all domestic abuse incidents to be reported can represent a barrier for victims who would not otherwise seek medical and victim services when it requires command or law enforcement notification. Additionally, the Navy strongly supports effective command awareness and prevention programs and law enforcement and criminal justice activities which will maximize accountability and prosecution of domestic abuse.

6. This policy provides the framework for confidential or restricted reporting for victims of domestic abuse. Restricted reporting is limited to adult victims of domestic abuse who are eligible to receive medical treatment in military facilities. This includes civilians and contractors who are eligible to receive military healthcare Outside Continental U.S. (OCONUS) on a reimbursable basis. This policy affords adult victims of

domestic abuse two options of reporting referred to as "unrestricted" and "restricted" reporting.

a. Unrestricted Reporting. Domestic abuse victims who want to pursue an official investigation should use the usual reporting procedures (i.e., chain of command, FAP, or law enforcement). A victim advocate will be notified upon receipt of an unrestricted report and will offer the victim advocacy, support, and information. Additionally, at the victim's discretion and/or request, a medical health care provider (HCP) shall conduct any medical examination or care deemed appropriate. Details regarding the incident will be limited to only those personnel who have a legitimate need to know.

b. Restricted Reporting. Domestic abuse victims who desire restricted reporting must report the abuse to one of the following individuals: a victim advocate, a HCP (both afloat and ashore), or a victim advocate supervisor. In the Navy, FFSC clinical counselors operate as victim advocate supervisors and are considered HCPs. When indicated, a victim under restricted reporting may request that a medical HCP conduct a medical examination for the purpose of collection and preservation of evidence with non-identifying information. For states which require mandatory reporting, specified HCPs are obligated to report the domestic abuse to local law enforcement.

7. Victims will acknowledge, in writing, their reporting election and their understanding of the benefits and limitations of restricted or unrestricted reporting. Veteran Affairs (VA) will use the Navy Victim Statement of Understanding provided by DOD. In cases where an adult victim elects restricted reporting, the VA and HCP may not disclose covered communication either to the victim's or alleged offender's commander or to law enforcement, except as outlined below. Consistent with current policy, victims may also report domestic abuse to a chaplain and be afforded privileged communication, which is not altered or affected by the restricted reporting requirements.

8. Exceptions to confidential restricted reporting where a victim elects restricted reporting, could be suspended for one of the following reasons:

a. When disclosure to named individuals is authorized by the victim in writing.

b. When in the judgment of the HCP, victim advocate, or victim advocate supervisor, the disclosure to command officials or law enforcement is necessary to prevent or lessen a serious or imminent threat to the health or safety of the victim or another person.

c. When, as result of the victim's disclosure, the victim advocate or HCP has reasonable belief child abuse has also occurred. Disclosure will be to FAP and any other agencies authorized by law to receive child abuse reports. However, disclosure will be limited only to information related to the child abuse.

d. When disclosure by a HCP to disability retirement boards and officials is required for fitness for duty or disability retirement determinations, information is limited only to what is necessary to process the disability retirement determination.

e. When disclosure is required for the supervision of direct victim treatment or services.

f. When a military, federal, or State judge issues a subpoena for the covered communication to be presented to a military or civilian court of competent jurisdiction or to other officials or entities.

g. When disclosure is required by federal or State statute or applicable U.S. international agreement.

9. HCPs may also convey to the victim's commander, if applicable, any possible adverse duty impact related to an active duty victim's medical condition and prognosis. However, such circumstances do not warrant an exception to policy whereby details of the domestic abuse are considered covered communication and may not be disclosed. Confidentiality of medical information will be maintained.

10. If the victim advocate or HCP believes disclosure is

warranted or required pursuant to one of the exceptions listed above, the victim advocate or HCP shall first consult with their supervisor and/or servicing legal office prior to disclosure. When there is uncertainty or disagreement on whether an exception applies, the matter will be brought to the attention of the Commanding Officer, Naval Support Activity Naples for decision.

11. The victim advocate or HCP must make every reasonable effort to provide the affected victim advance notice of the intention to disclose a covered communication. This advance notice will include a description of the information to be disclosed, the basis for disclosure and the individual, and group or agency to which it will be disclosed. The disclosure will be limited to information necessary to satisfy the purpose of the exception. Further disclosure will not be made unless the domestic abuse victim authorizes disclosure in writing.

12. When a victim discloses domestic abuse to someone other than a victim advocate, HCP, or victim advocate supervisor, disclosure may result in command notification and investigation of the allegations. When information regarding a domestic abuse incident is disclosed to the command or the FAP from a source independent of the restricted reporting avenues, law enforcement shall be notified and will conduct an investigation when appropriate. Commanders acquiring information under these circumstances about a domestic abuse incident shall immediately notify law enforcement and FAP personnel.

13. Per reference (d), domestic abuse disclosed to a Navy New Parent Support Home Visitor, a sexual assault victim advocate or the Sexual Assault Response Coordinator or to Military One Source will immediately be referred to FAP for services. Disclosure by a victim of domestic abuse to one of these sources will not negate the victim's option to elect restricted reporting if other criteria for restricted reporting have been met.

14. Improper disclosure of covered communications, improper release of medical information, and other violations of this policy are prohibited and may result in discipline under the

UCMJ, loss of privileges, and/or to other adverse personnel or administrative actions.

15. This policy does not create any actionable rights for the alleged offender or the victim, nor does it constitute a grant of immunity for any actionable conduct by offender or victim. Covered communications which have been disclosed may be used in disciplinary proceedings against the offender or victim, even if the communication was improperly disclosed.

16. DOD Navy leadership recognizes the potential impact of restricted reporting on investigations and the ability of commanding officers to hold perpetrators accountable. Such risks were carefully considered and were outweighed by the overall interest of providing domestic abuse victims access to medical care and support.