



Navy Family **OMBUDSMAN** PROGRAM MANUAL

Standing Watch Over Our Families



CNIC

★ FLEET ★ FIGHTER ★ FAMILY



2016



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CHAPTER 1

OMBUDSMAN INTRODUCTION AND OVERVIEW

KEY TERMS

CMC: Command Master Chief

COB: Chief of the Boat

CNIC: Commander, Navy Installations Command

COT: Certified Ombudsman Trainer

CNO: Chief of Naval Operations

CST: Command Support Team

CO: Commanding Officer

DoN: Department of the Navy

NOTE:

A complete list of acronyms and abbreviations is included in Appendix A.

1.1 PROGRAM OVERVIEW AND BENEFITS

OVERVIEW

Navy family ombudsmen are dedicated volunteers trained to help Navy families successfully navigate the challenges of the Navy lifestyle. This manual is a supplement to the OPNAVINST 1750.1 series, which governs the Navy Family Ombudsman Program.

BENEFITS

List some of the benefits and highlights of the Ombudsman Program from the “Navy Ombudsmen: Volunteers Who Make a Difference” video:

The Navy Family Ombudsman Program:

- ★ Ensures a timely and accurate flow of information between commands and families via social media, newsletters, email, phone trees and Carelines (recorded telephone messages that provide information to command families).
- ★ Provides an effective representative and a role model for family members.
- ★ Facilitates the smooth transition of Sailors and their families during permanent change of station (PCS) moves.
- ★ Offers vital support during natural and man-made disasters.
- ★ Serves as a link for families during deployment, mobilization or geographic separation.

The Navy Family Ombudsman Program supports mission readiness by enhancing family resilience. Resilient families allow Sailors to focus on their work and their command's mission. Although the Navy recruits Sailors, it retains families. Families that are satisfied with the Navy lifestyle are more likely to choose to “stay Navy.”

There are currently more than 2,000 ombudsmen volunteering their services with Navy commands. With many working 10 or more hours per week, this represents a huge cost savings to the Navy than if these were paid positions.

1.2 WHAT IS AN OMBUDSMAN?

OMBUDSMAN JOB DESCRIPTION

Ombudsmen are volunteers appointed by a commanding officer (CO) to serve as an information link between command leadership and command families.

Ombudsmen are trained to disseminate information — official Department of the Navy (DoN) and command information, command-climate issues and local community opportunities. They also provide resource referrals and are instrumental in resolving family issues before they require the command's attention.

The ombudsman works for the CO. The CO determines the priorities of the program, the roles and relationships of its participants, and the types and levels of support it receives.

The OPNAVINST 1750.1 series (the Navy Family Ombudsman Program instruction) provides the guidance for appointing an ombudsman, defines the ombudsman's roles and responsibilities, and establishes training and management requirements.

NOTE: Download the OPNAVINST 1750.1 series from www.cnic.navy.mil/ffr/family_readiness/fleet_and_family_support_program/about_us/policy_and_guidance.html.

OMBUDSMAN RESUME

Create a one-bullet synopsis of your duty as an ombudsman, which will be included on an ombudsman resume that will be completed by the class.

OMBUDSMAN ROLES AND RESPONSIBILITIES

COs tailor the command's Ombudsman Program to fit their needs. Therefore, ombudsman job descriptions may vary slightly. Ombudsman duties should be defined and documented in a letter at the time of appointment, and the letter should be signed by the CO. Command ombudsmen are part of the command support team (CST) and work within the guidelines and policies established by the CO.

OMBUDSMEN:

- Serve as a liaison between command families and the command.
- Keep the CO informed regarding the command families' morale, health and welfare.
- Communicate regularly with the command and command family members.
- Welcome arriving families and offer their assistance.
- Use social media to communicate with command families.
- Develop and distribute a command-approved monthly or quarterly newsletter or contribute a command-approved column to appropriate publications.
- Establish and maintain an up-to-date telephone tree, Careline, email distribution list, social media page or website to share information quickly.
- Serve as a source of emergency and crisis information.
- Are familiar with the services provided by the Fleet and Family Support Centers (FFSCs) and other support organizations and can provide contact information for these organizations.
- Maintain current records on the performance of their ombudsman duties in accordance with Privacy Act requirements discussed in Ombudsman Basic Training (OBT).
- Represent the command at local ombudsman assembly meetings.
- Avoid conflicts of interest.
- Maintain confidentiality.
- Collect and submit data on services provided.
- Coordinate services for families during deployment, mobilization or geographic separation.
- Perform other official roles, functions and duties as assigned by the CO.



Other duties may include:

- Assist in the organization and implementation of the command welcome program and participate in indoctrination and orientation programs for new command members.
- Represent the command on committees, boards and working groups in the military or civilian community.

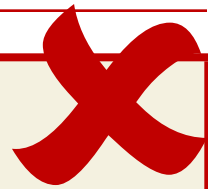
FUNCTIONS OMBUDSMEN DO NOT ASSUME

Ombudsmen are encouraged to support and participate in social activities sponsored by Family Readiness Groups (FRGs), but they are not responsible for organizing these activities. Social events that promote the morale, health and welfare of command families may be announced in the ombudsman newsletter.

Ombudsmen are advocates for the command and command families and are trained to provide information and make referrals. Ombudsmen maintain an up-to-date list of resources to refer family members to the appropriate agency. Ombudsmen must empower family members to help themselves.

OMBUDSMAN RESPONSIBILITIES DO NOT INCLUDE:

- Providing child care.
- Transporting people.
- Lending money.
- Allowing people to stay with them in their homes.
- Doing for others what they must learn to do for themselves.



1.3 NAVY FAMILY OMBUDSMAN PROGRAM HISTORY

The Navy's philosophy of developing healthy, self-reliant families is epitomized through the Navy Family Ombudsman Program. The concept originated in Scandinavian countries, where ombudsmen investigated citizens' complaints against the government and its functionaries. Today, the concept is widely used in the fields of government, business and health care.

On September 14, 1970, Adm. Elmo R. Zumwalt Jr., Chief of Naval Operations (CNO), established the Navy Family Ombudsman Program when he issued Z-gram 24 (the 24th policy directive issued during his term as CNO). Z-gram 24 emphasized the importance of Navy spouses and established a procedure that gave spouses the opportunity to present their complaints, viewpoints and suggestions to the CO. By doing so, Zumwalt acknowledged the vital role spouses play and provided them with what he described as an "official representative to express their views to commanding officers and base commanders."

1.4 OMBUDSMAN RECOGNITION

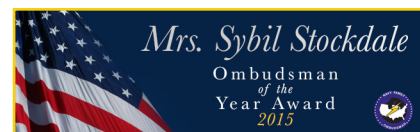
The Navy appreciates the vital role played by ombudsmen. Commands are encouraged to celebrate these essential volunteers and to recognize their efforts.

OMBUDSMAN APPRECIATION

Ombudsman Appreciation Day is celebrated annually on Sept. 14, the anniversary of the creation of the Navy Family Ombudsman Program. Recognition events may be hosted by installations or individual commands on or near Sept. 14, depending on operational schedules.

MRS. SYBIL STOCKDALE OMBUDSMAN OF THE YEAR AWARD

Since 2015, the Navy presents the Mrs. Sybil Stockdale Ombudsman of the Year Award to four outstanding ombudsmen. The Office of the Chief of Naval Operations established this award to honor the service of Navy family ombudsmen. Award winners maintain the highest standards of professionalism and serve as positive role models for command members and their families.



The award is named for Mrs. Sybil Stockdale, the wife of Vice Admiral James Stockdale. During the Vietnam War, Mrs. Stockdale created the National League of Families of American Prisoners in Southeast Asia to provide support for families of other POWs during her husband's seven-year internment in Southeast Asia. Her commitment to military families is carried on by the more than 2,000 ombudsmen currently serving worldwide.

1.5 NAVY FAMILY OMBUDSMAN LOGO

The Ombudsman Program is recognized by a logo containing symbolic elements, each representing an event in the program's history:

- ★ Sweden — represents the origin of the term “ombudsman.” (Note: the blue shape in the center of the black space is the silhouette of Sweden.)
- ★ United States — represents the Navy program.
- ★ Lightning bolt — represents the lightning-fast communication between the command and its families.
- ★ 24 stars — represents Z-gram 24.



This logo appears on the pin attached to the ombudsman name tag or pinned to the shirt collar. Ombudsman pins may be purchased at the uniform shop or online.

1.6 PROGRAM STRUCTURE AND GOVERNANCE

The structure and governance of the Navy Family Ombudsman Program provides guidance as follows:

- ★ CNO appoints one or more Ombudsmen-at-Large, whose guidance is defined by their letter of appointment.
- ★ Commander, Navy Installations Command (CNIC) manages the Navy's overall Ombudsman Program via the Ombudsman Program Coordinator, who can be contacted at Ombudsman.Registry.fct@navy.mil.
- ★ Ombudsman Program Advisory Group (OPAG) is a working group of individuals, convened at the discretion of CNIC (N91), to include the Ombudsmen-at-Large, CNO representative, CNIC Force Master Chief, Fleet and Family Support Program Director, Ombudsman Program Coordinator, and Navy Reserve Force Family Support Program Manager. The OPAG includes representatives of other activities to advise on policy, special projects and curriculum development based on input received from Region Ombudsman Advisory Boards.
- ★ Region Ombudsman Advisory Boards (ROABs) are appointed and convened by the region commander. The region commander selects ROAB members. It is the responsibility of ROABs to support and advise area assemblies. ROABs are neither policymaking nor supervisory bodies and do not interfere with the operation of individual command ombudsman programs. ROABs meet at least semiannually. Recommendations, observations and meeting minutes from ROABs should be forwarded to the CNIC Ombudsman Program Coordinator.

- ★ A region or base commander sponsors a local ombudsman assembly in support of tenant commands. The local ombudsman assembly:
 - Provides ongoing training, policy discussion and clarification.
 - Helps commands recognize and show appreciation to their ombudsmen.
 - Ensures maintenance of a current roster of area ombudsmen in the absence of a local FFSC.
 - Ensures appropriate ombudsman roles in installation disaster preparedness.
 - Performs other functions as directed.

The region or base commander appoints an ombudsman, and perhaps an advisory group, to run the local ombudsman assembly.

- ★ The local FFSC provides Ombudsman Basic Training (OBT) and support to area commands and ombudsmen.
- ★ COs execute the Navy Family Ombudsman Program within their command.
- ★ The CNIC Ombudsman Program Coordinator conducts training and provides ongoing support to FFSC Ombudsman Program staff.

1.7 OVERVIEW OF THE OPNAVINST 1750.1 SERIES

The OPNAVINST 1750.1 series provides the primary guidance for the Navy Family Ombudsman Program. A brief overview of this instruction is provided below.

The instruction includes:

- ★ A list of relevant guidance in support of the Navy Family Ombudsman Program.
- ★ A detailed definition of the program structure.
- ★ The outlined roles and responsibilities for all individuals involved, including the CNO, region commanders, COs and ombudsmen.
- ★ A list of required forms and reports.

Enclosures to the OPNAVINST 1750.1 series include:

- ★ Enclosure (1): Mrs. Sybil Stockdale Ombudsman of the Year Award
- ★ Enclosure (2): Policy Waiver Request Procedures
- ★ Enclosure (3): Chief of Naval Operations Ombudsmen-at-Large Duties
- ★ Enclosure (4): Fleet and Family Support Center Duties in Support of Ombudsmen
- ★ Enclosure (5): Ombudsman Registry
- ★ Enclosure (6): Ombudsman Program Advisory Group and Region Ombudsman Advisory Boards
- ★ Enclosure (7): Ombudsman Assembly
- ★ Enclosure (8): Program Support
- ★ Enclosure (9): Reporting Requirements for Child Abuse, Domestic Abuse and Sexual Assault

1.8 STANDARD AND ADVANCED TRAINING

OMBUDSMAN BASIC TRAINING

Ombudsman Basic Training (OBT) is required of all appointed ombudsmen. It provides information to properly execute the duties of a command ombudsman. OBT is offered in two options — a traditional classroom setting at the local FFSC and electronically, through eOBT. Both versions meet the training requirement detailed in the OPNAVINST 1750.1 series.

eOBT is a blend of five webinars and four on-demand modules, including a capstone event that reviews information covered in all sessions. The modules are designed to align with the chapters in the *Ombudsman Program Manual*. Additionally, Module 9, Capstone, was added to provide a review of the first eight modules, allowing an opportunity for questions about the on-demand modules, and to include some free-standing information.

Ombudsmen should choose the option that is most convenient to them and to their command. Whichever option you choose, remember the training requires your full attention and commitment.

| Ombudsman Basic Training – Classroom | Ombudsman Basic Training (eOBT) – Online |
|---|---|
| <p>OBT consists of nine modules:</p> <ul style="list-style-type: none"> ■ Module 1: Ombudsman Introduction and Overview ■ Module 2: Managing Your Responsibilities ■ Module 3: Ombudsman Registry and Code of Ethics ■ Module 4: Command Relationships ■ Module 5: Communication Skills ■ Module 6: Information and Referral ■ Module 7: Crisis Calls and Disasters ■ Module 8: Deployment and Mobilization ■ Module 9: Course Review and Summary (Capstone) | <p>eOBT consists of nine modules:</p> <ul style="list-style-type: none"> ■ Module 1: Ombudsman Introduction and Overview (webinar) – 1.5 hours ■ Module 2: Managing Your Responsibilities (on-demand) ■ Module 3: Ombudsman Registry and Code of Ethics (webinar) – 2 hours ■ Module 4: Command Relationships (on-demand) ■ Module 5: Communication (on-demand) ■ Module 6: Information and Referral (webinar) – 2 hours ■ Module 7: Crisis Calls and Disasters (webinar) – 2 hours ■ Module 8: Deployment and Mobilization (on-demand) ■ Module 9: Course Review and Summary (Capstone) (webinar) – 2.5 hours |

OBT conducted in the classroom is coordinated by the local FFSC and the Navy Reserve Forces Command. In locations where training is not available, commands may issue invitational travel orders. To obtain a list of CNIC-approved training sites, go to www.cnic.navy.mil/OmbudsmanProgramTraining.

OMBUDSMAN ON-DEMAND ORIENTATION

The Ombudsman Program Coordinator maintains an online orientation for ombudsmen who are unable to attend OBT within the first six weeks of appointment. The purpose of online orientation is to provide new ombudsmen with an overview of the program. It is not intended to be a substitute for certification or OBT. Ombudsmen are not considered trained until they complete OBT or eOBT. Orientation on-demand training may be accessed at www.ffsp.navy.mil by clicking on “Ombudsman” in the list of programs, then selecting “Ombudsman Program Resources.” A link to the orientation course is included in the list of resources.

OBT schedules are available through www.ffsp.navy.mil and <https://ombudsmanregistry.cnic.navy.mil>.

ADVANCED TRAINING (MANDATORY)

Initial, or basic, training ensures that ombudsmen deliver a standard level of service to Navy families. As ombudsmen grow in their roles, advanced training enables them to stay abreast of changes in services and to become familiar with new programs available to Sailors and their families.

Advanced training is considered to be any training received by an ombudsman after OBT. The ombudsman coordinator keeps records of attendance for advanced training. Advanced training topics are determined locally and generally include information on the following:

- ★ American Red Cross
- ★ Casualty Assistance Calls Program
- ★ Crisis response
- ★ Disaster preparedness
- ★ Deployment readiness
- ★ Domestic abuse
- ★ Legal
- ★ Media relations
- ★ Navy-Marine Corps Relief Society (NMCRS)
- ★ Newsletters
- ★ Operations Security (OPSEC)
- ★ Personal Financial Management Program (PFM)
- ★ Servicemembers Civil Relief Act (SCRA)
- ★ Sexual assault prevention
- ★ Suicide prevention
- ★ TRICARE

Standardized advanced trainings include:

- ★ Family Advocacy Program (FAP)
- ★ Sexual Assault Prevention and Response (SAPR)





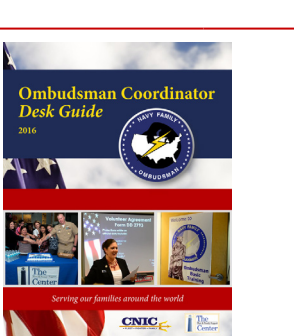
Ombudsman Program webinars are available via the learning management system (LMS) at <http://learning.zeiders.com> and include:

- ★ Monthly Ombudsman Hot Topic webinars
- ★ Ombudsman Registry Training
- ★ Reserve OBT – Information and Referral
- ★ Reserve OBT – Family Readiness

OMBUDSMAN PROGRAM TRAINING DIRECTORY

The CNIC Learning Management System (LMS) hosts information and resources to provide on-going support for Certified Ombudsman Trainers (COTs) and ombudsmen. Click on the link to the LMS: <http://learning.zeiders.com>. Select the “Ombudsman” icon to access the Ombudsman Program Training Directory.

From the Ombudsman Program Training Directory home page, simply click on the image of the resource you would like to explore. The chart below provides a summary of the resources at your disposal.

| | |
|--|--|
|  | <p>OMBUDSMAN TOOL BOX</p> <p>Click on this icon in the LMS to access valuable resources including:</p> <ul style="list-style-type: none"> ★ Navy instructions, guidelines and general materials. ★ OBT participant materials (Program Manual and handouts). ★ OBT instructor materials (IG, PPTs and videos). |
|  <p>OMBUDSMAN TRAINING CALENDAR</p> | <p>TRAINING CALENDAR</p> <p>Click on this image in the LMS to access all training information including:</p> <ul style="list-style-type: none"> ★ eOBT webinar modules. ★ Ombudsman Town Hall meetings. ★ Other Ombudsman training. |
|  | <p>ELECTRONIC OBT (eOBT)</p> <p>Click on this image in the LMS enroll in the eOBT live webinars and access the on-demand modules:</p> <ul style="list-style-type: none"> ★ Live, facilitated webinars (5). ★ Self-paced, on-demand modules (4). |
|  | <p>OMBUDSMAN ON-DEMAND ORIENTATION</p> <p>Click on this image in the LMS to access a brief, interim training about OBT.</p> <ul style="list-style-type: none"> ★ Provides an overview of Ombudsman Basic Training (OBT/eOBT). ★ Resource for Ombudsmen unable to take OBT or eOBT within six months of their appointment. |
|  | <p>OMBUDSMAN COORDINATOR DESK GUIDE</p> <p>Click on this image in the LMS to access this resource for Ombudsmen Coordinators which includes information about:</p> <ul style="list-style-type: none"> ★ Ombudsman Coordinator responsibilities ★ Ombudsman Basic Training ★ Ombudsman Registry ★ Ombudsman Assemblies ★ Program Administration |

SUMMARY

As an ombudsman, you fill an important role for commands and families. Knowing the history and structure of the Navy Family Ombudsman Program helps you understand the significance of your position.

As you become familiar with the instructions governing the Ombudsman Program, you will have a better understanding of your responsibilities as a command ombudsman. The standard and advanced trainings offered will enable you to provide accurate and timely information to the command and its families.

GETTING SMART ABOUT THE PROGRAM



1. On Sept. 14, 1970, _____, the Chief of Naval Operations, introduced the Ombudsman Program by issuing Z-gram 24.
2. The command ombudsman is a volunteer who is the spouse of an _____ or _____.
3. The command ombudsman is appointed by, reports to, has direct access to and represents the _____.
4. The ombudsman serves in roles of _____ and _____ to the command and its family members.
5. The structure of the program includes the following components:
 - a. The _____ appoints one or more Ombudsmen-at-Large, whose guidance is defined by their letter of appointment.
 - b. _____ ensure their command ombudsman information is added to the Ombudsman Registry and updated as needed.
 - c. _____ manages the Navy's overall Ombudsman Program via the Ombudsman Program Coordinator.
 - d. The _____ sponsors a local ombudsman assembly in support of tenant commands to provide ongoing training, policy discussion and clarification.
6. The _____ provides feedback from local ombudsman assemblies on policy, implementation or other programmatic issues to the CNIC Ombudsman Program Coordinator.
7. The _____ is a working group of individuals that meets as needed to advise on policy, special projects and curriculum development.
8. Ombudsman Basic Training is offered in two venues:
 - a. The _____ provides Ombudsman Basic Training (OBT) and supports area commands and ombudsmen.
 - b. _____ is the online training option for Ombudsman Basic Training.
9. The _____ is a meeting of all command ombudsmen in a region.
10. When Navy Reservists are recalled to active duty for an extended period, the _____ command assumes responsibility for the Sailors and their families to ensure the (often remotely located) Reservist's family receives the support services to which they are entitled, the _____ command ombudsman should contact the gaining command's ombudsman to coordinate services.



CHAPTER 2

MANAGING YOUR RESPONSIBILITIES

INTRODUCTION

As an ombudsman, you will perform a wide range of duties, including administrative tasks as well as assisting command families. When you have completed all of the steps in the appointment process as described in the OPNAVINST 1750.1 series, *Navy Family Ombudsman Program*, you will become an invaluable resource to the command and its families. This chapter describes your responsibilities and provides tools and resources for managing them.

KEY TERMS

CACO: Casualty Assistance Calls Officer

ITO: Invitational Travel Orders

CDC: Child Development Center

NAF: Non-Appropriated Funds

CDH: Child Development Home

WIIFM: What's In It For Me?

2.1 APPOINTMENT

APPOINTMENT LETTER

When you are appointed as an ombudsman, you should receive a copy of the OPNAVINST 1750.1 series, a copy of the *Navy Family Ombudsman Program Manual*, an ombudsman pin, a name tag and an appointment letter. The appointment letter is your official “welcome to the team” from the command. It should include information about:

- ★ Duties the commanding officer (CO) expects you to perform.
- ★ Upcoming [Ombudsman Basic Training \(OBT\)](#) or [electronic Ombudsman Basic Training \(eOBT\) class dates](#), in addition to registration and contact information.
- ★ The availability of Ombudsman On-Demand Orientation if you cannot attend OBT/eOBT within the first six weeks of your assignment. Go to [Ombudsman Program Training](#) for a link to the training. This 90-minute overview of OBT does not meet the requirement to complete the full OBT/eOBT course.
- ★ Your point of contact (POC) at the command and the POC’s contact information.
- ★ The length of the appointment and whether there is a probationary period.
- ★ Expectations for your attendance at local ombudsman assemblies and completion of advanced training.

2.2 MEET WITH THE COMMANDING OFFICER

Your training begins with the CO’s guidance. It should include:

- ★ Information about your duties as ombudsman.
- ★ Assignment of a command POC.
- ★ Reporting requirements and procedures.
- ★ Guidance for working within the command support team.
- ★ Expectations and goals for the Ombudsman Program at the command.

VOLUNTEER AGREEMENT

Because you are serving as a volunteer, the OPNAVINST 1750.1 series requires you to complete DD Form 2793, *Volunteer Agreement for Appropriated Fund Activities or Non-appropriated Fund (NAF) Instrumentalities*. Congress authorizes appropriated funds for specific purposes; non-appropriated funds are used to augment funds from Congress for programs to improve the morale and welfare of military personnel and their families.

You should receive a copy of the volunteer agreement, signed by both you and the CO, before you begin your volunteer service. Part IV of the form will be completed at the end of your term of service. A copy of the completed agreement should be given to you upon termination of service. When volunteer service has ended, volunteer records are retained for three years by the command that received the service.

A copy of this form can be found in Appendix C of this manual and online through www.dtic.mil/whs/directives/forms/eforms/dd2793.pdf.

PROTECTIONS

While performing your duties as an ombudsman, you are considered an employee of the government. This affords you certain protections:

- ★ In the event of injury or death while performing official duties, the U.S. government will pay disability or death compensation unless:
 - The injury or death was caused by misconduct.
 - You inflicted harm upon yourself.
 - You were under the influence of drugs or alcohol.

| VOLUNTEER AGREEMENT FOR | | | |
|---|--|--|----------------------------|
| APPROPRIATED FUND ACTIVITIES | | NONAPPROPRIATED FUND INSTRUMENTALITIES | |
| PART I - GENERAL INFORMATION | | | |
| 1. TYPED NAME OF VOLUNTEER (Last, First, Middle Initial) | | | 2. YEAR OF BIRTH |
| 3. INSTALLATION | 4. ORGANIZATION UNIT NUMBER GROUP OCCASION | | |
| 5. PROGRAM WHERE SERVICE OCCURS | 6. ANTICIPATED DATE OF WEEK | 7. ANTICIPATED HOURS | |
| 8. DESCRIPTION OF VOLUNTEER SERVICES | | | |
| PART II - VOLUNTEER IN APPROPRIATED FUND ACTIVITIES | | | |
| 9. CERTIFICATION I expressly agree that my services are being provided as a volunteer and that I will not be an employee of the United States Government or any instrumentality thereof, except for certain purposes relating to compensation for injuries occurring during the performance of approved volunteer services, tort claims, the Privacy Act, criminal conflicts of interest, and defense of certain suits arising out of legal instructions. I expressly agree that I am neither entitled to nor expect any present or future salary, wages, or other benefits for these voluntary services. I agree to be bound by the laws and regulations applicable to voluntary service providers and agree to participate in any training required by the installation or unit in order for me to perform the voluntary services that I am offering. I agree to follow all rules and procedures of the installation or unit that apply to the voluntary services I will be providing. | | | |
| 10. SIGNATURE OF VOLUNTEER | | 11. DATE SIGNED (YYYYMMDD) | |
| 12A. TYPED NAME OF ACCEPTING OFFICIAL (Last, First, Middle Initial) | 13. SIGNATURE | 14. DATE SIGNED (YYYYMMDD) | |
| PART III - VOLUNTEER IN NONAPPROPRIATED FUND INSTRUMENTALITIES | | | |
| 15. CERTIFICATION I expressly agree that my services are being provided as a volunteer and that I will not be an employee of the United States Government or any instrumentality thereof, except for certain purposes relating to compensation for injuries occurring during the performance of approved volunteer services and liability for tort claims as specified in 10 U.S.C. Section 5528(b)(2). I expressly agree that I am neither entitled to nor expect any present or future salary, wages, or other benefits for these voluntary services. I agree to be bound by the laws and regulations applicable to voluntary service providers, and agree to participate in any training required by the installation or unit in order for me to perform the voluntary services that I am offering. I agree to follow all rules and procedures of the installation or unit that apply to the voluntary services that I am offering. | | | |
| 16. SIGNATURE OF VOLUNTEER | | 17. DATE SIGNED (YYYYMMDD) | |
| 18A. TYPED NAME OF ACCEPTING OFFICIAL (Last, First, Middle Initial) | 19. SIGNATURE | 20. DATE SIGNED (YYYYMMDD) | |
| PART IV - TO BE COMPLETED AT END OF VOLUNTEER'S SERVICE BY VOLUNTEER SUPERVISOR | | | |
| 21. AMOUNT OF VOLUNTEER TIME DONATED | | 22. SIGNATURE | 23. TERMINAL FOR DATE |
| A. YEARS (LAST) | B. WEEKS | C. DAYS | D. HOURS |
| 24. TYPED NAME OF SUPERVISOR (Last, First, Middle Initial) | | 25. SIGNATURE | 26. DATE SIGNED (YYYYMMDD) |
| DD FORM 2793, MAY 2009 | | PREVIOUS EDITION IS OBSOLETE | |

- ★ Protection from personal liability should anyone be injured during the performance of ombudsman duties. However, this does not prevent an ombudsman from being charged with a crime.

OMBUDSMAN REGISTRY

CNIC established the Ombudsman Registry in August 2005 in response to the hurricanes in the Gulf Coast region. The registry allows CNIC to deliver real-time communication and information to commanders, ombudsmen and ombudsman coordinators. Commands are required to register, assign their ombudsman and ensure that required worksheet data are submitted per the OPNAVINST 1750.1 series.

NOTE:

Instructions for using the Ombudsman Registry are included in Chapter 3 of this manual.

Once the CO appoints you as an ombudsman, the command should register you with the Ombudsman Registry through <https://ombudsmanregistry.cnic.navy.mil>. This allows your name and contact information to be distributed as needed and enables you to submit Ombudsman Monthly/Quarterly Worksheets.

Guidance for commanders, ombudsman coordinators and ombudsmen can be found on the login page of the Ombudsman Registry.

Ombudsmen cannot register or assign themselves to a command. Contact your command POC to be registered.

2.3 MEET THE OMBUDSMAN COORDINATOR

The ombudsman coordinator is a staff member of the Fleet and Family Support Center (FFSC). In addition to overseeing OBT, the coordinator serves as an adviser/consultant to local ombudsmen, the ombudsman assembly and commands. The FFSC Ombudsman Coordinator *does not* serve as the chairperson for the local assembly.

In support of the Ombudsman Program, the coordinator should:

- ★ Maintain a current ombudsman roster; check the Ombudsman Registry regularly for updates.
- ★ Advise COs, command designees and ombudsmen on the proper use of the Ombudsman Registry.
- ★ Provide space for ombudsman assembly meetings.
- ★ Coordinate advanced training for ombudsman assemblies.
- ★ Provide assistance to local ombudsmen.
- ★ Assist commands with questions about the program or policy. Offer suggestions for ombudsman recognition.
- ★ Notify commands of issues that affect their families or programs so COs can address potential problems.

NOTE:

In addition to the ombudsman coordinator, FFSC staff members are a valuable resource you may call upon for information and guidance when working with command families.

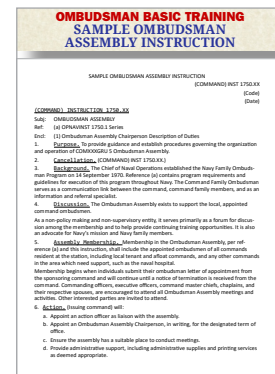
- ★ Share information about Navy and community resources.
- ★ Serve as a referral resource for ombudsmen and Navy families.
- ★ Refer command families to their ombudsman; provide information about the Ombudsman Program to new arrivals.

The *2016 Ombudsman Coordinator Desk Guide* provides guidance concerning the roles and responsibilities of ombudsman coordinators.

2.4 OMBUDSMAN ASSEMBLY

OMBUDSMAN ASSEMBLY MEETINGS

An ombudsman assembly is a monthly, bimonthly or quarterly meeting of all command ombudsmen in an installation or region. The local ombudsman assembly is an important component of the Ombudsman Program because it provides opportunities for sharing and exchanging information, resources and best practices. Ombudsman assemblies also frequently serve as venues for ongoing training. Each sponsoring command has a local instruction that governs its assembly's operation. Contact your ombudsman coordinator for information about your local instruction.



Functions of the assembly may include:

- ★ Serving as a resource for the professional development of local ombudsmen by arranging topical training.
- ★ Serving as a forum for policy discussion and clarification by appropriate local authorities regarding issues of interest to ombudsmen and command family members.
- ★ Assisting commands to recognize/show appreciation to their ombudsmen.
- ★ Maintaining a current roster of area ombudsmen, in the absence of a local FFSC.
- ★ Other functions as directed by the sponsoring command, such as providing resource handbooks, publishing a newsletter and maintaining a local calendar of events.

COs, executive officers (XOs), command master chiefs (CMCs), chaplains and their spouses are encouraged to attend ombudsman assemblies.

Due to the structure and diversity of Navy communities and installations, there may be more than one assembly within a geographic area. Assemblies are not hierarchical, and one assembly does not have authority over another, regardless of the rank of the sponsor.

Local commanders may decide that one area assembly consisting of all ombudsmen within the geographic location is sufficient. Assemblies are information-sharing groups

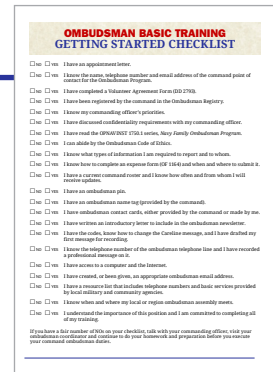
and do not function as social clubs. Assemblies will not maintain treasuries or collect dues for sponsoring assembly activities. Each sponsoring command should have a local ombudsman assembly instruction. Assembly leadership should be appointed for a specified term, in writing, by the sponsoring command.

OMBUDSMAN ASSEMBLY CHAIRPERSON

An ombudsman assembly chairperson is appointed to serve as the leadership of the ombudsman assembly and to conduct monthly meetings. The chairperson must be a current ombudsman. The term of office is one year, but the chair may be renewed for another term at the discretion of the issuing command.

GETTING STARTED

The *Getting Started Checklist* can help you complete required tasks in an organized way. Refer to the handout at the end of this chapter to record the tasks you have already accomplished as well as completion goals for the remaining tasks.



2.5 THE PRIVACY ACT OF 1974

One critical responsibility of all ombudsmen is respecting the privacy of Sailors and family members. You will have access to personal information that must be protected. The federal government has enacted laws that provide guidelines for the protection of personal information. The Privacy Act of 1974 safeguards individuals against the invasion of personal privacy, limits the government’s collection, use and disclosure of personal information, and allows individuals access to any government records pertaining to them. The Privacy Act was updated in 1988 with the Computer Matching and Privacy Protection Act and again in 1995 with “Privacy Principles” developed under the Clinton administration.

The Privacy Act allows for the disclosure of information without the consent of an individual if there is a compelling need to know by selected officers and employees of the DoD in the performance of their duties.

Appropriate disclosure examples:

- ★ The contact information for a primary next of kin whose service member has been severely injured is not current. The command is deployed and the Casualty Assistance Calls Officer (CACO) contacts you to see whether you have more current information. This is an authorized disclosure of personal information because personnel from the DoD have a need to know.
- ★ Providing information to the Family Advocacy Program (FAP) representative or to a local child protection agency to report suspected child abuse is an authorized disclosure of personal information.

- ★ Contacting the police and providing the name, address and telephone number of a spouse who tells you they have taken a drug overdose in a suicide attempt is an appropriate disclosure of personal information.
- ★ Informing the command and the local police that one of the command's family members has a gun and plans to kill her husband's girlfriend is an appropriate disclosure of personal information.

To better understand privacy requirements, complete the optional training at www.doncio.navy.mil/PIICourse.

Most individuals associated with the military are familiar with the requirements of The Privacy Act of 1974. However, to protect the individual's rights and to establish and maintain credibility within the Navy community, it is imperative that the strictest standards of confidentiality be adhered to when families contact the command ombudsman.

Family members can disclose problems that place the service member's professional standing, social acceptance and career progression in jeopardy. These include, but are not limited to, substance abuse by the service member, severe financial problems or involvement with child pornography. It is important that you understand the Navy's and the CO's reporting requirements. You should ensure families are informed of these requirements. Some command ombudsmen periodically publish in their newsletter the types of items that must be reported.

SAFEGUARDING INFORMATION

Every effort should be made to protect an individual's personal information. Rosters, logs, contact forms and other documents that contain personally identifiable information should be kept in a secure area. Command rosters can make individuals particularly vulnerable and should not be made available to anyone without the command's permission. No one, including your spouse or children, should have access to information about families who contact you in your official capacity as command ombudsman.

Electronic rosters and other computer files that contain personally identifiable information (PII) should not be kept on a computer's hard drive but should be stored on a removable storage device (e.g., compact disc) that can be safeguarded.

At the end of each month, you are required to submit your monthly (for active duty) and quarterly (for Reserve) worksheets, as directed by the CNIC Ombudsman Registry Administrator. An electronic copy will be available via the Ombudsman Registry, so your copy and/or notes should be destroyed.

Additionally, you should destroy any copies of individual contact forms, contact logs and any other personal notes for that reporting month or quarter.

2.6 FUNDING AND BUDGETING

Commands may use appropriated or non-appropriated funds in support of the command Ombudsman Program. It is important that you and the CO discuss the program's budget and determine what support can be provided.

Funding may include:

- ★ The CO may use non-appropriated funds for individual ombudsman appreciation dinners, plaques and awards. The limit is \$50 per ombudsman per year, not to exceed a total of \$500 (for commands with multiple ombudsmen) per year per command. Cash awards are not authorized.
- ★ Administrative support (i.e., paper, envelopes, pens, copier service, clerical assistance, command telephone cards and government vehicle transportation) should be budgeted and may be provided from appropriated or non-appropriated funds, as command resources permit.
- ★ The command assumes all costs for the production and delivery of ombudsman newsletters. Newsletter content must be approved by the command before it is distributed. If the newsletter is produced solely within the command, the command is responsible for providing technical and administrative support, paper, printer access and delivery costs (i.e., stamps/bulk mail, etc.). If the newsletter is printed and delivered by Document Automation and Production Service (DAPS), the command must approve and provide funding. The local printing officer can provide guidance.

CLAIM FOR REIMBURSEMENT

Based on the authorized budget, commands may reimburse ombudsmen for specific, preapproved expenses. To receive reimbursement, you must document expenses and submit a *Claim for Reimbursement for Expenditures on Official Business* (Form OF 1164) to the command and appropriate receipts.

NOTE: Before incurring any expenses, discuss the command's reimbursement policy with your CO or command POC. Be sure to receive clear instructions on allowable expenses and the procedure for submitting claims.

OF 1164 can be found through www.gsa.gov/portal/forms/download/150834. A copy of the form can be found in Appendix C of this manual.

The CO may allow you, when you act in an official capacity, to be reimbursed for the following:

- ★ Child care from any provider, not to exceed the rate that would be charged by the local Child Development Center (CDC). (Clarify with the CO that the local CDC may provide support for drop-in care.)

The image shows the official GSA Form OF 1164, titled 'CLAIM FOR REIMBURSEMENT FOR EXPENDITURES ON OFFICIAL BUSINESS'. The form is divided into several sections: 'PART 1: GENERAL INFORMATION', 'PART 2: EXPENDITURES', and 'PART 3: RECEIPTS CLAIMED'. Section 2 contains a table for listing expenses with columns for date, amount, and description. Section 3 contains a table for listing receipts with columns for receipt number, date, and amount. The form also includes fields for the claimant's name and title, and the approving official's name and title, along with signature lines.

NOTE: The *CDC Operating Manual* states: “While performing official duties, ombudsmen shall be provided hourly care free of charge whenever possible and where available (i.e., during normal CDC operating hours, whenever a CDH provider offers hourly care, etc.). The ombudsman must provide a copy of his/her appointment letter signed by the commanding officer to be kept in the child’s administrative file.” To request child care through the CDC, you must complete [DD Form 2606, Department of Defense Child Development Program Request for Care Record](#).

- ★ Mileage, parking and tolls paid at the current government privately owned vehicle rate.
 - Mileage must be documented. Parking and tolls require receipts.
 - Go to the General Services Administration (GSA) website to learn the current mileage reimbursement rate (www.gsa.gov/portal/content/100715).
- ★ Communication equipment, such as computers, cellphones, pagers or other electronic devices. Command-owned equipment may be issued to you, at the discretion of the CO. This equipment must be accounted for and returned when the ombudsman leaves the position. The use of these items must be limited to the execution of official duties.
- ★ Internet service may be authorized if the CO determines it is necessary and economically efficient for you to stay connected to command families.
- ★ Telephone lines and any necessary telecommunication equipment may be installed in an ombudsman’s home. In the case of equipment installed under this authority, COs may pay the charges incurred for the use of the equipment for authorized purposes, using appropriated or non-appropriated funds. Installation of such equipment must not be done routinely but only after careful consideration and subsequent decision that this is necessary for the command Ombudsman Program to function effectively.
- ★ Travel expenses incurred during command-directed or command-authorized participation in training, conferences, etc., will be reimbursed. The expense report (OF 1164) and receipts must be submitted as required. To be authorized for reimbursement, invitational travel orders (ITOs) must be issued *before* travel takes place.

Commands may issue ITOs for out-of-area travel, reimburse expenses or authorize a travel advance for anticipated expenses. If waiting to be reimbursed for travel expenses will cause a hardship for your family, the command may provide a travel advance. You will need to file a travel voucher with receipts upon completion of travel. Because many commands use automated travel order programs, your POC or command administrative officer can advise you on the proper procedure and forms.

TAX DEDUCTIONS FOR VOLUNTEERING COSTS

As a volunteer, ombudsmen may be eligible to claim tax deductions from the federal government for any unreimbursed costs associated with volunteering, such as:

- ★ Transportation costs to attend non-local OBT.
- ★ Automobile mileage (at the standard IRS rate, which changes annually).

NOTE:

Check with the Internal Revenue Service (IRS) or a tax professional for guidance on claiming tax deductions for unreimbursed volunteer expense.

- ★ Parking and tolls.
- ★ Telephone bills.
- ★ Supplies purchased in support of volunteer duties.
- ★ Dues or fees to a qualified organization.
- ★ Noncash contributions of property.

Ombudsmen are required to keep track of their expenses. Many find it useful to have a specific file folder for this purpose. Please note that in many cases these costs may be covered by the command. For example, if a command provides a cellphone, ombudsmen may not deduct items paid for or reimbursed by the command.

TRAINING FUNDS

Local commands may reimburse you for the cost of child care and for mileage incurred during training. To be eligible for reimbursement, you must have a letter of appointment and have signed the volunteer agreement. In locations where training is not available, commands may issue ITOs to give ombudsmen the opportunity to complete training at another installation. A list of approved training sites is available at www.cnic.navy.mil/ffr/family_readiness/fleet_and_family_support_program/ombudsman_program.html.

If funding for travel is not available, you should plan to attend eOBT.

Budget permitting, commands may pay for associated travel, lodging, meals and incidental expenses for ombudsmen to attend nonlocal training. Expenses may be reimbursed or travel advances may be authorized per Joint Federal Travel Regulations (JFTR).

For more information, watch the short video: “[Ombudsman Reimbursement](#).”

2.7 NAME THAT FORM

NAME THAT FORM:

TERMS

- A. Volunteer Agreement Form DD 2793
- B. Appointment Letter
- C. Training Record
- D. Claim for Reimbursement Form OF 1164

DEFINITIONS

1. The ombudsman’s complete history of any advanced training sessions attended or certifications.
2. Confirms that ombudsmen are considered employees of the government in certain situations.
3. Where new ombudsmen may find their command POC and contact information, as well as their length of appointment.
4. Child care, mileage, Internet service and travel expenses can be reimbursed using this.

2.8 PROMOTING THE PROGRAM

Although the Navy Family Ombudsman Program provides an essential service to Sailors and their families, some family members may be unaware of their ombudsman. In order to reach a larger number of command families, it will be necessary for you to promote the program.

The following are ways you can increase awareness of the command Ombudsman Program at the local level:

- ★ Identify potential target audiences.
- ★ Develop outreach messages.
- ★ Review outreach tools and strategies.

IDENTIFY TARGET AUDIENCE

Before you can develop an effective message, you must first identify your target audience. Your audience will determine the information to be included, the language you use and the method you will use to deliver your message.

For ombudsmen, potential target audiences include:

- ★ The command support team.
- ★ Officers, chiefs and enlisted personnel at the command.
- ★ Spouses.
- ★ Partners (fiancés/fiancées, boyfriends or girlfriends of command service members).
- ★ Parents and family members of command service members.
- ★ Caregivers of children of single parents.
- ★ Families of Sailors temporarily assigned to the command.



There are several ways to get the word out about services to each of these groups.

DEFINE THE MESSAGE

When communicating with others, it is important to have a clear message. The message may be simple, such as providing your telephone number and telling people to call if they need assistance. You may want to create a message that defines your role, instructs callers to use the Careline (if available for routine messages) or advertises a community program or service. When defining the message, be sure to answer WIIFM: “What’s in it for me?” People are more likely to listen to a message when they believe it solves a problem for them.

TOOLS AND STRATEGIES

You can use a variety of tools and strategies to provide information about the command's Ombudsman Program. Keep in mind that today's consumers are inundated with messages everywhere they go. Choose tools and strategies that are appropriate for the message and the audience. For example, a great deal of detailed information may be better presented in a brochure, and social media may be more effective if your audience is geographically dispersed.

The range of tools is as unlimited as your imagination, but there are real-world limitations to keep in mind. Be sure to consider the following:

- ★ Budget.
- ★ Return on investment.
- ★ Ease of implementation.

Choose tools that can be accommodated within your budget and require minimum time and energy to put into place. Some methods may be inexpensive but might not reach your target audience.

Promotional tools fall into four broad categories:

1. Audiovisual
2. Internet
3. Print media
4. In person

AUDIOVISUAL OUTREACH STRATEGIES

Audiovisual tools include:

- ★ Video
- ★ 1MC (command's internal intercom) announcements
- ★ Bulletin boards
- ★ PowerPoint presentations

INTERNET STRATEGIES

Use the Internet to:

- ★ Post a webpage and/or link to the command's website.
- ★ Connect through social media.
- ★ Create electronic newsletters.
- ★ Send email.
- ★ Send group text messages.
- ★ Create or update a webpage.

Social Media

Social media has become a popular way for commands to connect with family members. Tools such as Facebook can be effective at reaching families who may not live near a military base.

You can use social media to:

- ★ Announce command and Family Readiness Group (FRG) events.
- ★ Share information and resources.
- ★ Provide an opportunity for family members to network.
- ★ Answer frequently asked questions.

NOTE:

Be sure to check with the command about its social media policy and follow Operations Security (OPSEC) guidelines when posting any information online.

Electronic Newsletter

More ombudsmen are producing an electronic newsletter because it is less expensive, saves on postage, appeals to the Internet-savvy and is easy to distribute. Hard-copy and electronic newsletters can be used to:

- ★ Announce command events.
- ★ Provide information about FRG events.
- ★ Introduce agency and community services.
- ★ Welcome new arrivals.
- ★ Ensure deployment readiness.
- ★ Motivate and encourage.

Email

Customized emails are another way to use the Internet. They are also an excellent way to keep in contact with the command support team, colleagues, FRG leaders and community organizations.

When using email:

- ★ Create distribution lists and send information about topics of interest.
- ★ Remember to keep it professional looking.
- ★ Do not send attachments. Many sites can no longer receive them due to security concerns, and many people who receive attachments report that they do not take the time to download them.
- ★ Keep messages short. The receiver should never have to scroll down to read a message.
- ★ Promptly remove anyone who requests to be removed from the distribution list.
- ★ When sending out emails, use blind carbon copy (bcc) to prevent violations of the Privacy Act of 1974.

TEXT MESSAGING

Many family members may rely on text messages as their primary means of communication. You can use group text messages to share information instantly with command families. Text messaging is also a way for you to help remote families feel connected.

This tool can be useful, but remember that text messages are in real time and not prescreened, so OPSEC can be violated easily.

If you would prefer to keep your cellphone number private or want to limit the number of text messages you send/receive, you can send text messages directly from your email account. To take advantage of this option, you will need the cellphone numbers of recipients as well as the name of their cellphone provider.

Using this information, you can create distribution lists that will be delivered as text messages from your email account. Simply type in the 10-digit cellphone number (no hyphens or spaces) and the @ information for that cellphone provider.

A sample list of the more popular cellphone services and their text messaging addresses is shown below.

| | |
|---------------|--|
| AT&T | number@txt.att.net |
| Boost Mobile | number@myboostmobile.com |
| Cricket | number@sms.mycricket.com |
| Metro PCS | number@mymetropcs.com |
| Sprint | number@messaging.sprintpcs.com or number@pm.sprint.com |
| Tracfone | number@mmst5.tracfone.com |
| T-Mobile | number@tmomail.net |
| U.S. Cellular | number@email.uscc.net |
| Verizon | number@vtext.com |
| Virgin Mobile | number@vmobl.com |

NOTE:

Before you use text messaging, be sure to check with your service provider for your plan's text-messaging fees.

PRINT MEDIA STRATEGIES

You may want to use posters, fliers, newsletters and business cards to promote the Ombudsman Program. In addition, your installation and community newspapers can expand your print outreach efforts. Whatever print medium you choose, remember that the quality of your print products is critical. There are several key elements in producing quality materials:

- ★ The information must be accurate.
- ★ High-quality graphic design integrates words and images.
- ★ The product must be attractive, professional and easy to read. It must quickly grab the reader's attention.

- ★ The look and quality of all materials should be standardized so they are easily identifiable. Think trademark, logo and/or slogan.
- ★ Include a call for action. How is the reader to respond? Asking the reader to contact you for more information is an example of a call for action.

Posters at the command, fliers, letters to new command families and the ombudsman newsletter are ways to share your message. You may want to create and carry business cards that include your contact information and a brief overview of the Ombudsman Program such as the Ombudsman Code of Ethics or reportables.

IN-PERSON STRATEGIES

You are likely to have many opportunities to meet command leadership, family members and personnel from community support organizations. These may include participating in pre-deployment briefs, presenting at FRG meetings and attending other events in your community. Prepare a brief statement about your role that you can deliver whenever you have an opportunity to increase awareness of the Ombudsman Program.

2.9 PREVENTING BURNOUT

Your role as an ombudsman is demanding. It is important that you take care of yourself in order to manage stress and prevent burnout. The following are tips to help you prevent burnout:

- ★ Start with the information and tools needed to do the job. Understand the expectations, scope of responsibilities, training opportunities, supervision (if any), job description, workload and benefits.
- ★ Create goals and measure your success. Goals such as updating the Careline each week, documenting phone calls, producing a monthly newsletter, improving public speaking skills and submitting monthly/quarterly worksheet data on time are all measurable and achievable.
- ★ Maintain personal growth through hobbies, classes, and paid and volunteer work.
- ★ Develop a variety of interests.
- ★ Surround yourself with uplifting colors, pictures and treasures.
- ★ Set limits on your involvement with extended family, colleagues, command families, other volunteer roles, etc.
- ★ Encourage and practice good communication skills.
- ★ Find ways to decompress, such as through meditation, exercise or a warm bath.
- ★ Maintain good physical health.
- ★ Build a support system with those who can help you find solutions.

THE STRESS CONTINUUM

The Naval Center for Combat and Operational Stress Control has developed a stress continuum that identifies physical and emotional signs of stress. This continuum model can be used to help you track your own stress level and take steps necessary to reduce stress. The model is discussed in detail in Chapter 8 of this manual.

MAKE THE PLEDGE

RESOURCES

Whatever prevention strategies you use, remember that help is available. Do not hesitate to contact any of the following for assistance:

- ★ FFSC
- ★ Chaplains
- ★ Command support team
- ★ Fellow ombudsmen

You can learn more about stress management and preventing burnout through:

- ★ Human Performance Resource Center, at <http://hprc-online.org/mind-body/stress-management/stress-management-strategies>.
- ★ Military OneSource, at www.militaryonesource.mil/health-and-wellness/managing-stress.
- ★ Naval Center for Combat and Operational Stress Control, at www.med.navy.mil/sites/nmcsc/nccosc/serviceMembersV2/stressManagement/Pages/default.aspx.



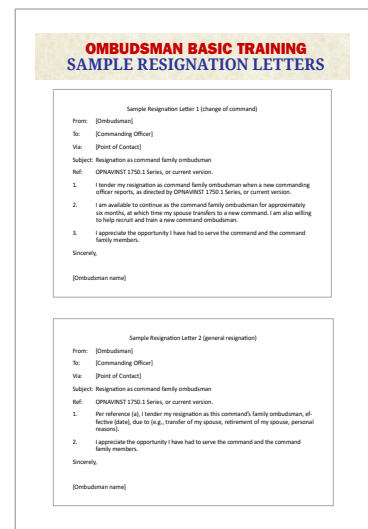
2.10 PROFESSIONAL TURNOVER

There are times when it may become necessary for you to resign from your position as an ombudsman. You should submit a resignation letter when:

- ★ There is a change in CO.
- ★ Your spouse transfers to another command, retires or otherwise separates from the command.
- ★ You can no longer perform your assigned duties.
- ★ You are unable to work effectively within your chain of command.

As a courtesy, when a new CO reports, you should submit a letter of resignation. The new CO may ask you to remain until a new ombudsman is trained and in place, or you may be reappointed.

Whatever your reason for resigning your position, you should always submit a letter of resignation. The first of the sample resignation letters addresses a resignation when a new CO comes aboard. The second letter covers more general circumstances. Copies of the sample letters can be found in Appendix C of this manual.



Commanding officers also may choose to remove an ombudsman by simply sending a letter thanking them for their service or removing them for cause.

Reasons for termination for cause may include:

- ★ Any violation of the Ombudsman Code of Ethics, including breach of confidentiality, failure to support the command's mission, failure to work within the chain of command and failure to maintain high standards of professionalism.
- ★ Theft of equipment or making false claims for reimbursement.
- ★ Sexual harassment.
- ★ Inability to work effectively as a member of the command support team.
- ★ Unavailability to command family members.
- ★ Failure to participate in required and available training, as directed.
- ★ Failure to report a mandated reportable issue.

OMBUDSMAN BASIC TRAINING GETTING STARTED CHECKLIST

- NO YES I have an appointment letter.
- NO YES I know the name, telephone number and email address of the command point of contact for the Ombudsman Program.
- NO YES I have completed a Volunteer Agreement Form (DD 2793).
- NO YES I have been registered by the command in the Ombudsman Registry.
- NO YES I know my commanding officer's priorities.
- NO YES I have discussed confidentiality requirements with my commanding officer.
- NO YES I have read the OPNAVINST 1750.1 series, *Navy Family Ombudsman Program*.
- NO YES I can abide by the Ombudsman Code of Ethics.
- NO YES I know what types of information I am required to report and to whom.
- NO YES I know how to complete an expense form (OF 1164) and when and where to submit it.
- NO YES I have a current command roster and I know how often and from whom I will receive updates.
- NO YES I have an ombudsman pin.
- NO YES I have an ombudsman name tag (provided by the command).
- NO YES I have ombudsman contact cards, either provided by the command or made by me.
- NO YES I have written an introductory letter to include in the ombudsman newsletter.
- NO YES I have the codes, know how to change the Careline message, and I have drafted my first message for recording.
- NO YES I know the telephone number of the ombudsman telephone line and I have recorded a professional message on it.
- NO YES I have access to a computer and the Internet.
- NO YES I have created, or been given, an appropriate ombudsman email address.
- NO YES I have a resource list that includes telephone numbers and basic services provided by local military and community agencies.
- NO YES I know when and where my local or region ombudsman assembly meets.
- NO YES I understand the importance of this position and I am committed to completing all of my training.

If you have a fair number of NOs on your checklist, talk with your commanding officer, visit your ombudsman coordinator and continue to do your homework and preparation before you execute your command ombudsman duties.



CHAPTER 3

OMBUDSMAN REGISTRY AND CODE OF ETHICS

INTRODUCTION

KEY TERMS

CAC: Common Access Card

FAR: Family Advocacy Representative

CACO: Casualty Assistance Calls Officer

PRD: Projected Rotation Date

CFS: Command Financial Specialist

RCC: Reserve Component Command

DAPA: Drug and Alcohol Program Adviser

SAPR VA: Sexual Assault Prevention and Response Victim Advocate

3.1 OMBUDSMAN REGISTRY

The Ombudsman Registry is a database created by Commander, Navy Installations Command (CNIC) for the coordination of information between CNIC and commands, ombudsmen and ombudsman coordinators. You can use the registry to locate ombudsmen at other commands and to review the ombudsman training schedule.

As command ombudsmen, you must maintain and report certain types of data. Generally, under the provisions of the Privacy Act of 1974, you should try to maintain as little personal data as possible about individuals.

ROUTINE DATA COLLECTION REQUIREMENTS

You are required to keep a daily log of telephone and email contacts. You are also required to submit an Ombudsman Monthly/Quarterly Worksheet by following the *Ombudsman Registry Instruction Guide for Ombudsmen*, which is located on the login page of the registry under “Instructions & Procedures” at <https://ombudsmanregistry.cnic.navy.mil>.

NOTE: Data collected may contain personally identifiable information (PII) and should be protected.

TYPES OF DATA COLLECTED AND ADMINISTRATIVE DUTIES

CONTACT LOG

To gather data for the worksheets, most ombudsmen document their calls on a contact log.

A contact log helps you:

- ★ See trends in the types of calls received, such as a number of requests for emergency financial assistance, child care resources or spouse employment.
- ★ Follow up with people who have contacted you for information or about a problem.

- ★ Note whether you repeatedly provide the same type of information to an individual.
- ★ Demonstrate workload.

Many ombudsmen do not ask for the name and telephone number of each individual who contacts them about a ship’s return date and location because there can be many of these calls near the end of a deployment. You may wish to combine these calls into a category called “deployment” or “command schedule” and try to refer these callers to the command’s Careline, if one is available.

| Name | Date | Email | Type of Call | Follow-up |
|------|------|-------|--------------|-----------|
| | | | | |
| | | | | |
| | | | | |

INDIVIDUAL CONTACT FORM

For in-depth calls that require research or multiple referrals, you may need to use a separate document for each contact. This keeps the information about a situation in one place rather than scattered among multiple notes. Below is a sample of an individual contact form:

OMBUDSMAN INDIVIDUAL CONTACT FORM

Date: _____

Caller’s name: _____

Telephone/email: _____

Situation

Referrals provided

Follow-up

OMBUDSMAN MONTHLY/QUARTERLY WORKSHEET AND REGISTRY

THE IMPORTANCE AND BENEFITS OF THE OMBUDSMAN MONTHLY/QUARTERLY WORKSHEET

You will need to submit an Ombudsman Monthly/Quarterly Worksheet, as required in the *Ombudsman Registry Instruction Guide for Ombudsmen*. This instruction provides guidance on completing and submitting worksheets and explains other features of the registry.

The Ombudsman Monthly/Quarterly Worksheet is an automated database within the Ombudsman Registry that tracks hours spent and types of contacts completed by ombudsmen. The data collected on the worksheets may provide the commanding officer (CO) with a snapshot of the command climate, both present and past. The worksheet can help the CO identify:

- ★ Issues and concerns of command families.
- ★ Trends for families during deployment and non-deployment periods.
- ★ Training that may be beneficial to the command and families.

The metrics collected from the worksheets help determine:

- ★ Benefits and cost-avoidance to the Navy for using the services of volunteer ombudsmen, as opposed to assigning this function to a service member or a paid civilian employee.
- ★ How program funding should be allocated.
- ★ Specific region and Navywide training requirements.

NOTE: Names or details about service members or family members are not collected on the worksheet. The worksheet only provides a count of contacts, categories and hours completed by each ombudsman.

How do you benefit from the worksheet data? You can attend Web-based or face-to-face training offered through the Fleet and Family Support Center (FFSC) to increase your knowledge of the issues you frequently encounter. You can also identify information to include in your command newsletter and resource binder based upon needs identified by families.

OMBUDSMAN REGISTRY ACCESS

Ombudsmen are not able to register themselves or access the Ombudsman Registry. Please contact one of the following personnel; they are the only individuals who may register ombudsmen to a command:

- ★ Commanders/command designees, or command point of contact (POC).
- ★ FFSC Ombudsman Coordinators.
- ★ Reserve Component Command (RCC) Warrior and Family Support Specialists.

★ Ombudsman Registry Administrators.

You will not have access to your account under the common access card (CAC)-enabled registry. You can, however, access the “Support” feature to request assistance or advice when needed.

The “Contact Your Ombudsman” feature will be available. This feature is intended to provide service members and their families, as well as ombudsman coordinators, the opportunity to contact their ombudsman for services, receive updated information and participate in discussions about FFSC programs. You can use this feature to contact other ombudsmen to conduct warm handoffs of families that are moving to a new location.

REGISTRY INSTRUCTIONS

The “Instructions & Procedures” feature can be used to download the *Ombudsman Registry Instruction Guide for Ombudsmen*, FAQs and the worksheet templates for both active-duty and Reserve ombudsmen. If you experience any problems or have questions, please contact the Ombudsman Registry Administrator by using the “Support” feature on the login page of the registry.

Ombudsman training schedules will also be accessible from the login page of the Ombudsman Registry.

WORKSHEET SUBMISSION REQUIREMENTS

Worksheets are due for submission as follows:

- ★ Active-duty ombudsmen are required to submit monthly worksheets.
- ★ Reserve ombudsmen are required to submit quarterly worksheets.



Deadlines for submission of worksheets are as follows:

- ★ Active-duty ombudsmen will submit their monthly worksheets no later than the 15th of each month following the end of the reporting month (i.e., June worksheets will be submitted no later than [NLT] July 15).
- ★ Reserve ombudsmen will submit their quarterly worksheets no later than the 15th of each month following the end of the reporting quarter (i.e., October–December worksheets will be submitted NLT Jan. 15).
- ★ Worksheets are archived by calendar year for active duty and fiscal year for Reserve commands; all worksheets must be entered NLT Jan. 31 of the following year. After Jan. 31, no further worksheets can be entered for the previous year (i.e., December 2015 active duty and October–December 2015 Reserve worksheets must be entered by Jan. 31, 2016).

Reserve submission requirements are listed as follows:

- ★ First Quarter FY (October–December) – must be submitted by Jan. 15
- ★ Second Quarter FY (January–March) – must be submitted by April 15
- ★ Third Quarter FY (April–June) – must be submitted by July 15
- ★ Fourth Quarter FY (July–September) – must be submitted by Oct. 15

Step-by-step instructions for completing and submitting the worksheet can be downloaded from the login page of the Ombudsman Registry, at <https://ombudsmanregistry.cnic.navy.mil>, in the lower left-hand corner under “Instructions & Procedures.” An Ombudsman Worksheet Quick Reference Guide also is available.

CNIC hosts and records webinars on how to complete and submit worksheets. Information about available training can be found on the Ombudsman Registry (<https://ombudsmanregistry.cnic.navy.mil>).

COMMAND ROSTER

The command roster is a list of all personnel at a command and contains protected information. It is the responsibility of the command to provide you with a command roster. Ombudsmen should not be expected to gather this information. The confidentiality of information in the roster must be maintained as described in the Privacy Act of 1974. There is no standard DoD or Navywide roster format. The information that may be included on a roster includes the service member’s:

- ★ Name.
- ★ Last four digits of their Social Security number or another identifier (in case there are multiple individuals with the same name, which can be common at a large command).
- ★ Rate or rank.
- ★ Date of birth.
- ★ Primary next of kin names, telephone numbers, addresses and email addresses (spouse and children, if married; parents or others the service member lists, if single).
- ★ Phone number where family members can be contacted if they have to be evacuated in an emergency or natural disaster.
- ★ Projected rotation date (PRD).

3.2 OMBUDSMAN CODE OF ETHICS OVERVIEW

INTRODUCTION

Ombudsmen are dedicated volunteers who successfully navigate the Navy lifestyle and help others do the same. This section of the manual introduces you to the Ombudsman Code of Ethics and will help you use the code as a guide for your behavior.

NOTE:

The Ombudsman Code of Ethics is the essential foundation upon which an ombudsman’s credibility is established and maintained.

OVERVIEW

To succeed as an ombudsman, you must adhere to the code. The Code of Ethics mandates that, as an ombudsman, you must:

- ★ Maintain confidentiality.
- ★ Support the command’s mission.
- ★ Work within the chain of command as directed.
- ★ Maintain the highest standards of professionalism.

CODE OF ETHICS CARDS–DEFINITIONS (CLASS ACTIVITY)

| |
|---|
| Confidentiality: _____ _____ _____ |
| Command mission: _____ _____ _____ |
| Chain of command: _____ _____ _____ |
| Professionalism: _____ _____ _____ |

3.3 CONFIDENTIALITY

Confidential information is sensitive information about a service member or family member. It is kept within the CO’s designated network and is for official use only.

You must adhere to the strictest code of confidentiality to protect the privacy of individuals and to maintain the credibility of the Navy Family Ombudsman Program. The CO determines which individuals at their command have a “need to know.” The executive officer (XO), command master chief (CMC) and chaplain are often designated “need to know.” Depending on the circumstances, the command Sexual Assault Prevention and Response victim advocate (SAPR VA), Family Advocacy representative (FAR), Drug and Alcohol Program adviser (DAPA), or command financial specialist (CFS) also may be determined to have the need to know about a situation.

Failure to maintain confidentiality can result in the command and families losing confidence in you as an ombudsman. It also can cause severe and irreparable harm to individuals.

Confidential information you may hear includes:

- ★ Marital problems.
- ★ Substance abuse issues.
- ★ Financial difficulties.
- ★ Parenting challenges.
- ★ Work performance issues.
- ★ Infidelity.
- ★ Violations of law.
- ★ Mental health disorders.
- ★ Child neglect or abuse.
- ★ Medical issues.
- ★ Domestic abuse.
- ★ Suicidal or homicidal behaviors.
- ★ Routine calls for general information.

Family members may contact you to ask for information and referrals, or they may just want to discuss their concerns with a caring person. You should not share these private concerns with anyone—including your spouse, other members of the command support team or assistance agencies—without first getting the approval of the CO or the caller themselves.

The following examples should help clarify the concept of confidentiality:

- ★ A newly married spouse calls and tells the recently appointed ombudsman she thinks she and her husband need marriage counseling because they are arguing all the time about the upcoming deployment. The ombudsman assures the caller that it is normal for Navy couples to argue before a major deployment. The ombudsman refers the caller to the FFSC and the base chaplain to see whether they can schedule counseling before the ship deploys. The ombudsman then asks another ombudsman if this was the best way to handle this type of call. This is not a breach of confidentiality because the ombudsman did not reveal any identifying information about the caller.
- ★ Mary Smith calls and tells the ombudsman that she thinks she and her husband need marriage counseling because they are arguing all the time about the upcoming deployment. The ombudsman assures Mary that it is normal for Navy couples to argue before a major deployment. The ombudsman refers Mary to the chaplain to arrange for marital counseling. Several days later, the ombudsman calls the chaplain to confirm that Mary called for an appointment. This is a breach of confidentiality because the ombudsman did not ask Mary for permission to share her name or other information about her situation with the chaplain.

Other ways to protect confidential information include:

- ★ Keeping the command roster in a secure location and protecting an electronic roster with a password.
- ★ Answering calls in a private area.
- ★ Discussing trends, rather than specific calls and emails you have received.
- ★ Maintaining call logs in a secure area.

NOTE: You should always ask yourself how you would want sensitive information to be managed if it were about you.

NON-CONFIDENTIAL INFORMATION (REPORTABLES)

Confidentiality does not mean that you withhold information from the CO or those in the chain of command who have a need to know. Families must understand that not all communication with you is confidential; some information must be disclosed to the proper authority. This is called “reportable” information.

All Department of Navy (DoN) personnel, including ombudsmen (with some exceptions), are mandated reporters. This includes command leadership, child and youth services staff, security personnel, social workers, educators and health care professionals.

REPORTABLES

The instruction that governs the Navy Family Ombudsman Program, the OPNAVINST 1750.1 series, requires ombudsmen to report the following. These are referred to as “reportables”:

- ★ All suspected or known child abuse/neglect.
- ★ Alleged domestic abuse.
- ★ Suspected or potential homicides, violence or life-endangering situations.
- ★ All suspected or potential suicidal risks.
- ★ All alleged sexual assaults.
- ★ Other issues identified by the CO as reportable.

REPORT DETAILS

When contacting FAP with cases of known or suspected child abuse and domestic/intimate partner abuse, ombudsmen should be prepared to detail:

- ★ What they observed or have been informed of, including the date and time.
- ★ The names of persons involved.
- ★ Addresses and phone numbers of persons involved.
- ★ Service member’s command.
- ★ Their contact information.

It is the responsibility of FAP to provide an assessment for child protective services to investigate allegations. Therefore, it is not necessary to know all of the details of the incident before a report is made. It is easier to make a report when the ombudsman has overheard or observed the behavior in question. It can cause hesitation and anxiety when an incident has not been observed firsthand but through information from another source. In that case, the ombudsman is still mandated to report what they have been told. In these cases, the ombudsman should make it clear that they did not personally observe the behavior. Another option is for the ombudsman to assist the eyewitness

in calling FAP to report the abuse. As a mandated reporter, the ombudsman still has the ultimate responsibility of making sure the command and FAP are advised of the known or suspected abuse. FAP will not be able to tell ombudsmen whether a report concerning an incident has already been made. For instances when the ombudsman has a question about report details or questions about whether an incident is “reportable,” they can call FAP and request guidance, without providing names.

Whenever an individual contacts you and discloses a reportable issue, you should inform the caller that a report must be made and try to connect them with appropriate resources at the FFSC or the proper reporting authority. It is the responsibility of the FAR or the sexual assault response coordinator (SARC) to provide an assessment and follow-up services.

In the event that neither the FAR nor the command can be reached, determine whether the situation warrants immediate attention. If so, contact your local emergency services.

When a sexual assault is reported to an ombudsman, the ombudsman will report the incident to the CO and SARC, per NAVADMIN 065/14, *Ombudsman Reporting Requirements for Sexual Assaults, released March 14, 2014*. For more information, see Section 7.7: Sexual Assault.

If you believe someone is at risk for suicide, call 911 immediately. If the risk does not seem imminent, help the individual by providing links to support services. The following are sources of help:

- ★ **FFSC clinical counselors:** FFSC counselors offer short-term counseling and crisis intervention. Contact your local FFSC for more information.
- ★ **Military OneSource:** Military OneSource offers assistance 24 hours a day, seven days a week over the phone, online or via email. Military OneSource can be contacted through their website (www.militaryonesource.mil) or by phone stateside at 1-800-342-9647.
- ★ **Navy Chaplain Care:** Chaplains are available to talk 24 hours a day, seven days a week and are just a click or phone call away through Navy311. Phone: 1-855-628-9311; email: Navy311@navy.mil; Text: navy311@navy.mil in the “to” line or go to www.navy311.navy.mil. Communications are confidential unless the service member decides otherwise.
- ★ **TRICARE Mental Health:** TRICARE covers up to two outpatient treatment sessions per week in any combination of individual, family or group sessions. More information on TRICARE-covered outpatient behavioral health counseling is available on the TRICARE Mental Health website (www.tricare.mil/mentalhealth).

Anything the CO identifies as reportable must be reported to him or her, or to the CO’s assigned designee. Ask your CO how they want to be notified about reportable situations—directly to him or her, or to the POC/designee. You may never know how a call was handled or resolved—it is your job to recognize, refer and report. Let the experts deal with the situation.

RESTRICTED AND UNRESTRICTED REPORTING

You should be aware of reporting options for victims of domestic abuse. As of August 2007, adult victims of domestic abuse incidents have two reporting options:

RESTRICTED REPORTING

A Restricted Report can only be received by a FAP clinician, victim advocate or health care provider, who can then offer a Restricted Report as an option. (If the report is made to anyone else, including an ombudsman, the report becomes Unrestricted.) A Restricted Report allows an adult victim to seek medical services and counseling and access other resources without involving the command or security in the incident. FAP and health care personnel will discuss the benefits and limitations of a Restricted Report with the victim so they can make an informed decision. The victim can use advocacy and counseling services to explore their options and can take their time deciding when or whether they want to involve others. A victim always has the option to change a Restricted Report to an Unrestricted Report.

UNRESTRICTED REPORTING

An Unrestricted Report may be made to security, an ombudsman or the service member's chain of command and may be followed by administrative action.

Ombudsmen are part of the command support team (CST); therefore, once an adult victim reports an incident of spousal/intimate partner abuse to an ombudsman, there is no longer the option for a Restricted Report. In many cases, the victim begins by discussing their dissatisfaction with the relationship or alludes to a "big fight" without going into specifics about the incident. The ombudsman is responsible for informing the alleged victim of their mandate to report abuse. When possible, the ombudsman should attempt to help the victim limit disclosure and encourage them to call FAP to report the incident. This will allow the victim to retain the option for a Restricted Report. If the victim proceeds to disclose, the ombudsman should inform the service member or family member that they are required to report the allegation of abuse.

Victims of domestic abuse who want to pursue an official command or criminal investigation of an incident should use current reporting channels (chain of command, FAP or law enforcement). Victim advocacy services and FAP clinical services will be offered to the victim and, at the victim's request, any forensic medical examination deemed appropriate will be performed.

Any time a spouse tells you about domestic abuse, you are required by the OPNAVINST 1750.1 series to report it, because you cannot offer the Restricted Reporting option. Keep family members informed of these options, so victims can make an informed decision before talking to you about abuse.

You should routinely remind family members about the types of information that cannot be kept confidential. The ombudsman newsletter is often a good place to include this information. Additional information and resources can be found on the CNIC website.

Sexual Assault: http://www.cnic.navy.mil/ffr/family_readiness/fleet_and_family_support_program/sexual_assault_prevention_and_response.html

Domestic Violence: http://www.cnic.navy.mil/ffr/family_readiness/fleet_and_family_support_program/family_advocacy/restricted_unrestricted_options.html

3.4 MISSION SUPPORT

The Ombudsman Code of Ethics mandates that ombudsmen support the Navy and the command's mission. You demonstrated your support for both missions when you volunteered to be a command ombudsman. But there may be times when you feel less equipped to support due to the demands the command places on your spouse, the lack of responsiveness to your needs or when personal issues arise in your family. If this happens, you should not reveal any negative feelings to the families you serve.

You demonstrate your support for the command by:

- ★ Maintaining a positive tone on the Careline, in email messages and on social media sites.
- ★ Focusing on positive events in the newsletter.
- ★ Making timely referrals. Respond to calls and messages in a timely manner and give the caller your full attention.
- ★ Explaining situations in a positive manner.
- ★ Controlling rumors.
- ★ Seeking the correct information.
- ★ Keeping disagreements with command leadership private.
- ★ Attending command functions.

3.5 CHAIN OF COMMAND

A chain of command is a reporting and leadership structure. Knowing the chain of command allows you to use the systems in place to assist Navy families. Whether you are acting in an official capacity or not, you must use the chain of command. When addressing an issue at the Navy Exchange, with TRICARE, about housing or within the command, there is never a situation that would require you to begin at the top of the chain of command.

It is also important for you to keep your chain of command informed. You can do this by:

- ★ Carbon copying (cc) the XO and the CMC on correspondence to the CO.

NOTE:

If you have questions about the chain of command, ask your command POC for help.

- ★ Back-briefing the XO and the CMC about any decisions made during meetings with the CO.
- ★ Referring grievances to the chain of command.

Grievances are complaints about Navy services and facilities. You should not deal with problems between the service member and the service member's chain of command; there are established procedures within the chain of command for that purpose.

There is no grievance procedure for ombudsmen against the command when you disagree with command policies. You can discuss your views with the CO, but if the grievance remains, then you may find it necessary to resign.

Individuals who contact you about a grievance must first attempt to resolve the concern within existing channels. Once this is done:

- ★ Get the facts from the caller. Times, dates, statistics, etc., are necessary.
- ★ Clarify what steps the person already has taken. Has the caller used existing channels to try to resolve the problem? If not, suggest to the person that the proper channels for resolution now be followed.
- ★ Present the issue to the CMC or command POC. They may choose to address the issue or advise you on how to proceed.

NOTE: Remember that you are not expected to be a subject matter expert. Your role is to direct Sailors and their family members to the appropriate person in the chain of command. The organization's representative will provide answers and assistance to the individual seeking guidance.

3.6 PROFESSIONALISM

The final element of the Ombudsman Code of Ethics is to maintain the highest standards of professionalism. A professional image is projected through:

- ★ Dress or appearance.
- ★ Courtesy.
- ★ Behavior.
- ★ Communication.
 - Email address.
 - Phone message.
 - Manner of speech.
- ★ Avoiding conflicts of interest.

APPEARANCE

Because you are an official volunteer and represent the command and the CO, your appearance should be neat and professional. Dressing appropriately helps to promote a positive image to the command and family members. The following are examples of suitable clothing items:

- ★ Jackets, suits, sport coats.
- ★ Dress pants, slacks, khakis.
- ★ Dress shirts, tailored sweaters.
- ★ Skirts.
- ★ Flats, dress heels, leather deck-type shoes, walking shoes or loafers.



It is a good idea to wear clothing that is comfortable and practical—but not distracting or offensive to others—while performing your duties. Your attire should not be a safety hazard; for example, wearing high heels or platform shoes while ascending or descending a ship’s ladders is inappropriate and dangerous. Your attire also needs to be suitable for the occasion and the environment. The dress code will vary depending on the region; for example, what is appropriate attire in Maine may not be suitable in Hawaii. Clothing that reveals too much cleavage, your midriff or your underwear is inappropriate ombudsman attire, as is clothing you might wear to the beach (bikinis, flip-flops) or to exercise (sweatpants, exercise pants, spandex).

Remember that younger spouses look to you to determine the appropriate dress at command social functions such as picnics and holiday parties. Remember, too, that the Navy is a conservative culture, so it is important to dress appropriately, set a high standard and be a role model for others.

COURTESY

Professional courtesy includes addressing all members of the command by their title (Captain Smith, Commander Jones, Master Chief Johnson). Use Mrs. or Mr. when referring to spouses. You may call spouses by their first names once they have given their permission. It is never permissible to refer to the CO by their first name. Always refer to the CO, XO, CMC or chief of the boat (COB) by their titles.

In addition, professional courtesy includes:

- ★ Responding promptly to phone calls and emails.
- ★ Ensuring the command support team is kept informed.
- ★ Privately handling disagreements.
- ★ Paying attention to detail.

- ★ Offering solutions to problems.
- ★ Respecting the opinions and beliefs of others.

BEHAVIOR

As an ombudsman, you have a highly visible volunteer position. This means other spouses observe you, whether you are acting in an official capacity as a command ombudsman or as a private person. Inappropriate behavior will affect the way you are perceived and can affect your credibility with the command and families. Even simple behaviors such as arriving at functions on time and chatting with others while standing on the pier or at the squadron will be noticed.

COMMUNICATION

You also demonstrate professional courtesy in your communication. Whether you are connecting with others via email, telephone or in person, your style of communication reflects on both you and the command. Consider the following:



EMAIL

What email address will you use? Email accounts that reflect hobbies, personal interests or nicknames are not appropriate for your role as ombudsman. Create an email address that indicates your title and the command.

PHONE/VOICE MAIL MESSAGE

Record a message that clearly states your title, additional contact information and any other important details. Avoid adding music or humorous content to your phone messages.

MANNER OF SPEECH

Whether speaking with the command leadership, Sailors or family members, you should always speak in a manner that reflects positively on the command.

CONFLICT OF INTEREST

A conflict of interest can occur between your personal interests and your public duty. Conflicts can be real or perceived, and it is not necessary for money to be involved. Most commands do not have ombudsmen sign a conflict-of-interest agreement. Ombudsmen may not use their position to solicit individuals with whom they come into contact.

Examples of soliciting that are not allowed include:

- ★ Selling cosmetics, baskets, scrapbooking supplies, insurance, real estate, etc., to command personnel and their family members.
- ★ Taking orders for products.

- ★ Distributing any business cards, with the exception of your ombudsman business card.
- ★ Providing information about a business during a presentation.
- ★ Hanging posters about a personal business at the command.
- ★ Advertising a personal business in a command-sponsored newsletter.

According to the U.S. Office of Government Ethics (www2.oge.gov), military and civilian personnel may not use their position within a government organization for personal gain.

Avoiding a conflict of interest, or even the appearance of a conflict of interest, supports the Ombudsman Code of Ethics and maintains the highest standards of professionalism.

3.7 YOU BE THE JUDGE ETHICS SCENARIOS

SCENARIO 1

Tracy, the command ombudsman for USS Bestshipever, received a call from Sarah, a close friend who happens to be a spouse at Tracy's command. Sarah said her husband, recently back from a deployment, was not getting along with their teenage son, John. She said her husband had been physically rough with John on a number of occasions. He had gotten so angry a few nights ago that he punched John in the stomach, knocking him to the floor.

Tracy reported what Sarah told her to her CO and to the Family Advocacy Program representative. Sarah was angry, because she believed that Tracy had betrayed their friendship. Tracy explained that although she was Sarah's friend, she was an ombudsman at all times and obligated to report any indication of child abuse.

Has confidentiality been violated here?

How could the situation have been handled differently?

SCENARIO 2

Tonya is a command ombudsman. She receives a call from Sharon, a spouse at the command who said she had been in a minor car crash. Sharon expressed concern that she was going to be ripped off by the auto body shop that she was referred to for repairs. She was calling to find out whether Tonya could recommend a reputable auto body shop in the area. Because the incident was minor and she was not injured, Sharon did not want her husband, currently deployed, to know. She shared with Tonya that she knew he would worry and that he had enough stress already.

At a spouse support group, Tonya mentioned the crash and encouraged the other spouses to give Sharon a call or stop by to see if she needed anything. Word soon got back to Sharon's husband, who was furious that she hadn't told him about the incident.

Has confidentiality been violated here?

How could the situation have been handled differently?

SCENARIO 3

Shawn is a new ombudsman for a submarine command who recently met with his CO and COB. During this initial meeting, the CO emphasized his concern regarding the financial affairs of his Sailors, especially before deployment, because communication with families was often very limited. He shared that his top priorities were ensuring that Sailors were focused on the mission ahead and families were taken care of back at home. He stressed that he and the COB wanted to be made aware of any signs of financial stress so that small problems did not escalate into large ones.

Several weeks into a deployment, an angry spouse approached Shawn seeking to vent some of her frustration. She reported that her husband had been running up excessive credit card charges whenever the boat was in port, while she was struggling at home to make ends meet and pay off their "mounds of debt." Shawn considered this more of

a marital problem than a financial one, so he did not report the situation to the CO. He referred the spouse to the FFSC to get some help with budgeting and debt reduction to protect her from any embarrassment with the command over what he considered their personal business.

Has confidentiality been violated here?

How could the situation have been handled differently?

SCENARIO 4

Constance, a Reserve spouse whose husband recently was activated and deployed, feels abandoned and depressed. Not sure where to turn, she emails her Reserve ombudsman, Brandi, saying she's not sure she can get through another day.

Reading the email that evening, Brandi responds immediately. She calls Constance, who lives in a remote location far from any military installation. The phone rings, but there is no answer. Brandi calls 911 in the area where Constance lives and reports her concerns, asking for an officer to check on her as soon as possible.

Brandi then calls the supporting command's ombudsman, Suzie, because she is now "officially" Constance's ombudsman. Suzie calls her command POC and, working together, they use the resources at their disposal to help Constance, who has been found unconscious and is being airlifted to a nearby hospital.

Has confidentiality been violated here?

How could the situation have been handled differently?

SCENARIO 5

Jackie, a command ombudsman, tells her friend and fellow ombudsman Hillary, in confidence, that her cancer is no longer in remission. Jackie's husband is deployed, and she doesn't want her family or friends to know. She just wants to tell someone about it.

Hillary is distressed by the information and wonders whether she can do anything to help. She knows Jackie attends the base chapel, so she calls Jackie's chaplain and asks for advice. Hillary is surprised to hear that the chaplain is unaware of Jackie's cancer but relieved to get her concerns off her chest with someone so trustworthy.

Has confidentiality been violated here?

How could the situation have been handled differently?

SUMMARY

As an ombudsman, you are governed by a strict code of ethics. You will have access to sensitive and confidential information about command family members. Having this information requires that you adhere to a strict code of confidentiality.

Your position is also highly visible. You serve as a role model to other family members. It is essential that you act in a professional manner at all times. Remember that your behavior can affect the credibility of both the command and the Ombudsman Program.

NOTES:

OMBUDSMAN BASIC TRAINING

THE WORLD OF WORKSHEETS

SAMPLE DATA

- June 1-3 Attended OBT at the FFSC.
- June 5 Met with the CO and command master chief (CMC) separately to discuss command needs.
- June 7 Created and posted a short personal introduction with your contact information for the command's social media page with 140 followers.
- June 10 Preparing brief about the Ombudsman Program to be delivered at the command indoc.
- June 14 Received a call from a spouse of a Reservist temporarily assigned to the command who lives in another state. He requested information about creating a will for himself and his spouse. After doing a little research, you called him back with the contact information of the Region Legal Service Office (RSLO) near him.
- June 15-6 Fielded four phone calls about child care for a command event.
- June 22 Phone call from a spouse asking about child care for her special-needs child. Referred her to the Child Development Center (CDC) and Exceptional Family Member Program (EFMP).
- June 24 Met with a new command family in the commissary who were looking for housing in the area. Because you were already on base, you walked them over to the housing office and introduced them to the housing staff.
- June 29 Completed the monthly newsletter and uploaded it to the command's social media page.
- June 30 Attended an Ombudsman Hot Topic webinar on relocation and completed your monthly worksheet for submission per the *Ombudsman Registry Instruction Guide for Ombudsmen*.
-

Worksheet Detail

| Details | | |
|---|--------------|------------|
| Month | | |
| Year | | |
| Command UIC | | |
| | | |
| | Total Events | Time Spent |
| June, 20xx | | |
| Professional Development | | |
| Meetings Attended | | |
| Command Leadership/Command Support Team, Ombudsman Assembly, etc. | | |
| | | |
| Presentations/Briefs | | |
| Command indoc briefs, deployment, FRG meeting updates, CO/XO/CMC briefs, etc. | | |
| | | |
| Trainings Attended | | |
| OBT / eOBT, advanced trainings, Certified Ombudsman Training (COT), webinars, on-demand trainings, etc. | | |
| | | |
| Administrative Duties | | |
| Command Newsletter | | |
| Research, design, writing, distribution, etc. | | |
| | | |
| Command Social Media Maintenance | | |
| Updates, maintenance, research, etc. | | |
| | | |
| Other Duties | | |
| Monthly/quarterly worksheet completion, updating Careline messages and/or rosters, contact logs and forms, reimbursement claims, managing resources, photocopies, printing, all travel time, etc. | | |
| | | |
| PROFESSIONAL DEVELOPMENT AND ADMINISTRATIVE TOTALS: | | |

| | |
|------------------------|------------------------|
| # of Incoming Contacts | # of Outgoing Contacts |
|------------------------|------------------------|

Information & Referral and Social Media Contacts

Providing communication and referrals via email, phone, in-person, mail, text message, outreach, Facebook, Twitter, command blog, command website, etc.

Categories

| | | |
|---|--|--|
| Childcare | | |
| Deployment/FRG | | |
| Education | | |
| Emergency/Crisis (American Red Cross, NMCRS, Accidents) | | |
| Employment (Spouse/Family Member) | | |
| Exceptional Family Member Program (EFMP)/Special Needs | | |
| Financial/Pay/Budget | | |
| Individual Augmentee | | |
| Legal (Wills, Divorce, Adoption, Power of Attorney) | | |
| Medical (Tricare, Dental, Child Birth, Psychological) | | |
| Military Records (PSD, ID Cards, DEERS, NFAAS) | | |
| Morale, Welfare & Recreation | | |
| Newsletters (Command, Ombudsman, FFSP, Base, etc.) | | |
| Relocation/Housing/Sponsor Program | | |
| Sexual Assault Prevention & Response/Family Advocacy/Reportables/Counseling | | |
| Social Media | | |
| Other Information & Referral Calls/Contacts | | |

Hours

Estimated Total Time Spent

The Estimated Total Time Spent is the total of:

of Incoming Contacts and # of Outgoing Contacts

| | | |
|-------------------|-------------------|-------|
| Incoming Contacts | Outgoing Contacts | Hours |
|-------------------|-------------------|-------|

INFORMATION & REFERRAL AND SOCIAL MEDIA CONTACT TOTALS

Hours

Total Hours Spent



CHAPTER 4

COMMAND RELATIONSHIPS

INTRODUCTION

Ombudsmen work as part of a command team to support Sailors and their families. This chapter explains the roles of the command team members and how you can work with them to increase the resiliency of command families. Topics to be discussed include:

- ★ Chain of command
- ★ Command support team (CST)
- ★ Family Readiness Group

KEY TERMS

CST: Command Support Team

CWO: Chief Warrant Officer

FRG: Family Readiness Group

OPTEMPO: Operations Tempo

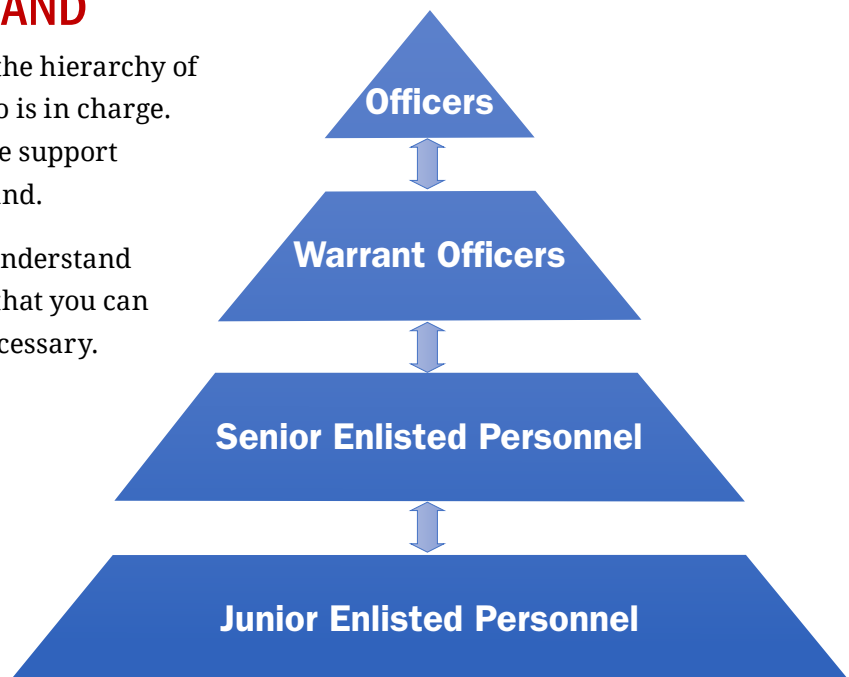
POD: Plan of the Day

POW: Plan of the Week

4.1 CHAIN OF COMMAND

The chain of command is the hierarchy of authority that dictates who is in charge. It can also be viewed as the support structure within a command.

It is important for you to understand the chain of command so that you can educate families, when necessary.



4.2 RATE AND RANK RECOGNITION

In addition to understanding the chain of command, it is helpful for you to be familiar with military ranks, rates and ratings. Officers are identified by their “rank” (e.g., ensign, commander, admiral), while enlisted personnel use “rate” to identify seniority (e.g., seaman, petty officer second class, chief petty officer).

NOTE: Questions often arise about the use of the term “rate” for enlisted personnel. For more information about rate and rank, go to www.navy.mil/navydata/ranks/rankrate.html.

There are three general categories of rank and rate:

- ★ Commissioned officers (rank)
- ★ Chief warrant officers (rank)
- ★ Enlisted personnel (rate)

Officers can be identified by their pay grade or their rank. Pay grade is indicated by the letter “O” and a number. Rank is indicated by a title, such as lieutenant or captain.

| | | |
|------|---------------------------|------|
| O-1 | Ensign | ENS |
| O-2 | Lieutenant Junior Grade | LTJG |
| O-3 | Lieutenant | LT |
| O-4 | Lieutenant Commander | LCDR |
| O-5 | Commander | CDR |
| O-6 | Captain | CAPT |
| O-7 | Rear Admiral (lower half) | RDML |
| O-8 | Rear Admiral (upper half) | RADM |
| O-9 | Vice Admiral | VADM |
| O-10 | Admiral | ADM |

| | | |
|------|-----------------------|------|
| W-2 | Chief Warrant Officer | CWO2 |
| W-3 | Chief Warrant Officer | CWO3 |
| W-4 | Chief Warrant Officer | CWO4 |
| W-5* | Chief Warrant Officer | CWO5 |

* The grade of warrant officer (W-1) is no longer in use. W-5 was established in the Navy in 2005.

Warrant officers are ranked above the senior-most enlisted rates but below the commissioned officer grade of O-1.

NOTE: Chief warrant officer (CWO) and limited duty officer (LDO) are two separate programs that provide the Navy with officer technical managers and technical specialists who exercise leadership in key positions throughout the service. They are employed in situations where it is desirable to have an officer with strong, specific technical knowledge and seasoned leadership.

Service members’ rank or rate is clearly marked on their sleeves, their shoulders or their collars. You should use appropriate titles while performing your role as ombudsman. Even if the commanding officer (CO), executive officer (XO) or command master chief (CMC) asks you to call them by their first name, use their titles out of respect. This also sets an example for family members who may be modeling their behavior on yours.

MILITARY RANKS AND INSIGNIA CHART

Rank insignia charts for all branches of the military can be found at www.defense.gov/About-DoD/Insignias.

NAVY ENLISTED

| E-1 | E-2 | E-3 | E-4 | E-5 | E-6 | E-7 | E-8 | E-9 | | | |
|---------------------|------------------------|-------------|---|---|---|---------------------------|-----------------------------------|-----------------------------------|--|--|--|
| | | | | | | | | | | | |
| Seaman Recruit (SR) | Seaman Apprentice (SA) | Seaman (SN) | Petty Officer 3 rd Class (PO3) | Petty Officer 2 nd Class (PO2) | Petty Officer 1 st Class (PO1) | Chief Petty Officer (CPO) | Senior Chief Petty Officer (SCPO) | Master Chief Petty Officer (MCPO) | Force Command Master Chief Petty Officer (FORCM) | Fleet Command Master Chief Petty Officer (FLTCM) | Master Chief Petty Officer of the Navy (MCPON) |

NAVY OFFICER

| 0-1 | 0-2 | 0-3 | 0-4 | 0-5 | 0-6 | 0-7 | 0-8 | 0-9 | 0-10 | Special |
|--------------|--------------------------------|-----------------|-----------------------------|-----------------|----------------|--------------------------------|--------------------------------|---------------------|---------------|----------------------|
| | | | | | | | | | | |
| Ensign (ENS) | Lieutenant Junior Grade (LTJG) | Lieutenant (LT) | Lieutenant Commander (LCDR) | Commander (CDR) | Captain (CAPT) | Rear Admiral Lower Half (RDML) | Rear Admiral Upper Half (RADM) | Vice Admiral (VADM) | Admiral (ADM) | Fleet Admiral (FADM) |

4.3 COMMAND SUPPORT TEAM

The CO designates the command support team (CST). Typically, the CST includes the CO, XO, CMC or chief of the boat (COB), chaplain, their spouses and command ombudsman. The CST supports and maintains the well-being and morale of the command and its families.

COMMANDING OFFICER

The CO is responsible for the overall effectiveness of the command's Ombudsman Program and every Navy program implemented at the command level. The CO is responsible for everything that happens at the command, including:

- ★ Personnel and equipment.
- ★ Training.
- ★ Safety.
- ★ Mission readiness.

OMBUDSMAN POINT OF CONTACT

The CO generally appoints the XO or CMC to serve as your point of contact (POC). You should go to the POC for routine needs, such as:

- ★ Obtaining a command roster.
- ★ Funding and distribution of the ombudsman newsletter.
- ★ Including information about the Ombudsman Program in the plan of the day (POD) and plan of the week (POW).
- ★ Being a speaker for command indoctrination, mobilization or pre-deployment briefs.
- ★ Reviewing and approving the ombudsman newsletter, website and any social media sites.
- ★ Including information about the Ombudsman Program in the command's welcome-aboard information.

The CO should provide you with clear instructions on notifying the command about urgent or crisis situations, such as sexual assault, domestic abuse or suicide. Should you contact your POC, who then notifies the CO; should you go directly to the CO; or should you notify both? Make sure you understand your CO's preferences.

COMMAND CHAPLAIN

At larger commands where there may be a command chaplain, the chaplain can support the Ombudsman Program by serving as:

- ★ A source of information about referrals within the Navy system.
- ★ Someone who can offer privileged communications and can speak to individuals without fear of information having to be reported up the chain of command or to legal authorities.
- ★ An advocate for the Navy Family Ombudsman Program.
- ★ A source of support for you to call upon when you are feeling stressed or overwhelmed.
- ★ Someone who can provide information on retreats, seminars and events designed to foster individual and family resiliency
- ★ A source of personal and marital counseling, if trained to do so.

COMMAND SUPPORT TEAM SPOUSES

The role of the CST with the Ombudsman Program is well-defined. The CO should also clearly define the roles of the CST spouses. The spouses of the CO, XO and CMC/COB can be invaluable assets to the Ombudsman Program. Their level of involvement may differ by command and by personal interest.

The OPNAVINST 1750.1 series allows the CO to designate CO, XO, CMC/COB spouses or other members of the chain of command to serve as advocates for the command Ombudsman Program.

It is also recommended that leadership spouses attend Ombudsman Basic Training, preferably with their command ombudsman. This training provides important guidelines and direction in assisting the ombudsmen, as well as reinforcing the requirements of confidentiality.

If an ombudsman leaves suddenly, a trained member of the command support team can fill in until another ombudsman is selected and trained.

In support of the Ombudsman Program, CST spouses may:

- ★ Serve as a sounding board for the ombudsman.
- ★ Attend Ombudsman Basic Training.
- ★ Attend local ombudsman assembly meetings.
- ★ Meet regularly with the ombudsman to maintain good communication, especially during deployments.
- ★ Act as an advocate for the ombudsman.
- ★ Edit the ombudsman newsletter.
- ★ Attend command activities, such as retirements, promotion ceremonies and social events, etc.
- ★ Ensure family issues and concerns are a priority.
- ★ Share information about new programs, services and resources that benefit military families.
- ★ Represent their spouse's views, if known.

Many CST spouses divide responsibilities to ease the burden for everyone. The CO's spouse may coordinate wardroom spouse functions, the XO's spouse may meet with the ombudsman and the CMC's spouse may serve as the administrator for command social media sites. The key to positive CST relationships is to establish clearly defined roles, maintain good communication and to reiterate these guidelines when a new member joins the team.

When a CST spouse is not available, the CO may choose another spouse of a senior command member to fill the role of that spouse. The CO is encouraged to appoint all volunteer members of the CST in writing to assist them in performing their roles when representing the command.

For more helpful information about the volunteer roles of CO, XO and CMC/COB spouses, Naval Services FamilyLine publishes guides, including:

- ★ *Guidelines for the Spouses of Commanding Officer and Executive Officers.*
- ★ *Guidelines for the Spouses of Command Master Chiefs and Chiefs of the Boat.*

4.4 FAMILY READINESS GROUPS (FRGs)

A Family Readiness Group (FRG) is a private organization, closely affiliated with the command. Members include family members, Sailors and civilians associated with the command and its personnel. The term Family Readiness Group has been adopted because of the change in the operations tempo (OPTEMPO). The days of a planned deployment, with a long period at home afterward, are history. Families and Sailors need to be ready at all times. They can no longer rely on pre-deployment briefs to remind them to get their identification cards renewed, make sure that their legal work is current and that the car is registered.

FRGs help plan, coordinate and conduct informational, caretaking, morale-building and social activities to enhance command mission readiness and increase the resiliency and well-being of Sailors and their families. FRGs may offer programs or services that complement appropriated or non-appropriated fund activities on an installation, but they cannot compete with these programs.

Activities sponsored by an FRG can be informational, supportive or social. FRGs help COs provide family members with the tools to empower them to meet the challenges of the military lifestyle by creating a supportive Navy family.

FRG goals may include:

- ★ Providing family support during deployments, mentoring new family members and helping during crises.
- ★ Coordinating deployment farewells and homecomings.
- ★ Assisting with the command sponsor program.
- ★ Promoting family networking, communications and activities that enhance family readiness.
- ★ Coordinating social events and activities. These activities may include:
 - Departure and homecoming preparation.
 - Informational and educational briefs.
 - Holiday and children's celebrations.
 - Communication activities, such as websites, videos and other communications between family members that strengthen the relationship between the command, personnel and family members.
- ★ Welcoming new families.
- ★ Facilitating family member attendance at orientation sessions.

Spouses new to the command, or spouses who want to volunteer, can be referred to the FRG as a way to get involved with the command and to learn more about the Navy lifestyle.

As an ombudsman, you may assist with the formation of an FRG, but you should not be part of the official leadership (you may not hold a position as president, vice president, treasurer or secretary). As a spouse, you should be an active participant in the FRG.

You can support the FRG by:

- ★ Providing assistance in starting an FRG at the CO's request.
- ★ Sharing information, resources and referrals (e.g., self-defense demonstration, auto care).
- ★ Communicating command information.
- ★ Maintaining confidentiality.
- ★ Providing encouragement to and inspiring camaraderie among command families.

For more information on FRGs, please see OPNAVINST 1754.5B, *Family Readiness Groups*, or contact your local Fleet and Family Support Center (FFSC).

4.5 COMMAND FAMILIES

You can establish your relationship with command families by:

- ★ Writing an introductory letter.
- ★ Posting a welcome message on command social media sites.
- ★ Composing an article about yourself for the command or ombudsman newsletter.
- ★ Providing a brief introduction on the Careline.
- ★ Introducing yourself at FRG meetings and command-sponsored events.
- ★ Talking with Sailors and family members at the command.
- ★ Being professional when called.
- ★ Being a trustworthy ally.

4.6 COMMAND PRIORITIES

All members of the CST must have a clear understanding of the CO's priorities and expectations for the Ombudsman Program. During your first or second meeting with the CO, you should get answers to the following questions:

1. What are the command ombudsman's primary duties? Is there a written job description?
2. Who is the primary POC for the ombudsman?
3. In addition to situations that require mandatory reporting, are there other situations that should be reported? How does the CO want reporting to take place?
4. What are the procedures to ensure accurate command roster updates?

5. What roles do the CO's spouse, the XO's spouse, and the CMC/COB's spouse have in the Ombudsman Program?
6. What is the command policy for communication with significant others of service members, such as boyfriends or girlfriends, fiancés/fiancées and parents of service members?
7. How will communication take place during deployment and/or mobilization?
8. What is the ombudsman's role in the command's disaster preparedness plan?
9. Under what circumstances is the phone or email tree activated?
10. How often does a newsletter go out? Is it a command newsletter or an ombudsman newsletter? Who reviews it for accuracy and compliance with Navy standards?
11. What are the expectations and procedures for the reimbursement of expenses?



4.7 ESTABLISHING CREDIBILITY

There are a number of ways that you can establish your credibility at a command. Some examples include:

- ★ Being friendly.
- ★ Maintaining confidentiality.
- ★ Fulfilling promises and commitments.
- ★ Being approachable.
- ★ Keeping the command informed.
- ★ Talking with others.
- ★ Displaying confidence.
- ★ Clarifying expectations.
- ★ Being dependable.
- ★ Cooperating with others.
- ★ Willingness to see another's point of view.
- ★ Sharing credit for successes.
- ★ Accepting blame if it is deserved.
- ★ Continuing to improve skills.

Everyone benefits when a CST works together effectively. By having clearly defined roles and expectations, conflict can be minimized. Command family members are best served when they are supported by a strong leadership team.

SUMMARY

As the liaison between command leadership and families, you must maintain a positive working relationship with both groups. Understanding the chain of command and the role of the command support team members helps to foster this relationship. By supporting the FRG and establishing good communication with command families, you enhance mission readiness and the resiliency of family members.



CHAPTER 5

COMMUNICATION SKILLS

INTRODUCTION

Communication is the exchange of thoughts, messages or information by speech, writing or other behavior. Ombudsmen primarily communicate in three ways:

- ★ By telephone.
- ★ In person.
- ★ Through writing.

This chapter provides suggestions for communicating with family members using each method. It also includes information about:

- ★ Protecting confidential information.
- ★ Barriers to communication.
- ★ Active listening skills.
- ★ Public speaking.
- ★ Carelines.
- ★ Social media.
- ★ Email and phone trees.

KEY TERMS

CNIC: Commander, Navy Installations Command

FRG: Family Readiness Group

MWR: Morale, Welfare and Recreation

NMCRS: Navy-Marine Corps Relief Society

OPNAVINST: Office of the Chief of Naval Operations Instruction

OPSEC: Operations Security

PAO: Public Affairs Officer

POC: Point of Contact

5.1 OPERATIONS SECURITY

Operations Security (OPSEC) is based on the idea that the accumulation of sensitive or unclassified pieces of information could compromise security by revealing classified information. OPSEC denies adversaries the pieces of information that, although unclassified, can be valuable when pieced together. As a family member serving the military community, you are a vital player in our success. You can ensure your loved one's safety by protecting the information you know and keeping it out of potential adversaries' hands.

OPSEC generally covers information that should never be shared with anyone who is not on a need-to-know basis and includes such information as:

- ★ **Ship or troop movements:** timelines of when Sailors or ships are deploying overseas or redeploying back home, including return and reunion (R&R) leave time or information pertaining to leaving for a mission or changing locations (in addition to deployment).
- ★ **Training:** information about when, where, why and how service members are trained.
- ★ **Numbers:** quantities of people, equipment or weapons.

Another aspect of security you should consider is Personal Security, or PERSEC. PERSEC generally includes information such as:

- ★ **Service member information:** affiliation with the military, rank/rate or position, etc.
- ★ **Family information:** names of spouse/children/family members, home address, email address, etc.
- ★ **Travel patterns:** daily habits, commuting patterns, travel, etc.

DO AND DON'T

Even information that is unclassified may be critical information. Critical information deals with facts about military intentions, capabilities, operations or activities. Applying OPSEC counters the efforts of an organizations' adversaries. Effective OPSEC minimizes the risk that critical information might be inadvertently given away. Examples of critical information:

- ★ Detailed information about the mission of assigned units.
- ★ Details concerning the locations and time of unit/ship deployments.
- ★ Personnel transactions that occur in large numbers (e.g., pay information, power of attorney, wills and detailed deployment information).
- ★ References regarding complaints/trends involving unit morale or personnel problems.
- ★ Details that include security procedures.

DO

Be alert: Foreign agents use a variety of approaches to befriend people and obtain sensitive information.

Be careful: There are times your spouse cannot talk about the specifics of his or her job. It is important to conceal and protect information related to flight schedules, ship movements, temporary duty locations and installation activities.

Protect critical information: Even though you may not be dealing information that is secret, you will be dealing with "critical information." Critical information deals with specific facts about military intentions, capabilities, operations or activities.

Discuss details of a deployment or mission in public.

This includes while using your cellphone in a public place.

Try to use a "code" to discuss dates or locations.

Display symbols at home that indicate a loved one is deployed. Yellow ribbons and other patriotic displays may put your family at risk.

DON'T

OPSEC AND THE INTERNET

It is especially important to avoid posting sensitive information on the Internet. Web logs (“blogs”) are a form of online journal used by some Navy personnel and their family members to document deployments. Command ombudsman or Family Readiness Group (FRG) newsletters are often published on the Internet and, when coupled with information on public Navy-related websites, could be used as a sources of sensitive operational information.

These Internet sources make it possible for an adversary to compile sensitive information about unit morale, location, organization, personnel and family members. Blogs, websites, discussion boards and electronic newsletters are permitted as long as they do not violate OPSEC.

Follow these precautions when using the Internet:

- ★ **Know who you are talking to.** When using chat features in games or in online chat rooms, be careful what you say. Unless you know the person in real life, you can never be sure who you are talking to. Children and teens should also be taught these cautionary measures.
- ★ **Assume you are being monitored.** When using public wireless networks with your laptop, tablet or smartphone, always assume your connection is being monitored. Equipment to illegally monitor devices can be readily obtained on the open market.

OPSEC AND EMAIL

The following are some email-specific ways to practice OPSEC:

- ★ Never try to talk around sensitive information. For example, do not say, “My Sailor will be home three days before my birthday.” Experienced intelligence analysts will find it easy to collect the missing piece of the puzzle with this kind of “code.”
- ★ Avoid discussing ship movements, port calls, temporary additional duty (TAD) locations and installation activities.
- ★ Be aware that email and text messages sent over personal email systems can be intercepted.
- ★ Never attach sensitive documents to email.

Note:

For additional information on OPSEC and Internet safety, go to www.navy.mil/ah_online/OPSEC.

OPSEC AND SOCIAL MEDIA

In today’s high-tech world, social media sites such as Facebook, Instagram and Twitter are convenient ways to connect with friends and family. Be careful about the information you share on social media sites:

- ★ Keep personal information to yourself. Do not post your full name, Social Security number, address, phone number or financial information.
- ★ Limit who can view your profile or postings. Update privacy settings regularly because rules change frequently.

- ★ Consider not posting your photos online. Use photos of scenery or other less-identifiable images instead.
- ★ Use caution when updating your status. Do not announce when/where you will be traveling or discuss deployment/homecoming dates.
- ★ Do not use countdown timers.

Note:

For additional information on OPSEC and Internet safety, you can view “Killing with Keyboards” at www.opsecprofessionals.org/training.html.

EDUCATING COMMAND FAMILIES ABOUT OPSEC

Command families also need to be mindful of OPSEC. When practiced regularly, OPSEC becomes a mindset—a proactive way of thinking and acting that helps prevent military families from becoming vulnerable to today’s dangers. Periodically educate your families about OPSEC and remind them to be aware of what they post online. Some techniques you may want to use:

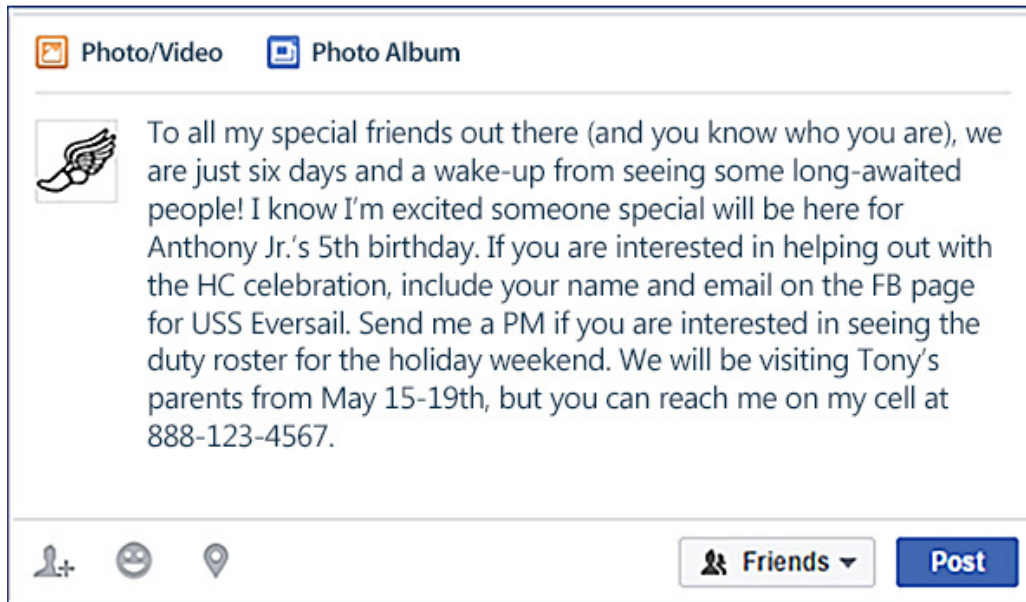
Include notes and reminders about OPSEC, as well as real-world examples, in monthly newsletters.

Proactively provide information about Family Readiness Group (FRG) meetings and other appropriate venues to discuss homecoming and port information, so family members do not feel like they have to violate OPSEC—they know where to get information.

Discreetly contact those who violate OPSEC directly to have them remove the post, creating a teachable moment by discussing why the post is a violation of OPSEC so the mistake is not repeated.

Remind families that OPSEC is for children, too. Teach children and teens to be careful, especially on websites, Internet chat rooms or popular online games with chat functions. Remind children that unless they know someone in real life, they should not be talking to them online.

LOOSE LIPS STILL SINK SHIPS



5.2 COMMUNICATION BASICS

Communication is one of the primary functions of ombudsmen. Being able to communicate effectively with command leadership, families and representatives of military and community programs will help you to succeed in your role.

THE COMMUNICATION PROCESS

Communication is a two-way process that includes:

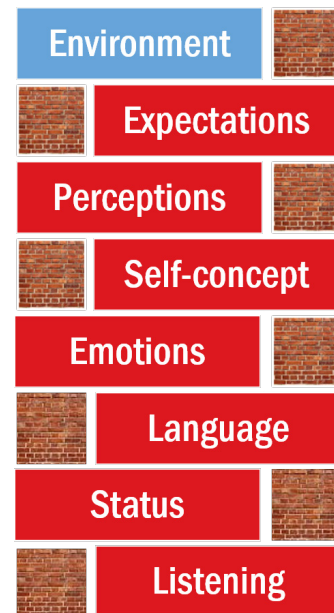
- ★ A sender—the person who initiates communication.
- ★ A message—the information being transmitted.
- ★ A receiver—the person who is trying to understand the message.

Communicating, like any other skill, is mastered through training and practice.

BARRIERS TO COMMUNICATION

Several factors can impede good communication:

- ★ Environmental factors—outside noise.
- ★ Expectations or perceptions—people often hear what they expect or want to hear.
- ★ Self-concept or lack of confidence—people may hear suggestions as orders or put-downs.
- ★ Emotions—sadness, fear, anger and other strong emotions can affect our responses.
- ★ Different languages.
- ★ Status—may have difficulty communicating with people they perceive as having higher or lower status.
- ★ Inadequate listening skills—practice active listening techniques to improve communication.



ACTIVE LISTENING

Active listening is the act of hearing and attempting to understand the meaning of words spoken by another person. It is a way of listening and responding to another person that improves mutual understanding. Often when people talk to each other, they do not listen attentively. They are often distracted, half listening, half thinking about something else. Listening to a person’s words and their meaning requires your full attention.

Active listening:

- ★ Helps the listener to focus and concentrate on what is being said.
- ★ Allows the receiver to check their understanding of complex or significant information.
- ★ Acknowledges emotions while getting to the facts.
- ★ Encourages others to share information.
- ★ Builds trust and positive relationships.

You can develop and improve these skills by practicing active listening techniques.

There are techniques you can keep in your ombudsman “toolbox” to engage in active listening. These techniques are:

- ★ Focusing attention on the speaker.
- ★ Watching non-verbal behavior.
- ★ Asking questions.
- ★ Paraphrasing.

FOCUS YOUR ATTENTION

Many of us have conversations in which we were aware the listener was not focused on what we were saying. Focusing your complete attention on the speaker is harder than it sounds, but here are some tips:

- ★ **Minimize barriers.** Many of the barriers to communication mentioned earlier can prevent a sender and receiver from focusing on the conversation. When speaking with someone about an important matter, find a quiet place, silence electronic devices and set aside your opinions and perceptions. (Even those with routine questions should be given your full attention.)
- ★ **Listen until the end.** Keep listening until the sender is done speaking. Do not formulate a response in your head while the person is still talking.
- ★ **Analyze the message.** Compare what you are hearing with what you already know. Evaluate any evidence in support of what is being said. Separate statements of fact from opinions, suggestions or recommendations.

NON-VERBAL BEHAVIOR

Part of being a good communicator is not only about focusing attention on what someone says but also watching their non-verbal communication, or body language. The ability to notice and understand body language is a powerful communication skill that can help you connect with others, understand what they really mean and build better relationships.

All forms of body language—the gestures we make, the way we sit, how close we stand, how much eye contact we make—send strong messages. Even when speaking to someone on the phone, you can notice things like pauses, sighs or stammering that indicate there may be something else going on besides a routine call for information. Even when someone is silent, they are sending a message.

OPEN-ENDED QUESTIONS

Open-ended questions begin with words such as “what” and “how.” Examples of open-ended questions include: “What did you do then?” and “How did that make you feel?”

Statements also can be open-ended. An example of an open-ended statement is, “Tell me more.” You can use open-ended questions and statements to clarify the caller’s message.

ENCOURAGERS AND DOOR-OPENERS

Encouragers are words and sounds that indicate you are listening.

Examples of encouragers include:

- ★ Uh-huh.
- ★ I see.
- ★ Yes.
- ★ Oh.

Because encouragers are brief, they will not interrupt the caller’s thoughts.

There may be times when callers will need additional encouragement to talk about their feelings or concerns. Door openers are similar to encouragers in that they are statements or questions that leave the door open for the person to continue to discuss the issue.

Examples include:

- ★ Would you like to talk about it?
- ★ I am interested in your thoughts on that.
- ★ Do you want to say anything more about that?
- ★ I am wondering how you feel about that.

SILENCE

Unlike a casual conversation in which silence can be awkward, silence can be valuable in a helping conversation. Silence allows callers time to pause and compose their thoughts. It also gives you the opportunity to reflect for fully comprehending the message.

PARAPHRASING

Paraphrasing is similar to reflective listening, except instead of repeating exactly what the caller says, you summarize what was said.

You: You're concerned with how you're adjusting to your Sailor being gone.

Caller: Yes, exactly. I'm worried that maybe I need to see a counselor or something.

SENDING MESSAGES

In addition to listening, you must be aware of the messages you send when communicating. The following are ways you can send messages that will improve your communication skills.

EMPOWERING RESPONSES

Specific words greatly affect the way information is received. Although you understand the message to have one meaning, those same words may have a different meaning to the receiver.

| WHEN I | I SAY | YOU FEEL | YOU COULD SAY |
|-------------|-----------------------|----------------------------------|----------------------------|
| Argue | "Yes, but ..." | Defensive, ignored or discounted | "What would happen if ..." |
| Give orders | "You have to ..." | | |
| Warn | "You had better ..." | | |
| Advise | "What I would do ..." | | |

“I” MESSAGES

Rather than using the word “you,” use the word “I” when communicating with callers. This method provides a nonjudgmental description of the situation or of the other person’s behavior.

You: I feel concerned that you are feeling so lonely. If you would like to talk with a counselor, I can refer you to a professional or we could talk about some ways to help you overcome loneliness.

CLARIFY

Even with active listening, not all messages are clear the first time you hear them. Clarify any messages you do not understand. This will make your callers feel that their thoughts and feelings are valuable when you want to be sure you understand the message.

You: Could we go back to something you said earlier? I’m not sure I completely understood.

REFOCUS

Sometimes, it may be necessary to refocus your callers. They may become distracted, lose their train of thought or may focus on a solution that is not realistic.

Caller: I just wish my husband could come home. Every time I think of him, I feel so sad. Maybe they will come home early.

You: We all wish they could come home early, but that is probably not going to happen. What can we do to help make this deployment easier for you?

CONTRACTING

Contracting is getting callers to agree to do something, then following up with them to confirm that they have completed their tasks.

You: I’m concerned about you. Would you agree to call the Fleet and Family Support Center and ask to speak with a counselor about your loneliness? I can call ahead and let them know you’ll be calling. Would that help?

Caller: I guess.

You: Let’s hang up now. I will call the FFSC and call you back so you know they are expecting your call.

Caller: OK. Thanks.

5.3 IN-PERSON COMMUNICATION



In-person communication is often easier, because verbal and non-verbal cues are available. The two styles of in-person communication you will use as an ombudsman include:

- ★ Informal contacts.
- ★ Briefings.

INFORMAL CONTACTS

As an ombudsman, you will represent the command in informal situations, such as:

- ★ At meetings with the command leadership and the command support team.
- ★ At homecoming events.
- ★ At command picnics and parties.
- ★ At the commissary, Navy Exchange or while visiting other locations on and off-base.

Some people are naturally warm and outgoing, while others are more reserved. Whatever your personality style, you should always:

- ★ Smile.
- ★ Approach individuals and introduce yourself.
- ★ Make small talk. Ask others how long they have been a part of the command, where they grew up, where they live, etc.
- ★ Carry business cards or contact cards with your name, ombudsman phone number and email address.

BRIEFINGS

Command ombudsmen may have an opportunity to speak at events. This is an effective way to promote the Ombudsman Program. You may be asked to:

- ★ Introduce yourself at command functions.
- ★ Brief new Sailors at command indoctrination sessions.
- ★ Make announcements at FRG meetings.
- ★ Provide remarks at pre-deployment briefings.

Whether presenting to an audience of more than 1,000 or facilitating a group of five, practice these basic steps to effective presentations:

- ★ Tailor your message to your audience.
- ★ If possible, become familiar with the environment.
- ★ Visualize yourself giving the speech.
- ★ Remember that your body language is important.
- ★ Practice, practice, practice!

5.4 TELEPHONE COMMUNICATION



Most of the service you provide will be over the phone. Telephone communications present special challenges because there is no face-to-face contact. Your tone of voice and word choice are important to demonstrate caring.

Your voice should be pleasant, concerned, patient and caring. It may also help to deepen the tone of your voice; lower voices are perceived as being more mature and in control.

There are several ways to assess your tone of voice. You can get feedback from a co-ombudsman, friend or neighbor. Be sure to ask someone who will be honest and encouraging. Another option is to record yourself speaking; this is an excellent way to learn how others hear you.

CALLER TYPES AND SUCCESS STRATEGIES

People will call you for a variety of reasons, and responses are different for each type of call.

INFORMATION REQUESTS

Most of the calls you will receive are likely to be requests for information. Callers may request a telephone number, ask when the ship is returning to port, or ask when and where the next FRG meeting is being held. You can guide families to the ombudsman newsletter and command social media sites (e.g., Facebook) and encourage them to call the Careline before contacting you for routine information.

To encourage callers to use the newsletter and Careline, you can provide the requested information and gently say:

“I publish routine telephone numbers on the back page of the ombudsman newsletter each month. Are you receiving the newsletter?”

or

“Currently the ship is scheduled to pull into port at 1600 this afternoon at Pier 5, but always call the Careline for the most current arrival times. Do you have that number?”

CRISIS CALLS

A crisis occurs when a person no longer believes they can cope effectively. These calls are more difficult, because they may require sensitive handling and immediate assistance. Chapter 7: Crisis Calls and Disasters in this manual provides instructions for handling crisis calls.

SERVICE DEMAND CALLS

Service demand calls may come from individuals who are unaware of the scope of ombudsman responsibilities. This caller may ask you to provide services that are not

a part of the ombudsman role, such as providing transportation, lending money or providing child care. These individuals have genuine needs but must learn how to meet those needs themselves. When responding to service demand calls, you should provide information about alternatives such as public transportation, financial assistance programs or Navy child care options. You should not provide the requested service for several reasons:

- ★ An unreasonable precedent is established for future ombudsmen.
- ★ Callers will never learn how to handle their needs on their own.
- ★ You may put yourself and your family at risk for liability.
- ★ It is unfair to others in the command to provide child care or lend money to some and not to all.

To reduce service demand calls, use preventive methods, such as providing information in the ombudsman newsletter, command social media site or putting reminders on the Careline about Navy family ombudsman roles and responsibilities.

CHRONIC CALLERS

People who call frequently without a specific request are referred to as chronic callers. They may view you as a friend they call to chat with when bored, lonely or depressed. Treat all calls as real until shown otherwise. It is important to remain empathetic while setting boundaries.

- ★ It is OK to set limits on time, for example, say: “I only have five minutes to talk.”
- ★ Some callers may simply need direction to resources that will help them connect with others in the community, such as the FRG or the Family Employment Readiness Program at the Fleet and Family Support Center (FFSC).
- ★ Other callers may need help developing coping skills. You may need to refer these callers to the clinical counselors at the FFSC or other community organizations.

COMMAND EMERGENCY CALLS

A command emergency call is a cross between an information request and a crisis call. These occur when a person hears a report on the radio, sees a story on the news or hears a rumor involving the command. Family members may contact you with what they have heard.

Do not assume that news reports are incorrect simply because you have not heard from the command. Often the media will air a story before an official military source can contact you with verified information. Tell callers that you will research the question and return their call. A sample response is: “I saw that on the news, too. I am going to try to contact the command to verify the report. I will activate the phone tree when I have more information.”

TELEPHONE PROTOCOL

A protocol is a guideline for doing something effectively and consistently. Protocol for handling ombudsman calls includes:

1. Greeting.
2. Identification.
3. Business.
4. Document.
5. Close.

GREETING

When answering the telephone, you should identify yourself, “Hello, this is Alicia,” or answer anonymously, “Hello.”

Delete cute messages, the voices of young children and other noises from your ombudsman voicemail. A professional-sounding message will instill confidence in your callers.

IDENTIFICATION

The caller usually will ask to speak to the ombudsman. At that point, you should give your full name and identification.

“This is Alicia Smith, ombudsman for USS Bestshipever.”

If callers do not immediately identify themselves, ask for their names and any additional identifying information. This is especially important if the command instructs you to provide services only to those individuals on the command roster.

BUSINESS

To determine the reason for the call, ask, “How may I help you today?”

If the call is an emergency, get the caller’s telephone number immediately in case the call is disconnected. It may be necessary for you to calm the caller before you can get this information.

If the call is not an emergency, simply a request for information, provide the information. If the caller is not clear about what is needed, use the PACT (**P**roblem, **A**ssess, **C**hoose, **T**ry) model discussed in Chapter 6: Information and Referral. If the caller simply wants to chat, you should determine how much time, if any, you have available and inform the caller of your time limit.

CLOSE

Close the call with a summary of the discussion. Indicate any actions to be taken by you or the caller and when these will be done. Encourage the caller to contact you again, if necessary. If the call was complex, contact the caller in a day or two to confirm that assistance has been provided.

DOCUMENT

Calls must be documented. Use the telephone log or monthly report format (see Chapter 2: Managing Your Responsibilities). Some command ombudsmen choose to gather this information first in case the call ends abruptly. Others find asking for this information can interrupt a caller's train of thought before the caller has an opportunity to explain the reason for the call.

VOICEMAIL MESSAGE

There may be times when you are unable to answer your phone or cannot focus your attention on your caller's needs. For those times, have a detailed message recorded on your voicemail, including a number for emergency services. For example:

"Hello, you have reached Heather Smith, ombudsman for the USS Bestshipever. My hours of operation are 9 a.m. to 9 p.m. If this is an emergency, please call base security at XXX-XXXX or dial 911. If you have reached this message during my normal hours, I may be on the other line. Please leave a message and I will return your call as soon as possible. Thank you."

Remember to check your voicemail messages frequently and to return calls within 24 hours.

CARELINE

A Careline is a telephone line dedicated to a specific command. It may be a single recorded message updated by the command ombudsman, or there may be options for the caller to listen to messages from the commanding officer (CO), the chaplain, the FRG, etc. Most commands house the equipment in a Navy facility and the message is updated remotely. Small commands and shore installations rely on phone trees, newsletters and installation publications to keep family members informed and do not have a dedicated phone line.

Carelines can be an effective tool for informing and educating command families. If your command has a Careline, update your message at least once per week so family members can get regular updates.

Messages from the CO, executive officer (XO) or command master chief (CMC) when the command is deployed are welcomed by families awaiting news about their loved ones.

CREATING YOUR OWN CARELINE MESSAGE

It can be helpful to write a script for your Careline message. This ensures that all necessary information is included.

The phone tree can be set up based on:

- ★ Geography.
- ★ Departments.
- ★ Alphabet.
- ★ Wardroom, chief petty officer (CPO) spouses, petty officer first class spouses, etc.

Once phone tree callers have been identified, they should be instructed to:

- ★ Make calls in a timely manner.
- ★ Read information exactly as it is provided.
- ★ Follow OPSEC guidelines when contacting command families.
- ★ Avoid expounding upon the message.
- ★ Keep calls brief.
- ★ Report to the ombudsman if they encounter any special conditions or extreme reactions.

When you are unable to reach someone, keep your voicemail message simple: Give your name and contact information and ask the person to return the call. Do not leave details about why you are calling; you do not know who will be listening to that message.

Be sure to have a procedure in place to replace phone tree callers when they leave the phone tree.

5.5 WRITTEN COMMUNICATION



The most common forms of written communication used by ombudsmen include:

- ★ Formal correspondence.
- ★ Informal notes and cards.
- ★ Email.
- ★ Social media.
- ★ Newsletters.

FORMAL CORRESPONDENCE

There may be occasions when you need to write formal correspondence. Examples include:

- ★ Responding to official correspondence.
- ★ Sending a letter of appreciation.

When drafting formal correspondence, you may ask the command's administrative personnel to format the letter and put it on command letterhead for signature. Be sure to thoroughly research content and ensure correct spelling and grammar are used. The command administrative officer can advise you on the preparation of official correspondence and who should sign it.

INFORMAL CORRESPONDENCE

It is likely that you will write many informal notes and letters. These include:

- ★ Follow-up notes to callers.
- ★ Notes of encouragement.
- ★ Explanatory notes included with resource materials.

Although these are not formal correspondence, all written communication reflects on your command. Please be sure to use:

- ★ Appropriate stationery or note cards.
- ★ Proper spelling and grammar.
- ★ Legible handwriting.

BUSINESS CARDS

Ombudsmen can use business cards or contact cards to reach out to others. On the front of the business card, list contact information; on the back, provide a brief overview of services or list the Ombudsman Code of Ethics.

Whether a command has a trained graphics staff to produce materials or the ombudsmen produce them, there are several key elements in producing quality materials:

- ★ The information must be accurate.
- ★ High-quality graphic design integrates words and images.
- ★ The product must be attractive, professional and easy to read. It must quickly grab the reader's attention.

EMAIL

Email is an efficient way to communicate with command leadership and command families within the guidelines of OPSEC. To communicate effectively:

- ★ Use the appropriate “to” field when sending email.
 - Use the “to” field when sending an email to an individual email address.
 - Use the carbon copy (cc) field to send copies of your email to additional recipients. You might send an email to the CO and carbon copy the XO and CMC.
 - Use the blind carbon copy (bcc) field to send email to all recipients in a distribution list without revealing any recipients' email addresses.
- ★ Write a meaningful subject line.
- ★ Be concise.
- ★ Include a proper signature (i.e., your name, title and the name of the command).
- ★ Use care when using acronyms, abbreviations and emoticons.
- ★ Follow all OPSEC rules.

OMBUDSMAN BASIC TRAINING EMAIL CHECK

To: militaryspouse@yahoo.com
Cc: the whole country
Subject: [no subject]
Good Morning from beautiful Capodichino:

Sorry it's taken me so long to respond to your emails, I've saved them from the last month and will include the answers in this email. Isn't the weather been beautiful, don't forget Wednesday is market day down at the Piazza so don't miss those bargains. I'll be driving down so if you'd like to carpool we can certainly hook up. But don't forget to be aware- NSA Security reports that there is a robbery scam at the autostrada tollbooths in the Naples/Caserta area. As a driver approaches the ticket machine, a person holding an autostrada ticket (presumably outside the toll-booth) will ask for money. As the driver opens a wallet, the thief grabs the money and makes a getaway. The latest victim lost 750 Euro and was scratched by the perpetrators reaching into the car. Police have confirmed several incidents, including both foreign and Italian victims.



Speaking of bargains, with the holidays approaching don't forget that there are budgeting classes available at Fleet and Family Support Center. There have been several families in our command that have had to visit Navy Marine Corps Relief Society due to money problems. They have children and have recently reported into the command; coming overseas is difficult if you come with money problems to start. If anyone needs help in this area, let me know as I have "connections" with PSD, NFCU, NMCRS and CCCS.

I thought it might be helpful because I've heard around the command that there is a need for some sort of Womens support group. The Chaplain has an ongoing group that meets at 1030 at the NSA. For more information call Chaplain Bruce Carlton at 081-589-3530 I've attached the Ombudsman Roster to this email which contains area Ombudsman information to include email addresses, phone numbers, and addresses if you should need to contact them. It's in Word format. I've also attached the duty roster for the guard gate so you can have a copy of when your spouse has duty with the holidays coming up.



I guess that's it for now, LOL. If you have any more questions, please let me know and I'll get back to you when I can. TY!

TTFN,
Marta Allover

SOCIAL MEDIA

Social media is a powerful tool for networking and engaging with command families. You can use social media tools to share information quickly. When writing social media posts, there are a few key points to keep in mind:

- ★ Be concise. There may be limits to the number of words or characters you can put in a post.
- ★ Check your grammar. Poor grammar reflects badly not only on you but also on your command.
- ★ Don't rely on the spellchecker. It will not catch words that are used incorrectly.
- ★ Auto correct may change the word you intended into something with an entirely different meaning. Always read content carefully before posting.
- ★ Don't rush. Read your content through before you post it.
- ★ Get permission. Always check with your CO, command POC or PAO before posting information on social media.

5.6 SOCIAL MEDIA COMMUNICATION



Many ombudsmen and FRGs use social media to communicate with families. Some commands provide their ombudsman with administrative rights to their social media accounts. Others have different social media pages but manage the content as a team. Discuss with your command leadership team the approach they would like to take.

However your command chooses to use social media, it is important to practice OPSEC in all online communications. Names, dates and locations should not be discussed unless authorized by the CO.

SOCIAL MEDIA TOOLS

The popularity of different social media tools can fluctuate. Which sites you use may be determined by the command or the preferences of your command families. Options may include:

FACEBOOK

Currently the most widely used social media site. Many commands have Facebook pages through which they share information about the crew and upcoming events. Facebook provides an opportunity for followers to ask questions and share information. Become familiar with Facebook privacy settings—Public, Closed and Secret—and how they can be used to share information.

TWITTER

Twitter may be used to send brief (140 characters) messages to a wide group quickly. Twitter users can respond to “tweets” and ask or answer questions. It can also be used to share links to articles or videos.

INSTAGRAM

Instagram is based on the sharing of images and short videos. Users can upload pictures and apply filters to adjust the image. Followers can comment on your pictures, and you can reply to those comments.

PINTEREST

Pinterest is another social media site centered on image-sharing. Pinterest operates much like an electronic bulletin board where users “pin” images and post comments about the image. One advantage to Pinterest is viewers do not need to create a Pinterest account to view your board; send them the direct link so they can bypass the login page.

SNAPCHAT

Snapchat allows you to share images, video clips and messages with your friends. The unique feature about Snapchat is that the messages disappear after only a few seconds. A note of caution about Snapchat: Do not assume that you can speak freely on Snapchat because the messages are temporary. Many people save screen captures of Snapchat messages; these can then be made public.

CREATING A PROFESSIONAL PROFILE

As an ombudsman, people will be looking to you for advice and guidance. Your credibility depends upon the image you present. When using social media, it is essential that you create a professional profile and limit the personal information that is revealed.

To accomplish this, you should have separate social media accounts for your role as ombudsman and your personal life. Follow these basic steps when creating a professional social media profile:

- ★ Choose images carefully. Use a scenic shot from your photo collection or check out the Web tools for creating cover images.
- ★ Privacy settings. Review the privacy setting instructions for each social media site carefully. Establish strict controls for who can view your personal content.
- ★ Use caution when following or “liking” other pages. Remember that information posted on these pages may then be linked to yours.

SOCIAL MEDIA PROS AND CONS

There are advantages and disadvantages to using social media to communicate with command families.

| Pros | Cons |
|--|---|
| <p>Advantages to using social media include:</p> <ul style="list-style-type: none"> ■ Reach a wide audience. ■ Communicate instantly. ■ Share information including articles, pictures and videos. ■ No cost to use these tools. | <p>Disadvantages may include:</p> <ul style="list-style-type: none"> ■ Risk of violating OPSEC. ■ Require maintenance to keep information accurate. ■ Result in loss of privacy. ■ May become a “complaint corner” if not strictly regulated. |

Be sure to talk with the CO before using social media in your role as an ombudsman. For more guidance on the Navy’s social media policy, see the *Navy Public Affairs Guide for Ombudsmen* at www.navy.mil/ah_online/OPSEC/docs/Policy/Navy_Public_Affairs_Guide_for_Ombudsmen.pdf.

5.7 NEWSLETTERS

Newsletters are an excellent way to share information with command families. Unlike Carelines that only allow for limited communication, newsletters allow you to share more in-depth information.

PURPOSE

Newsletters have many purposes. They can be used to:

- ★ Transmit information from the command to family members.
- ★ Educate family members about community and Navy programs and services.
- ★ Keep family members informed about news of common interest (e.g., activities, special events, announcements).
- ★ Express the command’s interest in improving the morale and welfare of its family members.
- ★ Encourage, inspire and uplift.

BENEFITS

There are several advantages to using a newsletter to communicate with command families:

- ★ Allows you to reach the greatest number of people at one time.
- ★ Reduces rumors by providing all families with accurate information.
- ★ Reduces the number of phone calls requesting routine information.
- ★ Establishes you as a source of credible information.

CREATING A NEWSLETTER

There are some basic steps you should follow when creating an ombudsman newsletter.



1. Determine Its Purpose

You should discuss your ideas for the newsletter with your CO. Ask for instructions on:

- ★ Established guidelines.
- ★ Restrictions (length, content, frequency, etc.).
- ★ Potential contributors.
- ★ Preferred delivery method (electronic or print).
- ★ Review and approval process before publication.
- ★ Supplies.
- ★ Computer access.
- ★ Mailing deadlines and procedures.

Ask the CO or command POC about maintaining the newsletter mailing list and providing updated copies of the list to the Navy Regional Mail Center. Determine whether extended family (i.e., parents, grandparents or significant others) may be added to the list, if requested.

Newsletters may be used to communicate official information related to mission and readiness. Official information includes general command information, educational information, content that enhances morale and unit cohesion, and dates of command-sponsored events, such as deployment briefs and FRG meetings. Unofficial information includes fundraisers, commercial ventures, advertisements, birthday announcements, etc.

2. Brainstorm Ideas

Establish a file for each of the subjects listed below. Social media sites such as Facebook and Pinterest are a great source of inspiration for newsletters. Begin collecting story ideas, news articles, clippings, photos, news source names, addresses, phone numbers and artwork that relate to each subject:

- ★ Seasonal features: Father's Day, vacation ideas, winter safety tips.
- ★ Command activities: pre-deployment briefings, picnics, holiday parties, charitable activities, new chief petty officer events, FRG calendar.
- ★ Morale boosters: family events, videotaping for deployed commands, homecoming activities.
- ★ Informational needs: change in clinic policy or hours, child care resources, agency news, such as FFSC, Red Cross, Navy-Marine Corps Relief Society, etc.
- ★ Command messages: messages from the CO, XO, CMC, chief of the boat (COB) or chaplain.
- ★ Military monthly themes: April is Month of the Military Child. November is Military Family Month.

3. Select the Content

Newsletter content can vary depending on:

- ★ Available information.
- ★ Season of the year.
- ★ Space restrictions.
- ★ Command status: in port, deployed, shipyard, changing homeport, shore-based.
- ★ Types of information requested by readers.

Gather newsletter information from the:

- ★ CO, XO, CMC/COB and their spouses, the chaplain, command financial specialist or command career counselor.
- ★ Ombudsman assembly handouts, announcements, speaker's comments, etc.
- ★ FFSC newsletters, fliers, staff members.
- ★ Ombudsman Registry bulletins.
- ★ CNIC Ombudsman Hot Topic webinars.
- ★ Ombudsman advanced trainings.
- ★ Housing Welcome Center.
- ★ Morale, Welfare and Recreation (MWR).
- ★ Child Development Center (CDC).
- ★ Exchange and commissary.

- ★ Naval hospital/clinics.
- ★ Local and military newspapers.
- ★ Local library.

Develop the habit of talking with members of the command support team to share information and ideas.

Most newsletter editors plan the content of their newsletters several months in advance. When planning, consider the needs and interests of families and any requirements, limitations and restrictions. It is easiest to use seasonal items of interest (holidays, month of the military child, etc.) or predictable pieces based on the command's status (pre-deployment, preparing for homecoming). Use these as the foundation for the newsletter, then add news and current events.

Always include a personal message to the command families. Remind readers of the purpose of the Ombudsman Program, explain your role and provide a note of encouragement. Be sure to include your name, telephone number and the times you are available for routine calls.

Like any responsible professional editor, an ombudsman must exercise good judgment about what types of material to include in the newsletter. All content must be conservative and carefully screened. Consult with the command or installation public affairs officer for guidance on appropriate newsletter content. COs have the ultimate authority to determine official content of newsletters and whether they meet the criteria for mailing with appropriated funds. The following types of information should not be included in the ombudsman newsletter:

- ★ Sensitive information.
- ★ Political or religious opinion.
- ★ Services that require the payment of a fee.
- ★ Advertisements.

4. Write the Articles

Once you have selected the content, the next step is to begin writing the articles.

Effective Headlines

The best way to write a good headline is to keep it simple and direct. Choose short, concise words, use an active verb and capture the key point of the story in the headline. Do not be so brief that readers miss the idea or are misled about the topic of the article. Avoid standard, repeating headlines. You may want to create regular features such as a Monthly Medical tip, but insert a subheading for each month's entry. Be cautious about headlines that reflect opinions. Do not try to be too clever; leave out puns and rhymes.

GET CREATIVE WORKSHEET

Eye-catching titles can attract the interest of your readers. Be creative when creating titles for the articles in your newsletter.

| NEWS ITEM | CATCHY TITLE |
|---|--------------|
| Pre-deployment briefing | |
| April is Month of the Military Child | |
| Fleet and Family Support Center | |
| Financial Educators Help Create a Spending Plan | |

Writing Content

Analyze the readers to determine their needs. Ask yourself the following questions:

| | |
|--------------|---|
| WHO | Who is my reader? |
| WHAT | What does my reader need to know about this subject? What will interest my reader most? What will help my reader to understand this subject? What do I want my reader to do? |
| WHEN | When does my reader need this information? When will these events take place? |
| WHERE | Where can I get the information my reader wants and needs? |
| WHY | Why does my reader need this information? Why is my reader interested in this subject? Why is my reader not interested in this subject? |
| HOW | How much information does my reader need? How can I help my reader do what I ask? How does my reader feel about this subject? |

Copyrighted Materials

A copyright is the exclusive right to intellectual property that legally limits rights to print or publish material. Look for the symbol ©, which should appear within the phrase © (date) (name of owner). For a newsletter or magazine, the phrase would normally appear as part of the masthead; for a book, on the back of its title page; for artwork, as part of the caption. In these cases, the phrase protects all material within the publication. A copyright is typically of a 50- to 100-year duration.

To use copyrighted materials, you must obtain permission under the fair-use provisions. Publishers usually handle copyright requests for authors; send your request to the publisher. When requesting to use copyrighted materials:

- ★ Describe the content to be used.
- ★ Attach a photocopy of the exact material.
- ★ Describe the newsletter—its purpose, frequency and readers.
- ★ Indicate that the newsletter is associated with a nonprofit activity.
- ★ Use whatever credit line the copyright owner wishes.

Copyright law does allow for a small portion of copyrighted materials to be published without permission under specific circumstances. The most common circumstances are when content is quoted for the purpose of commenting or teaching about the material. Material may also be quoted when describing the material as news. There are no set rules about how long the quotations may be or how many quotes may be used.

Material in the public domain has a copyright that expired or never was secured. All government-produced materials are in the public domain and may be used freely, but the source should be cited. FFSC newsletters are an example of public domain material.

For additional copyright information, visit www.copyright.gov.

Writing Tips

If you are not sure how to write an article, the following tips provide some basic guidelines:

- ★ Grab readers' attention. Start with the most important information in the first paragraph and then add supporting information.
- ★ Use simple, action-oriented verbs.
- ★ Use familiar words.
- ★ Keep it short and simple. Paragraphs of four to six sentences and stories of five or fewer paragraphs are ideal.
- ★ Use active voice: subject first, then verb.

- ★ Speak directly to readers using a normal personal speaking pattern (except for slang, shorthand speech or incorrect language).
- ★ Ask: If I had no knowledge of this topic, would I understand the message of this article? Did I answer the six basic questions of reporting: who, what, when, where, why and how?
- ★ Writing is a learned skill. Write, rewrite and then rewrite again.
- ★ Welcome edits. Ask others to read articles to ensure they make sense.

Common Writing Errors

Try to avoid common writing errors:

- ★ Expressing more than one point or idea per paragraph.
- ★ Changing the verb tense in the same sentence.
- ★ Capitalizing words that are not proper nouns.
- ★ Connecting two sentences with a comma and creating a run-on sentence.
- ★ Choosing a style or format and failing to hold to it.
- ★ Failing to put statements in a positive form.
- ★ Including needless words.
- ★ Using vocabulary or jargon that readers will not understand.
- ★ Using an abbreviation or acronym without telling the reader what it means the first time it appears in the article.
- ★ Using spell check only. Have someone else proofread your newsletter to avoid common spelling, grammar and punctuation errors.

5. Format Your Newsletter

Ombudsmen produce newsletters in a variety of formats. The most common styles include:

- ★ Letter.
- ★ Newspaper.
- ★ Combination.

All three styles are effective means of communication. Choose the format you are most comfortable using. The choice of newsletter format reflects your own personal approach to communication.

Letter

Letter style is the quickest and easiest to produce. Command letterhead stationery is usually used. Short paragraphs and the occasional use of emphasis type (i.e., boldface, italics) helps keep readers' interest. The length of the letter-style newsletter is usually one to two pages.

Newspaper

Newspaper style is the most time-consuming to produce. This style most closely resembles a professional publication. It contains larger bold headlines, artwork, calendars, news stories and special columns, and has a specially prepared banner. It is visually appealing and is capable of holding the reader's attention for longer periods. Most importantly, it is easy to scan for items of interest. The length is usually four to eight pages.

Combination

Combination style is just that—a combination of the letter style and newspaper style. It may be printed on letterhead stationery or on paper with a special newsletter banner. It is usually typed in six-inch paragraph widths with bold headlines separating stories to catch the reader's attention. Occasional pieces of artwork may be added to emphasize a theme or to give a seasonal flair. The length is usually two to four pages.

Design Tips

The following design tips were developed by graphic design expert Robin Williams (not to be confused with the comedian). To keep your newsletter looking professional and inviting, use the following guidelines:

Contrast: Contrast is the concept that states if you want one design element to be different from another, make it look different, not similar. Contrast is what attracts the reader to look at the page.

Repetition: Repetition of visual elements throughout a piece develops organization and creates unity.

Alignment: Alignment creates a visual connection among design elements on the page. This is what gives the piece a clean, sophisticated look.

Proximity: Proximity groups related items close together. This further organizes the page, reduces clutter and gives the reader a clear structure.

For more information about designing your newsletter, see the *Fundamentals of Graphic Design* handout in Appendix C.

Creating a Banner

The newspaper style format requires a banner. Typically, the banner includes the newsletter's title and a subtitle identifying the publisher or intended audience. The banner can also include publication information, such as the issue date, volume and number.

Consider the following when designing a banner:

- ★ Choose a descriptive title and subtitle.

- ★ Isolate or emphasize important words.
- ★ Choose an appropriate font.
- ★ Use secondary words to add graphic contrast.
- ★ Carefully select banner size and position.

Banners provide issue-to-issue unity. The size, shape, position and color remain constant, even though the text and visuals on the front page change with each issue.

Columns

A one-column format works well with the letter-style newsletter; use a six-inch column for ease of reading. If space in the newsletter is at a premium, consider using a two- or three-column format. Most word processing programs will automatically format columns.

Multicolumn layouts offer more flexibility for design. The text is easier to read, because the eye only travels a short distance from the end of one line to the beginning of the next. The headline of an article should also span the article's columns.

Fonts

There are two common types of fonts: serif and sans serif. Serif fonts are those that have “hooks” at the ends of the letters. Times New Roman is an example of a serif font. Serif fonts are highly readable; the hooks, feet, brackets and the differential between the thick and thin parts contribute to their legibility. Serif fonts include:

- ★ Times New Roman
- ★ Garamond
- ★ Cambria
- ★ Century

Sans-serif typefaces are perceived as modern, cosmopolitan, scientific and up-to-date. Although people read sans-serif type faster, they also tend to read it less accurately.

Because readers scan quickly and headlines tend to be short, use a recognizable font to ensure the text is quick and easy to read. Sans-serif fonts include:

- ★ Candara
- ★ Arial
- ★ Verdana
- ★ Century Gothic

Variety within the same typeface family is fine (italics, bold, other point sizes). Using too many fonts creates a hodgepodge effect. Microsoft Word pairs complementary fonts under the “Design” tab. This allows you to select fonts that create visual interest without becoming distracting.

Remember, a single typeface may come in:

- ★ Standard
- ★ **Bold**
- ★ *Italic*
- ★ SMALL CAPS

Fonts are available in different sizes, measured in points (72 points equals 1 inch). Good choices for headlines are 18 or 24 point and for subheads 12 or 14 point, depending on the style and layout of your newsletter.

Using all caps for body text is more difficult to read than using uppercase and lowercase characters. Both of the following samples are the same font size and style:

Text in all caps takes up to one-third more line space than lowercase letters.

TEXT IN ALL CAPS TAKES UP TO ONE-THIRD MORE LINE SPACE THAN LOWERCASE LETTERS.

Graphics

A well-designed newsletter will have a good balance of text and images. Images that support the content of your newsletter create visual interest and attract the interest of your reader. You may want to include a photo of a promotion ceremony or FRG event. Check with the CO about restrictions to using photos in your newsletter.

Avoid relying too heavily on images for your content. Graphics will increase the file size of your document and may be difficult for some viewers to open. If your newsletter is being printed, the use of graphics will drive up the cost of printing.

Proofread Your Newsletter

Proofreading is difficult. The person who created the material may miss errors in spelling or context because the content is too familiar. Ask someone else to proofread the newsletter. When proofreading, view the material one element at a time. Read the:

- ★ Body copy. Check for consistency. Decide on rules of capitalization, grammar and punctuation and be consistent with them throughout. After this is done, read the content for errors. Look for ideas that seem disconnected, indicating a missing sentence or paragraph.
- ★ Headlines. Check for spelling. Just because headlines are big, do not assume they are spelled correctly.
- ★ Extra material, such as page numbers.

Many commands appoint a member of the command support team to review newsletters before distribution. This person should be familiar with the guidelines outlined in this chapter as well as any legal issues that may apply.

Check for trouble spots when proofreading:

- ★ Commas.
- ★ Periods.
- ★ Capitalization.
- ★ Quotation marks.
- ★ Apostrophes.
- ★ Numbers.
- ★ Headings.

Submit for Approval

Once your newsletter has been proofread, send it to the command through your POC for final approval before it is distributed to command families.

Distribute Your Newsletter to the Command

After your newsletter is approved, it is ready for distribution.

Production Schedule

With the CO or command POC, decide whether you will produce a separate ombudsman newsletter or contribute to a newsletter produced by the command. You will have more control over the production schedule and content if you edit and produce the newsletter.

Determine how often you will distribute your newsletter and try to maintain that schedule. Families will rely on the newsletter for updates and information. Many ombudsmen create monthly newsletters, especially when the command is deployed. Shore commands may opt to do bimonthly or quarterly newsletters.

There are deadlines to consider when planning a newsletter. Be sure everyone involved with any part of the production process is aware of the entire deadline schedule. Make contingency plans for when others fail to keep their commitments.

Base your deadlines on the goal of readers receiving their newsletter on time. The time allowances are in parentheses. Generally, it takes approximately two to three weeks to create a newsletter and deliver it to readers.

| Deadline | Task | Time Frame |
|-------------------|--|------------|
| Information | Meetings, events, publications, dates, people | (Ongoing) |
| Writing | Articles, input from command, FRG, etc., submitted. (Set an established date. For example, all input to you by the 15th of the month for a newsletter that is distributed on the first of each month.) | 2-5 days |
| Layout and design | Newsletter compiled and proofread. | 1-2 days |
| Approval | Newsletter submitted for approval. | 1-3 days |
| At printer | Newsletter delivered to the Navy Mail Center or to the command for printing. | 5-10 days |
| Delivery | Readers receive their newsletters! | 3-5 days |

Electronic Delivery

Your command may choose to distribute the newsletter electronically. This is the fastest, most cost-effective method of delivery. Be sure to get accurate email addresses for command families. Sending newsletters to the service member does not guarantee that family members will receive them.

When emailing newsletters, put all recipients' addresses in the blind carbon copy box. This ensures that others will not have access to the email addresses in the distribution list.

Navy Mail Center

The Navy Mail Center for each region has the ability to produce and mail newsletters, delivering a professionally produced newsletter at a greatly reduced cost.

Procedures to use the Navy Mail Center include:

- ★ Review the Customer Guide at the Defense Logistics Agency Document Services website, www.dla.mil/HQ/InformationOperations/DocumentServices/UserGuides.aspx.
- ★ Ensure that a command account has been established.
- ★ Produce newsletters using Microsoft Word.
- ★ Attach an updated mailing list using Microsoft Excel. The list is forwarded to the Navy Mail Center for the mailing process. ZIP codes should be five digits for civilian addresses and nine digits for military addresses.
- ★ Typically, each newsletter may be a maximum size of four 8½-by-11 pages, front and back. They are produced in black ink on white 20-pound paper.
- ★ The newsletter's cover page must include the command name or the command logo in the publication title or be printed on official command stationery. The newsletter must be typed and each issue must be dated. The return address must be the command address.
- ★ Provide written directions for printing the newsletter. Be sure to include:
 - Quantity needed.
 - Preferred delivery date.
 - Page order.

The automated system will mail the ombudsman newsletter. Newsletters must carry the command's return address and labels must be typed in all capital letters.

OPNAVINST 5218.7C, *Navy Official Mail Management Program*, provides guidance on the use of official mail. Your command's administrative officer is a good source of information when you have questions about newsletter development and distribution.

SUMMARY

Good communication skills are essential to your effectiveness as an ombudsman. You will communicate on a regular basis with command leadership, family members and community organizations.

When developing communication strategies, it is important to determine which method or combination of methods is most effective to the receiver. You may prefer to communicate in person, by telephone or via written communication, but you will need to use all three to fulfill your role. Strong communication skills can increase your credibility with the command leadership, families and community organizations. Fortunately, learning to be a good communicator is a skill that can be mastered through study and practice.

NOTES:



CHAPTER 6

INFORMATION AND REFERRAL

INTRODUCTION

Providing information and referrals (I&R) is a key role for all ombudsmen. You will need strong customer service skills, knowledge of resources and the ability to problem-solve to perform this function. This chapter will help you develop the tools you need to provide I&R to your command families, including:

- ★ Making appropriate referrals.
- ★ Managing resource information.
- ★ Creating a list of referral resources.

| KEY TERMS | |
|---|---|
| CDC: Child Development Center | FAP: Family Advocacy Program |
| CDH: Child Development Home | PACT: Problem, Assess, Choose, Try |
| DFAS: Defense Finance and Accounting Service | PSD: Personnel Support Detachment |
| EFMP: Exceptional Family Member Program | SLO: School Liaison Officer |

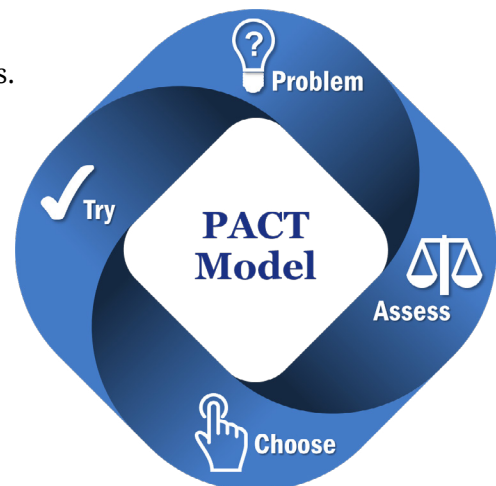
6.1 CUSTOMER SERVICE AND OMBUDSMEN

Providing customer service to command families will be a large part of your duties as an ombudsman. This section will help you develop the skills to meet your customers' needs.

PACT MODEL

Information and referral involves determining the caller's needs and finding ways to meet those needs. The PACT model provides an easy-to-remember method of handling I&R requests. PACT stands for:

- ★ **P**—Problem.
- ★ **A**—Assess.
- ★ **C**—Choose.
- ★ **T**—Try.





PROBLEM IDENTIFICATION

The first step is to identify the problem. Listen carefully to what the caller is saying. What does the caller want to accomplish? You can help the caller by asking:

- ★ How can I help you today?
- ★ What are you hoping we can accomplish?

Next, you must clarify some key points about the situation. Sample questions include:

- ★ Is this urgent? Do you have enough money for food and other necessities? Are you being evicted or are utilities being disconnected?
- ★ What have you done to try to solve the problem?
- ★ What resources do you have? Are there family members or friends who can help?

The presenting problem may only be a symptom of a bigger issue that the caller may or may not be willing to address. By practicing active listening and asking clarifying questions, you may be able to separate the symptoms from the problems.



ASSESS OPTIONS

People may be so overwhelmed by a situation they cannot see potential solutions. You can help callers by brainstorming possible solutions to the situation.

- ★ Explore available options and solutions. Ask the caller to suggest solutions to the problem; do not evaluate the solutions at this point. You may have to provide a few options. Ask open-ended questions and encourage the caller to consider all possible solutions. You will evaluate them together after you have developed a comprehensive list.
- ★ What is happening when the caller is not experiencing the problem? Reminding the caller that the situation is temporary provides hope and builds confidence that a solution can be found.
- ★ Determine the caller's thoughts and feelings about each option. What are the benefits and risks of implementing each option?
- ★ Resolving the problem may require a change in a behavior pattern. Help the caller view the situation as an opportunity to prevent future problems.
- ★ There are some problems that cannot be solved, such as death, serious illness or divorce. In these situations, you can help by being supportive and empathetic, and by providing resources for additional assistance.



CHOOSE OPTION

Once you have thoroughly evaluated your caller's needs and determined that a referral is the most appropriate response, you should:

- ★ Explain why a referral is necessary. For example: Ombudsmen do not maintain food pantries, but there are many organizations that do provide emergency food assistance, such as the Navy-Marine Corps Relief Society, community food pantries and local churches.

- ★ Suggest organizations capable of meeting the caller’s needs. Provide enough information about the organizations so that the caller can make an informed choice. Do not overwhelm the caller by giving too much information or a long list of resources.
- ★ Let the caller know what to expect, how the agency works, etc. Remind the caller that there are other resources and to call you for more names, if necessary.
- ★ Give the caller specific name(s) and number(s) to call. Be sure that the caller writes down the information.
- ★ Sometimes it may be necessary for you to make the initial contact. If it appears that the caller wants help but is unable to follow through to resolve a problem, it may be best if you contact the referral organization. If you have three-way or conference calling capability, you can offer to make the call with the caller on the line and conduct a “warm handoff” to the agency after identifying the reason for the call.
- ★ If the caller seems unwilling to accept assistance, try to identify the real reason for the call. The initial question may be merely a presenting problem, while the actual problem has not been addressed. Is the need for food assistance due to a substance abuse problem? Poor financial management skills? The result of a pay problem?
- ★ Become familiar with the services provided by the most frequently used resources in your community. Knowledge of these services allows you to accurately match family members’ needs with the appropriate organizations.
- ★ Contact the Fleet and Family Support Center (FFSC) or help the caller contact Military OneSource for additional I&R resources if you do not have appropriate resources for the situation.



TRY REFERRAL

Finally, create a plan to try the resources that have been chosen. The plan may be a simple phone call or it may be multifaceted. If there are multiple steps, suggest the caller complete the first two steps, then contact you to discuss what to do next. Remember not to overload a caller with too much information. Callers who are in crisis or overly stressed may only be able to handle one piece of information at a time. Avoid providing more than three resources at one time; the caller can become overwhelmed or confused by too much information.

Follow-up can help a caller implement their plan, because you can review the steps and provide clarification. Follow-up also helps to ensure families receive the needed services. This is also an opportunity for you to update your resource list. During a follow-up contact, ask:

- ★ Were you able to connect with the resource?
- ★ Were they able to help?
- ★ What assistance was given?

Remember, never do anything for callers that they can do for themselves. The primary goal of I&R is to help the caller resolve the problem. A strong secondary goal is to empower the caller to use the information you provide to solve problems independently.

CUSTOMER SERVICE

Customer service is defined as the ability of a person or organization to constantly and consistently meet and exceed the customer's expectations.

As an ombudsman, you are in the business of providing I&R services to your customers—command families. Everyone likes to be the recipient of good customer service; you should try to provide the best possible service to your customers.

To ensure good customer service, whether in person, over the phone or via email:

- ★ Do not make promises unless you will keep them. Reliability is a key element of good customer service. If you say you will attend the Family Readiness Group (FRG) meeting on the 16th of the month, be there (and arrive at least 15 minutes early).
- ★ Listen to your customers. It is frustrating to tell someone what you need, only to discover the person has not been paying attention. Take the time to identify customer needs by asking questions and concentrating on what the customer is really saying. Pay attention to their words, their tone of voice, their body language and, most importantly, how they feel.
- ★ Deal with complaints. No one likes receiving complaints, but these can be a chance for you to correct a problem.
- ★ Get regular feedback. Encourage and welcome suggestions about how you could improve.

CUSTOMER SERVICE TIPS

To ensure that family members are satisfied with the quality of the service they receive, you should use these proven customer-service techniques:

- ★ Treat everyone you come in contact with as a potential customer. This includes command family members, the chain of command and DoD staff.
- ★ Regardless of your position in an organization or your experience, your first task will always be to attract, satisfy and preserve customers. Everyone has customers.
- ★ Pay attention to the details. Try smiling when you answer the phone; it can change the tone of your voice. Providing the most up-to-date information will enhance your credibility and increase customer satisfaction.
- ★ “Walk the talk.” If you say you are going to do something, keep your word.
- ★ Listen to command families through different channels. Provide an ombudsman comment box or email address; talk with family members and ask how you could improve your services.

Good customer service reflects positively upon the command and is in keeping with the Ombudsman Code of Ethics requirement to be professional.

6.2 INFORMATION AND REFERRAL PRINCIPLES

When providing I&R services, you should:

- ★ Limit the number of referrals given at one time.
- ★ Be sure the person has the correct information and understands the steps to be taken.
- ★ Ensure that appropriate resources are provided. It may be necessary to offer to research a question and contact the caller when you have an answer.
- ★ For mental health counseling, refer callers to the FFSC, TRICARE or Military OneSource.
- ★ Develop and implement a follow-up procedure.
- ★ Summarize the action plan for the caller before terminating the call.
- ★ Never make specific promises about the agency or the services being offered.

6.3 RESOURCES

It is important to remember that you are not required to solve your callers' problems. Often, your task will be to guide them to the appropriate resources for their situations. There are many programs and services available to assist military families. Many of these programs are offered across the country; others may be unique to your community.

NATIONAL RESOURCES

National resources include programs and services that are available to military families throughout the United States. Many of these resources may also be accessed by families stationed overseas.



2-1-1 www.211.org

2-1-1 is an easy-to-remember telephone number that connects callers to community services and resources 24 hours a day, 365 days a year. Coverage is available in all 50 states, the District of Columbia and Puerto Rico.

2-1-1 provides free and confidential information and referral for non-emergency support and prevention programs. 2-1-1 can provide information for help with:

- ★ Basic human needs (e.g., food banks, clothing, temporary shelter, rent assistance, utility assistance).
- ★ Physical and mental health (e.g., medical information lines, crisis intervention services, domestic abuse and emotional abuse resources, support groups, counseling, drug and alcohol intervention, rehabilitation, health insurance programs, Medicaid and Medicare, maternal health, children's health insurance programs).
- ★ Employment support (e.g., unemployment benefits, financial assistance, job training, transportation assistance, education programs).

- ★ Veterans support (e.g., health care support, financial assistance and counseling, legal assistance and educational support).
- ★ Volunteer opportunities and donations.



AMERICAN RED CROSS www.redcross.org

The American Red Cross serves civilians and military personnel. Services provided include:

- ★ Sending communications on behalf of family members who are facing emergencies or other important events to members of the U.S. Armed Forces. These communications are delivered around the clock, seven days a week, 365 days a year. A Red Cross message is not required for emergency leave, but commands may request one to verify the need for leave.
- ★ Briefing deploying service members and their families about available support services and explain how the Red Cross can assist them during the deployment. Red Cross offices are often located in military communities and sometimes on military installations.
- ★ Providing, through offices worldwide and in partnership with the Navy-Marine Corps Relief Society, emergency financial assistance to those not near a military installation or outside NMCRS office hours.
- ★ Counseling, guidance, information, referrals and other social services. Confidential counseling services may be available to military personnel and their families, including active duty, National Guard and Reserves. Local Red Cross chapters are listed in telephone books and at www.redcross.org.



CHAPLAIN <http://chaplaincorps.navylive.dodlive.mil>

Navy chaplains help to promote the spiritual, religious, moral and personal well-being of service members and their families. Chaplains provide moral support for young people away from home for the first time, counsel individuals facing personal or emotional difficulties and provide spiritual assistance to people of all faiths. They also provide counsel to those who do not practice or hold a religious belief. Chaplains can be an excellent resource when working with victims of crisis and those in need of moral support or counseling.

All Navy chaplains have the professional obligation to maintain the confidentiality of information disclosed to them. The ability to discuss personal matters in complete privacy encourages full and complete disclosure by personnel and family members seeking chaplain assistance. Confidentiality establishes trust, facilitates increased morale and mission readiness, and benefits both the individual and the Navy.

You should not provide identifying information to a chaplain about a family member unless you have been given permission by the family member to disclose their identity. You are still bound by the Ombudsman Code of Ethics confidentiality guidelines when speaking with a chaplain.



CHILD AND YOUTH PROGRAMS <https://elibrary.cnmc-n9portal.net>

Navy Child and Youth Programs (CYP) provide developmental child care and youth recreational programs and services for eligible children and youth ages 4 weeks to 18 years old. Programs and services are specifically designed and operated to meet the needs of the military mission and service members and their families.

Programs include:

- ★ Child Development Centers (CDC), which provide full- and part-day child care for ages 6 weeks to 5 years.
- ★ Child Development Homes (CDH), which provide full- and part-day, night and weekend child care for ages 4 weeks to 12 years.
- ★ Child and Youth Education Services, which prepare schools and installations to assist families experiencing transition or deployment by providing school transition services, deployment support, installation, school, community communications, Partnerships in Education, Home School Linkage and support postsecondary preparation opportunities.
- ★ School-Age Care (SAC), which provides before-school and after-school care and day camps for ages 6 to 12.
- ★ Youth and Teen Programs, which provide sports programs, leisure classes, youth Internet labs and teen programs for ages 6 to 18.
- ★ Youth Sponsorship Program, which provides access to positive peer groups and social activities, helping Navy children feel connected at their new duty station.
- ★ School liaison officers (SLOs), who are the Navy's subject matter experts for K-12 education issues. SLOs work to connect commanders, educators and parents.



CHILD CARE AWARE OF AMERICA <http://usa.childcareaware.org>

Child Care Aware of America operates child care assistance programs for Navy families.

Support services include:

- ★ Operation Military Child Care (OMCC), which provides fee assistance for families of deployed service members.
- ★ Military Child Care in Your Neighborhood (MCCYN), which offers fee assistance for family members of active-duty Sailors who are unable to access child care on base.

Child Care Aware of America also offers information and resources for choosing child care, early learning and the benefits of high-quality child care.



CONSUMER CREDIT COUNSELING SERVICES www.nfcc.org

Consumer Credit Counseling Services (CCCS) is a nonprofit organization. Under the auspices of the National Foundation for Credit Counseling, it is part of a nonprofit network of more than 1,400 agencies designed to assist people trying to resolve credit-related issues. Services include:

- ★ Certified consumer credit counselors.
- ★ Online member agencies.
- ★ A national toll-free number.

In most communities, CCCS will work closely with FFSC financial educators and Command Financial Specialists (CFSs) to provide services.

Individuals and families who have severe debt may be eligible to enroll in a debt management plan coordinated by a local or state consumer credit counseling agency. A debt management plan is a systematic way to pay down outstanding debt through monthly deposits to the agency, which will then distribute these funds to creditors. Benefits of participating in a debt management program include reduced or waived finance charges and fewer collection calls. Once the debt is repaid, the agency can assist those in the program to re-establish their credit.



DEFENSE FINANCE AND ACCOUNTING SERVICE www.dfas.mil

Family members might contact you with questions about their service member's pay. They may not understand something on the service member's leave and earnings statement (LES) or they may have questions about changes in pay due to promotion, demotion, PCS orders or travel. The Defense Finance and Accounting Service (DFAS) is the military's accountant and ensures service members are paid correctly.

The MyPay feature of the DFAS website allows service members to get real-time information and to print an LES. The website also has information about:

- ★ Split pay.
- ★ Travel pay.
- ★ Garnishment.
- ★ Retired and annuitant pay.
- ★ Taxes.

Service members must create a password to access MyPay. They can also use the Limited Access Password feature to allow spouses or other trusted agents to view their MyPay record without allowing them to make any pay changes.



EXCEPTIONAL FAMILY MEMBER PROGRAM www.public.navy.mil/bupers-npc/support/efm

The Navy's Exceptional Family Member Program (EFMP) is designed to assist Sailors with the special needs of their exceptional family members (EFMs). Assistance is emphasized in the assignment process to ensure that the needs of family members can be met at the new location. Special needs can include any of the following requirements:

- ★ Medical.
- ★ Dental.
- ★ Mental health.
- ★ Developmental.
- ★ Educational.
- ★ Wheelchair.
- ★ Adaptive equipment.
- ★ Assistive technology devices and services.

EFMP coordinators are located at medical treatment facilities and serve military personnel and family support functions. Coordinators facilitate initial enrollment and guide families to other services, if required. Command points of contact can also assist service members and family members with the enrollment process.

Ongoing support is available through the FFSC EFMP case liaisons, who are located throughout the fleet to provide I&R, individualized service plans and case management from one duty station to the next.

EFMP enrollment is mandatory and required immediately upon identification of a special need. DD Form 2792, *Family Member Medical Summary*, and DD Form 2792-1, *Special Education/Early Intervention Summary*, are used for enrollment. Successful implementation requires up-to-date information and extensive coordination between personnel, medical, educational and family support communities.

Sailors may be reluctant to enroll for fear that the program may limit assignments and career advancement or prevent family members from accompanying sponsors on overseas and CONUS tours. Sailors enrolled in EFMP have always received equal consideration for assignments and promotions.

Information about EFMP and enrollment forms are available online at the Navy Personnel Center (NPC) website (www.public.navy.mil/bupers-npc/support/efm).

| NAVY EFMP enrollment categories include: | | |
|--|----------|---|
| CATEGORY | 1 | Needs do not generally limit assignments. |
| | 2 | Pinpoint to specific geographic location. |
| | 3 | Usually no overseas assignments (based on availability of services). |
| | 4 | Assignments near major military or civilian medical facilities (50-mile radius). |
| | 5 | Homesteading in a geographic location that offers sea and shore assignments. |
| | 6 | Temporary category. The condition requires a stable environment for six to 12 months; must update within that time period for permanent category. |

Refer the service member and family member to the medical treatment facility EFMP coordinator, who will assist with completing [DD Form 2792-1](#) (*Special Education/Early Intervention Summary*) and [DD Form 2792](#) (*Family Member Medical Summary*).

FEDERAL CREDIT UNIONS

Most federal credit unions, such as Navy Federal Credit Union (NFCU), offer members free and confidential personal financial counseling. Financial counseling can help individuals reach financial goals, avoid monetary pitfalls or deal with a financial crisis. The service is free, and assistance ranges from answering questions to developing a detailed money management plan to the establishment of a debt management program. Counseling can be done via the telephone, online or in person.



FLEET AND FAMILY SUPPORT PROGRAM

www.cnic.navy.mil/ffr/family_readiness/fleet_and_family_support_program.html

Ombudsmen frequently refer customers to their local FFSC. FFSC programs fall into three functional areas:

- ★ Deployment readiness.
- ★ Career support and retention.
- ★ Crisis response.

FFSCs provide information, training and counseling, or coaching in many areas. The following programs are listed on the FFSP page of the Commander, Navy Installations Command (CNIC) website:

- ★ Clinical Counseling.
- ★ Deployment Support Program.
- ★ Exceptional Family Member Program.
- ★ Family Advocacy Program.
- ★ Family Emergency Response.
- ★ Family Employment Readiness Program.
- ★ Life Skills.
- ★ New Parent Support Program.
- ★ Ombudsman Program.
- ★ Personal Financial Management Program.
- ★ Relocation Assistance Program.
- ★ Sexual Assault Prevention and Response Program.
- ★ Transition Assistance Program.

Clinical Counseling: FFSC clinical counseling is short-term counseling. Counselors help clients develop a plan to deal with the problem or situation they are facing. They can also help by providing contact information for other services and resources in the community.

FFSC clinical counselors hold a master's or doctorate in counseling, social work, marriage and family therapy or psychology. Counselors are experienced and fully qualified to assist those in need.

Deployment Support Program: The FFSC offers deployment support workshops to assist commands, Sailors and their families pre-deployment, during deployment and after homecoming. The [Deployment Support Handbook](#) contains information and resources to help Sailors and their family members successfully navigate the challenges of deployment.

Exceptional Family Member Program (EFMP): The FFSC is the I&R channel for EFM services and resources.

Family Advocacy Program (FAP): FAP provides clinical assessment, treatment and services for military members and their families involved in allegations of domestic abuse and child abuse. FAP clinical providers strive to ensure victims' safety and well-being and offender accountability.

Family Emergency Response: The Navy Family Accountability and Assessment System (NFAAS) is used by the Navy after a disaster or other event to help the Navy locate and assess the needs of affected families.

Family Employment Readiness Program (FERP): Offers military family members no-cost assistance with the job search process. Workshops and individual consultations are available for résumé writing, interviewing, career planning and more.

Life Skills: Provides extra support and training on couples' communication, stress and anger management, suicide awareness, time management, and marriage and parenting classes.

New Parent Support (NPS) Program: Offers voluntary prenatal and postpartum education and support services. The Navy's NPS program is an early intervention home visitation program designed to promote healthy family functioning, child development and positive parent-child interactions, as well as to provide advocacy and referral to other services.

Ombudsman Program: Provides a communication link between commands and family members. The ombudsman coordinator is an FFSC staff member who works with ombudsmen to share information and resources with service members and their families. Reserve ombudsmen have a Region RCC Warrior and Family Support Specialist who will provide assistance; they may also access the services of the FFSC Ombudsman Coordinator.

Personal Financial Management Program: The FFSC's Personal Financial Management program addresses the financial education needs of Sailors and their families. Information about financial planning, consumer awareness, checkbook management, and using credit wisely are available through the Command Financial Specialist (CFS) and the FFSC financial counselor.

Relocation Assistance Program (RAP): Helps service members prepare for a permanent change of station (PCS) move with individual consultations, written materials, Internet and audio-visual resources, and workshops such as Smooth Move and Overseas Transfer. FFSCs may have lending lockers with basic household goods available for use at no charge or for a nominal cleaning fee.

Sexual Assault Prevention and Response (SAPR) Program: Provides a comprehensive, standardized, victim-sensitive system to prevent and respond to sexual assault Navywide through awareness, education, victim advocacy and data collection.

Transition Assistance Program: Assists service members and their spouses as they prepare to transition from military to civilian employment. Transition assistance consists of four parts:

- ★ Pre-separation counseling.
- ★ Transition GPS. A five-day workshop co-sponsored by the Department of Labor, the Department of Defense and the Department of Veterans Affairs. Transition GPS provides information about veterans benefits, medical, retirement pay and other benefits and services. Information about job searches, résumé writing, interviewing and networking is also provided. Spouses are welcome to attend on a space-available basis.
- ★ Career tracks. Additional two-day workshops that address specific areas of interest to transitioning service members: Accessing Higher Education, Career Technical Training and Entrepreneurship.
- ★ Capstone. The wrap-up for Transition GPS. Capstone provides all transitioning service members an opportunity to review their transition plan and connect with community partners that offer transition support services.

You are encouraged to schedule an orientation tour of the FFSC to meet your ombudsman coordinator and the FFSC staff and familiarize yourself with the local FFSC's programs and services.

NOTE: Other services have similar resources to FFSC, such as the Army Community Service (ACS) and Airman and Family Readiness Center (A&FRC).



MILITARY ONESOURCE www.militaryonesource.mil

Military OneSource is a support service sponsored by the DoD that provides free phone consultation, counseling referrals and online access to military members and their families. The website provides information and resources about personal and professional topics.

Military OneSource offers information and services targeted to military families. Their website is organized into the following categories:

- ★ Family & Relationships.
- ★ Financial & Legal.
- ★ Health & Wellness.
- ★ Education & Employment.
- ★ On & Off Base Living.
- ★ Deployment & Transition.

Military OneSource has several useful features:

- ★ Confidential non-medical counseling services 24 hours a day by telephone and online.
- ★ A secure website featuring articles and webinars on a wide range of topics helpful for military members and their families. The website is available anytime.

- ★ The staff will research a topic and send results.
- ★ Referrals for private counseling sessions and legal consultations are available.
- ★ There are separate numbers for TTY/TDD service and to reach Spanish-speaking consultants. Simultaneous translation is available, honoring most foreign language preferences.

To talk with a Military OneSource consultant, phone:

Toll-free: 1-800-342-9647

International Collect Calls/Calls from Overseas: 703-253-7599

En Español llame al: 1- 800-342-9647

TTY/TDD: Dial 711 and give the toll-free number 800-342-9647

Voice over Internet Protocol (VoIP): 1-800-342-9647



NCIS NAVAL CRIMINAL INVESTIGATIVE SERVICE (NCIS) www.ncis.navy.mil

- ★ NCIS is the federal law enforcement agency charged with conducting investigations of felony-level offenses affecting the Navy and Marine Corps. NCIS is comprised of about 2,000 personnel in more than 40 countries around the globe. The organization is about 90 percent civilian, and its cadre of federal agents – about half its total personnel – is 98 percent civilian.
- ★ NCIS performs investigations and operations aimed at identifying and neutralizing:
 - ★ Foreign intelligence.
 - ★ International terrorists.
 - ★ Cyber threats to the Department of the Navy.

In addition, it provides warning of threats and specialized defensive force protection support to U.S. naval forces around the world.

Types of crimes investigated by NCIS include:

- ★ Rape.
- ★ Child physical and sexual abuse.
- ★ Burglary and robbery.
- ★ Theft of government and personal property.
- ★ Homicide.
- ★ Any non-combat death involving a naval service member where the cause of death cannot be attributed to disease or natural causes.



NAVAL SERVICES FAMILYLINE www.nsfamilyline.org

Naval Services FamilyLine is a volunteer, nonprofit organization dedicated to empowering sea service families to meet the challenges of military lifestyle through information and resource assistance. Established in 1965 by and for Navy families, FamilyLine also supports Marine Corps and Coast Guard families.

Naval Services FamilyLine distributes the following publications:

- ★ *Sea Legs: A Handbook for Navy Life and Service* provides information about life in the Navy, including benefits, services, deployment and military terminology.
- ★ *Social Customs and Traditions of the Sea Services* acquaints the spouse with some of the social customs, traditions and organizations that are part of the sea services community.
- ★ *Guidelines for the Spouses of Commanding and Executive Officers* contains information and helpful suggestions to assist the spouse of new COs or XO.
- ★ *Guidelines for the Spouses of Master Chiefs or Chiefs of the Boat* offers helpful hints and information for spouses of new CMCs and COBs.
- ★ *Guidelines for the Spouses of Chief Petty Officers* was developed by senior enlisted spouses. It offers helpful hints and information for spouses of new CPOs.
- ★ *Are You Ready? Guidelines for Navy Family Emergency Preparedness* provides an explanation of entitlements, allowances and benefits and explains the mobilization process. A variety of resources are offered, including checklists to assist you in making sure all of your important documents are in order.
- ★ *Guidelines for Navy Reserve Families* provides information to assist Reserve members and their families prepare for military life.

FamilyLine sponsors COMPASS, an orientation program in which spouses mentor spouses on the Navy lifestyle. Volunteers answer telephone calls and email to provide information and referral services to sea service families.

Contact FamilyLine at: Toll-Free: 1-877-673-7773
 Washington, D.C.: 202-433-2333
 DSN: 288-2333
 Fax: 202-433-4622
 Email: info@nsfamilyline.org



NAVY GOLD STAR PROGRAM www.navygoldstar.com

The Navy Gold Star Program (NGS) was established to provide support to family members of Sailors who pass while on active duty. Navy Gold Star support coordinators provide dedicated outreach and support for as long as Survivors desire. NGS coordinators are located all over the United States and are ready to assist Survivors.

Eligible Survivors include:

- ★ Widow/widower.
- ★ Parents: Includes mother, father, stepmother, stepfather, mother through adoption, father through adoption and foster parents who stood in loco parentis.
- ★ Children: Includes stepchildren and children through adoption.
- ★ Next of kin: Only includes brothers, sisters, half brothers and half sisters.



NAVY HOUSING www.cnmc.navy.mil/ffr/housing.html/onestop

The mission of the Navy Housing program is to help service members find suitable, affordable and safe housing wherever they live around the world.

Navy Housing Service Centers (HSC) are located at most installations. HSC staff members are experts in providing housing services, locating homes, helping determine the needs of Navy families and matching priorities with the choices available.



NAVY-MARINE CORPS RELIEF SOCIETY www.nmcrs.org

The Navy-Marine Corps Relief Society (NMCRS) is a private, nonprofit organization staffed primarily by volunteers. NMCRS provides financial counseling and education and emergency financial assistance. There are no fees for services. Those eligible for services include:

- ★ Active-duty or retired Sailors and Marines.
- ★ Eligible family members with a military ID card.
- ★ Surviving spouses.
- ★ Reservists on active duty of 30 days or more.

NMCRS services include:

Interest-free loans or grants. Loans or grants are available to deal with emergency needs, such as:

- ★ Food, rent/mortgage, utilities and essential home repairs.
- ★ Establishing a new residence, including security and utility deposits.
- ★ Car expenses, such as repairs and insurance deductibles.
- ★ Medical expenses.
- ★ Military pay shortage/delayed entitlements.
- ★ Funeral expenses.

Quick Assist Loans. Emergency no-interest loans up to \$500 can be provided for eligible Navy personnel and family members. No appointment is necessary. Applicants must complete the [Quick Assist Loan Application](#) and bring it to the nearest NMCRS office.

Repayment. When the service member can afford to repay, financial assistance is provided as an interest-free loan. Loans are normally repaid by allotment. If repayment would cause a hardship, assistance may be provided as a grant, or a combination of grant and interest-free loan. NMCRS does not assist with the purchase of non-essentials, nor does it supplement the income of those who live beyond their means.

Education loans and grants. Assistance is provided solely on the basis of the applicant's financial need, in accordance with policies established by the NMCRS board of directors.

All applicants must have at least a 2.0 grade-point average (on a 4.0 scale).

Money management services. NMCRS offers one-on-one consultation on developing a budget and classes on topics such as budgeting and ways to save.

Emergency food. Assistance may be available via food lockers or vouchers to the commissary or local grocery store.

Layettes. “Seabags” with more than \$100 worth of baby items are available. Check with the local NMCRS to see whether there are income requirements or whether recipients are asked to participate in a Budget for Baby workshop.

Thrift shops. Available at many installations, NMCRS thrift shops resell usable clothing, furniture, household goods and uniforms at nominal cost. Thrift shops are managed by NMCRS volunteers.

Visiting nurse services. Visits by NMCRS nurses are available by request at some locations to check on a newborn, change bandages or provide other medical advice and assistance to the homebound.



PERSONNEL SUPPORT DETACHMENT www.public.navy.mil/bupers-npc/psd

Ombudsmen frequently receive questions about the Defense Enrollment Eligibility Reporting System (DEERS) and identification cards. The Navy’s Personnel Support Detachment (PSD) is the agency that provides administrative, personnel, pay and transportation support, including:

- ★ DEERS support.
- ★ Family and service member identification cards.
- ★ Transportation services.
- ★ Travel claim processing.
- ★ Transition processing.



REGION LEGAL SERVICE OFFICES www.jag.navy.mil/legal_services.htm

The Navy legal assistance program provides free assistance to uniformed service members, their family members and other eligible clients for some personal legal matters.

Services offered are subject to the availability of staff legal resources. Legal assistance is provided at all Region Legal Service Offices (RLSO) and their detachments and branch offices. Attorneys counsel clients on numerous topics but will not advise on military justice issues or actions against the U.S. government. Examples of information provided include:

- ★ Adoption.
- ★ Advance medical directives.
- ★ Domestic relations.
- ★ Immigration and naturalization.
- ★ Consumer issues.
- ★ Landlord-tenant issues.
- ★ Servicemembers Civil Relief Act.
- ★ Notary service.
- ★ Powers of attorney.
- ★ Wills.



SCHOOL LIAISON PROGRAM www.dodea.edu/Partnership/schoolLiaisonOfficers.cfm

School liaison officers (SLOs) can help parents connect to new schools when making a PCS move. SLOs work with local school districts to ensure school personnel are aware of the stress military families face due to frequent moves and extended deployments. Parents, school personnel and community members with questions about school-age military child education are encouraged to contact their local SLO.

The goals of the School Liaison Program are to:

- ★ Identify barriers to academic success and develop solutions.
- ★ Promote parental involvement and educate local communities and schools regarding the needs of military children.
- ★ Develop and coordinate partnerships in education.
- ★ Provide parents with the tools they need to overcome obstacles to education that stem from the military lifestyle.

SLOs:

- ★ Serve as the primary point of contact for school-related matters.
- ★ Represent, inform and assist commands.
- ★ Assist military families with school issues.
- ★ Coordinate with local school systems.
- ★ Forge partnerships between the military and schools.

SLOs prepare students, parents, schools and Navy leaders to respond to PCS and deployment issues that affect school-age children. They help Navy families be the best advocates for their child's education. They also will connect Navy Child and Youth education services' Youth Sponsorship Program to school districts serving Navy families.

SLOs provide seven core services:

- ★ School Transition Services/PCS Cycle Support.
- ★ Deployment Support.
- ★ Special Education System Navigation.
- ★ Installation, School and Community Communications.

- ★ Partnerships in Education.
- ★ Homeschool Linkage, Support.
- ★ Postsecondary Preparation.

A link to the Navy's SLO directory can be found at www.dodea.edu/partnership.



TRICARE www.TRICARE.mil

TRICARE is the health care program for active-duty military, active-duty service families, retirees and their families, survivors and other beneficiaries. Reservists and National Guardsmen are eligible for TRICARE coverage when they are on active duty, and pre- and post-mobilization. TRICARE is a fully integrated system that brings together the health care resources of the Army, Navy, Air Force and Coast Guard. TRICARE supplements these services with civilian health care professionals to provide better access and high-quality service while maintaining the ability to support military operations.

The four most common TRICARE programs:

- ★ TRICARE Prime.
- ★ TRICARE Standard.
- ★ TRICARE Extra.
- ★ TRICARE Reserve Select.

TRICARE provides a dental benefit, a pharmacy program and TRICARE For Life for most Medicare-eligible uniformed service retirees. There is also an Extended Care Health Option (ECHO) that can help with some of the costs associated with specialized medical equipment and services. Mental health services are also available. Each TRICARE program has its own eligibility and enrollment requirements. Individuals must be registered in DEERS to be eligible for any TRICARE benefit. Enrollment for TRICARE coverage is subject to location, eligibility category and the specific program requirements. Costs and enrollment fees differ by program.

Working spouses are eligible for TRICARE coverage even if they have other health insurance through their employers or a private insurance program. By law, TRICARE pays after all other health insurance. This means the other health insurance processes the claim first. Then, the claim is filed with TRICARE. Spouses should inform their health care provider so that benefits can be coordinated.

The TRICARE Customer Service Community (CSC) includes beneficiary counseling and assistance coordinators (BCAC) and debt collection assistance officers (DCAO) who are available at the local TRICARE service center or medical treatment facility to help families with questions about services. To locate the TRICARE CSC in your area, go to the TRICARE CSC directory at http://www.tricare.mil/bcacdcao?sc_database=web.

LOCAL RESOURCES

Resources in my area:

| Name | Type of Service | Telephone Number | Website |
|------|-----------------|------------------|---------|
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SCENARIOS: RECOMMENDING THE RIGHT RESOURCES

The following scenarios give you an opportunity to recommend resources for some common problems faced by military families.

Scenario 1

An inbound Sailor and her family are traveling across the country for a permanent change of station (PCS) move to your command. They had a car accident in Kansas. The car is in the shop and they need \$500 for their insurance deductible but only have \$200 in savings. Everyone is OK, but they are stranded.

Answer: _____

Scenario 2

It is 1 p.m. on a weekday and you receive a call from a command spouse asking what to do because her electricity will be turned off at 5 p.m. She has a 2-month-old child in the house and health issues of her own that require the use of electricity.

Answer: _____

Scenario 3

A widowed spouse of a service member tells you all of her children are now in school and she would like to get a job.

Answer: _____

Scenario 4

A stay-at-home dad contacts you about options for child care. He shares that the stress of having a deployed spouse is getting to him and he needs a break from his newborn twins once in a while.

Answer: _____

Scenario 5

A new spouse calls to ask if there are any resources to help her learn about Navy life.

Answer: _____

Scenario 6

A service member calls you with questions about a bill received for his child's medical care.

Answer: _____

Scenario 7

A mother of a 2-year-old thinks her child might be displaying signs of autism.

Answer: _____

Scenario 8

A command couple is having marital problems after a deployment and would like to get help.

Answer: _____

Scenario 9

A new Navy spouse has questions about her Sailor's pay, but the command is deployed.

Answer: _____

Scenario 10

A young couple relocating to your command is on a long waitlist for military housing. While they can afford an apartment and utilities, they just cannot come up with the required deposits.

Answer: _____

Scenario 11

An anonymous caller contacts you and tells you he believes his neighbor, a Sailor at your command, may be involved in child pornography.

Answer: _____

Scenario 12

A service member calls and mentions that their oldest child just turned 10 and is eager to get an ID card.

Answer: _____

Scenario 13

An activated Reservist contacts you with questions about what protections are offered to Reservists under the Servicemembers Civil Relief Act.

Answer: _____

RESOURCE MANAGEMENT

As an ombudsman, you need to be familiar with commonly used resources within your community. This enables you to provide basic information and referrals quickly and efficiently.

You can learn about local resources by:

- ★ Talking with fellow ombudsmen.
- ★ Networking.
- ★ Attending the local ombudsman assembly and other relevant meetings.
- ★ Taking advanced training.
- ★ Visiting the FFSC.
- ★ Contacting Military OneSource.
- ★ Searching the Internet.
- ★ Checking social media sites.
- ★ Contacting the local Chamber of Commerce or United Way.
- ★ Public service announcements on television and radio.

- ★ Reviewing the local telephone book.
- ★ Reading local publications (base newspapers, community newsletters, etc.).

When gathering information about an organization, ask:

- ★ What services are offered?
- ★ Is it a nonprofit organization?
- ★ How much do the services cost? Note: Ombudsmen should never refer families to organizations that charge fees; it is important to ask this question to ensure there is no cost for the services provided.
- ★ Are services confidential?
- ★ Are the staff members professional, licensed or certified?
- ★ Are appointments available in a timely manner?
- ★ Does the agency have experience working with military personnel and their families?
- ★ Does it have a good record with the Better Business Bureau?

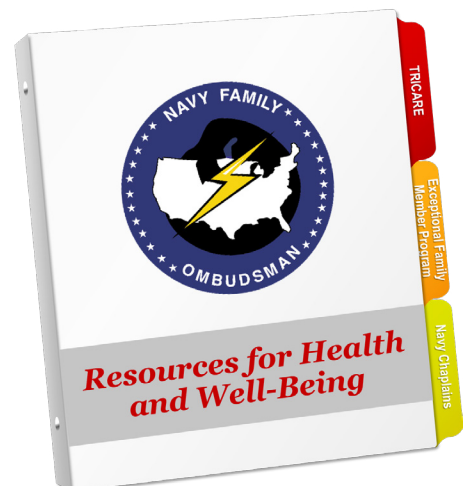
Although it may seem daunting at first, becoming familiar with resources is relatively easy. There will be resources you refer to so frequently that you will have the telephone number or website memorized.

Keep resources current by reviewing them at least every six months. When you make a referral, ask the caller to contact you if any of the information provided is no longer current. In addition, you should follow up to ensure callers got the information they needed. Follow-up provides you an opportunity to ensure resource accuracy, demonstrates that you care about the caller and offers an opportunity to provide additional information, if needed.

RESOURCE ORGANIZATION

To dispense information, you must have it or know where to get it. Most ombudsmen maintain some type of resource file. Some choose to organize resources alphabetically and others group them into categories, such as:

- ★ Child care.
- ★ Resources for the disabled.
- ★ Housing.
- ★ Medical.
- ★ Employment.
- ★ Domestic abuse.
- ★ Recreation.
- ★ Food.
- ★ Money.



Everyone has a preferred system. Examples of systems ombudsmen use include:

- ★ Loose-leaf notebook.
- ★ File folders.
- ★ Computer listings.
- ★ Business cards.
- ★ Bulletin boards.

Whatever system you choose, be sure to keep it up to date. In some areas there are so many resources it would be impossible to stay abreast of all of them. Stay current with the most-referred-to organizations and have the name and number of FFSC and Military OneSource handy. Callers can be referred directly to these resources, or you can contact the FFSC and get back to the caller. When possible, pay personal visits to agencies or attend briefings about the organizations you refer to most often.

SUMMARY

Customer service is an essential element of your role as an ombudsman. Using good customer service skills will help you develop positive working relationships with the command and family members.

You can meet the needs of command family members by learning about the many resources available to help them cope with the challenges of the military lifestyle. Providing information about these resources can be one of the most valuable services you provide to those in need.

NOTES:

OMBUDSMAN BASIC TRAINING

SCENARIOS: RECOMMENDING THE RIGHT RESOURCES ANSWER KEY

The following scenarios give you an opportunity to recommend resources for some common problems faced by military families.

Scenario 1

An inbound Sailor and her family are traveling across the country for a permanent change of station (PCS) move to your command. They had a car accident in Kansas. The car is in the shop and they need \$500 for their insurance deductible but only have \$200 in savings. Everyone is OK, but they are stranded.

Answer: American Red Cross or, if close to a military installation, call or visit the Family Center and request financial assistance. The military aid societies (NMCRS, Air Force Aid Society [AFAS], Army Emergency Relief [AER]) can provide emergency services to any service member when they are away from home.

Scenario 2

It is 1 p.m. on a weekday and you receive a call from a command spouse asking what to do because her electricity will be turned off at 5 p.m. She has a 2-month-old child in the house and health issues of her own that require the use of electricity.

Answer: NMCRS may be able to provide her with a Quick Assist Loan (QAL) to get the current bill paid; American Red Cross may be able to intervene with the utility company; 2-1-1 may also be able to refer them to local resources that sponsor programs. Once the immediate crisis is solved, encourage her to call the FFSC PFM or Military OneSource for follow-on financial counseling.

Scenario 3

A widowed spouse of a service member tells you all of her children are now in school and she would like to get a job.

Answer: FFSC/FERP; Navy Gold Star Program; Military OneSource/Spouse Education and Career Opportunities (SECO).

Scenario 4

A stay-at-home dad contacts you about options for child care. He shares that the stress of having a deployed spouse is getting to him and he needs a break from his newborn twins once in a while.

Answer: 2-1-1, Child and Youth Programs and Child Care Aware for child care resources; FFSC/clinical counselor and New Parent Support; FFSC and Red Cross for deployment support.

Scenario 5

A new spouse calls to ask if there are any resources to help her learn about Navy life.

Answer: FFSC; Naval Services FamilyLine (Publications: *Sea Legs: A Handbook for Navy Life and Service and Social Customs and Traditions of the Sea Services.*).

Scenario 6

A service member calls you with questions about a bill received for his child's medical care.

Answer: TRICARE.

Scenario 7

A mother of a 2-year-old thinks her child might be displaying signs of autism.

Answer: FFSC/EFMP; primary care manager under TRICARE.

Scenario 8

A command couple is having marital problems after a deployment and would like to get help.

Answer: FFSC/clinical counselor; TRICARE; chaplain; Military OneSource.

Scenario 9

A new Navy spouse has questions about her Sailor's pay, but the command is deployed.

Answer: FFSC/financial educator; DFAS.

Scenario 10

A young couple relocating to your command is on a long waitlist for military housing. While they can afford an apartment and utilities, they just cannot come up with the required deposits.

Answer: NMCRS; Navy Housing Office; credit unions.

Scenario 11

An anonymous caller contacts you and tells you he believes his neighbor, a Sailor at your command, may be involved in child pornography.

Answer: NCIS; local authorities (a phone call to the ombudsman point of contact also would be warranted).

Scenario 12

A service member calls and mentions that their oldest child just turned 10 and is eager to get an ID card.

Answer: PSD.

Scenario 13

An activated Reservist contacts you with questions about what protections are offered to Reservists under the Servicemembers Civil Relief Act.

Answer: FFSC/financial educator; Region Legal Service Offices.



CHAPTER 7

CRISIS CALLS AND DISASTERS

INTRODUCTION

Although most of the calls you will receive will be routine, you need to be prepared to handle individual crises. This chapter helps you prepare to respond to families experiencing:

- ★ Domestic abuse.
- ★ Child abuse.
- ★ Sexual assault.
- ★ Suicide.
- ★ The death of a loved one.

This chapter also discusses dealing with disasters, including:

- ★ Preparedness.
- ★ Possible ombudsman disaster assistance roles.
- ★ Disaster assistance organizations.
- ★ Dealing with the media.

KEY TERMS

CACO: Casualty Assistance Calls Officer

Cycle of Violence: Explains the pattern of abuse

Domestic Abuse: May be physical, emotional, economic, sexual, or neglect (for example)

FAP: Family Advocacy Program

FAR: Family Advocacy Representative

NFAAS: Navy Family Accountability and Assessment System

PAO: Public Affairs Officer

SARC: Sexual Assault Response Coordinator

7.1 CRISIS

You may have little experience in dealing with crisis calls. As a result, you may feel anxious about how to handle them. Remember the importance of your role as a provider of information and referral services.

OMBUDSMAN ROLE

Your role as ombudsman during a crisis is to:

- ★ Recognize the crisis.
- ★ Refer to the appropriate resources for assistance.
- ★ Report crisis incidents as required by law, military directives and your commanding officer (CO).

7.2 DOMESTIC ABUSE

Domestic abuse can be identified as:

- ★ Physical abuse.
- ★ Emotional abuse.
- ★ Economic control.
- ★ Interference with personal liberty.

Often victims do not report the first instance of abuse. There are many reasons why victims do not report abuse and remain in abusive relationships. Victims may believe that the abuse will stop or that they can stop the abuse by adjusting their own behavior.

Other reasons for staying may include:

- ★ Emotional or financial dependency.
- ★ A lack of support outside the relationship.
- ★ Religious beliefs.
- ★ The fear that the offender will “get in trouble.”
- ★ Fear of retaliation.
- ★ Belief that emotional and physical violence happen in all relationships.

DEFINITION

Domestic abuse can happen to anyone regardless of their gender, sexual orientation, religion, race, ethnicity or socio-economic status. Domestic abuse is defined by the Department of Defense as:

- ★ Domestic violence, or
- ★ A pattern of behavior resulting in emotional/psychological abuse, economic control and/or interference with personal liberty when such violence or abuse is directed toward a person who is:
 - A current or former spouse;
 - A person with whom the abuser shares a child in common; or
 - A current or former intimate partner with whom the abuser shares or has shared a common domicile.

Domestic violence is:

- ★ An offense under the U.S. Code or the Uniform Code of Military Justice that involves the use, attempted use or threatened use of force or violence.
- ★ A violation of a lawful order issued for the protection of a person who is:
 - A current or former spouse;
 - A person with whom the abuser shares a child in common; or
 - A current or former intimate partner with whom the abuser shares or has shared a common domicile.

RECOGNIZING DOMESTIC ABUSE

There are many different forms of abuse, and the definition of abusive actions can vary depending on the agency making the determination. The DoD has adopted a universal set of criteria and definitions based on definitions used in all 50 States and the District of Columbia. These criteria include four types of abuse — physical, sexual, emotional and neglect — which apply to adults and children.

Physical

Physical abuse can be mild to severe and can culminate in death. Females are more often the victims of severe physical violence. While males can also suffer physical violence, women more often use emotional abuse tactics against their partner. Physical abuse includes, but is not limited to, at least one of the following:

- ★ Hitting with an open hand or slapping.
- ★ Pushing or shoving.
- ★ Grabbing or yanking limbs or body.
- ★ Poking.
- ★ Hair-pulling.
- ★ Scratching.
- ★ Pinching.
- ★ Restraining.
- ★ Shaking.
- ★ Throwing.
- ★ Biting.
- ★ Kicking.
- ★ Hitting with a fist.
- ★ Hitting with a stick, strap, belt or other object.
- ★ Scalding or burning.
- ★ Poisoning.
- ★ Stabbing.
- ★ Applying force to the throat.
- ★ Strangling or cutting off the air supply.
- ★ Holding under water.
- ★ Using a weapon.

Emotional

Emotional abuse often precedes physical abuse. While a single incident can qualify as an act of emotional abuse, this type of abuse is most often characterized by a pattern of behaviors that occurs over time. Emotional abuse includes, but is not limited to, one or more of the following:

- ★ Berating, disparaging, degrading or humiliating the victim (or other similar behavior).
- ★ Interrogating the victim.
- ★ Restricting the victim's ability to come and go freely.
- ★ Obstructing the victim's access to assistance (including, but not limited to, law enforcement, legal, protective or medical resources, including the FFSC Family Advocacy Program [FAP], a victim advocate, military command or domestic violence shelter).
- ★ Threatening the victim (including, but not limited to, indicating/implying future physical harm or sexual assault).
- ★ Harming, or indicating that the alleged abuser will harm, people/things the victim cares about, such as children, self, other people, pets and property.
- ★ Restricting the victim's access to or use of economic resources (when unwarranted).
- ★ Restricting the victim's access to or use of military services (including, but not limited to, taking away the dependent's ID).
- ★ Isolating the victim from family, friends or social support resources.
- ★ Stalking the victim.
- ★ Trying to make victim think that he or she is mentally ill (or make others think that the partner is mentally ill).
- ★ Interfering with the victim's adaptation to American culture or the military subculture.

Sexual

Legal marriage does not rule out the occurrence of sexual abuse. For many years, it was believed that rape could only occur between acquaintances or strangers. Sexual abuse in marital and intimate partner relationships, while reported less frequently, does exist and should be reported to FAP. Sexual abuse includes, but is not limited to:

- ★ The use of physical force to compel the partner to engage in a sexual act or sexual contact against his or her will.
- ★ The use of a physically aggressive act or the use of one's body, size or strength, or an emotionally aggressive act to coerce the partner to engage in a sexual act or sexual contact.
- ★ A sexual act or sexual contact involving a partner who is unable to provide consent. The victim is unable to understand the nature or conditions of the act, to decline participation, or to communicate unwillingness to engage in the sexual act because of illness, disability, being asleep, being under the influence of alcohol or other drugs, or other reason.

Neglect

Neglect is a type of domestic abuse in which the alleged abuser withholds necessary care or assistance for a spouse who is incapable of self-care physically, psychologically or culturally, although the caregiver is financially able to do so or has been offered other means to do so. All of the following must be present for the criteria to be met:

The alleged abuser withholds, or withholds a spouse's access to:

- ★ Medical, mental health or dental care.
- ★ Shelter.
- ★ Appropriate nourishment.
- ★ Clothing.
- ★ Hygiene.

RISK FACTORS

Individuals who abuse their spouse or partner choose to be abusive or use violence. The following are some risk factors for domestic abuse:

- ★ Cultural tolerance for violence against intimate partners.
- ★ Rigid beliefs about gender roles.
- ★ Access to firearms.
- ★ Childhood experiences of witnessing family violence.
- ★ Childhood abuse.
- ★ Jealousy, possessiveness and fear of losing the relationship.
- ★ Poor communication, anger management, and coping skills.
- ★ Financial problems.
- ★ Deployments and reunions (can heighten the risk if other risk factors exist).
- ★ Marital conflict and instability.
- ★ Custody battles over children.
- ★ Desire for power and control in relationships.
- ★ Anger and hostility toward partner.

Spousal/partner abuse often occurs in conjunction with alcohol or drug abuse, but violence is not caused by substance use. Eliminating substance abuse does not eliminate the abuse.

One of the most dangerous and lethal times for a victim is when the victim decides to leave the relationship and/or receive child custody. This is when most homicides occur, and the victim should be referred to a victim advocate to create a safety plan.

CYCLE OF VIOLENCE

The cycle of violence explains the dynamics of how domestic abuse often, but not in all cases, becomes a pattern. It encompasses the following three stages:

Stage 1: Tension Building

- ★ Stress builds.
- ★ Victim senses danger.
- ★ Minor conflicts may occur.
- ★ Victim hopes that things will get better.

Stage 2: Violent Episode

- ★ Abuser blames victim for the abuse.
- ★ Victim may escape and return after the abuse ends.
- ★ Serious injury or death may occur.

Stage 3: Honeymoon Phase

- ★ May last days, months or years.
- ★ Family in shock.
- ★ Abuser feels remorseful, ashamed and guilty.
- ★ Abuser seeks forgiveness and may be kind and loving and may promise to get help.
- ★ To cope, victim denies and minimizes the abuse and hopes for change.



REPORTING DOMESTIC ABUSE

Physical and sexual assaults that occur within the family merit the same concern and level of intervention as any assault between unrelated persons. All allegations of domestic abuse, regardless of type, should be reported to the FFSC Family Advocacy Program (FAP) counselor or representative (FAR) and the commanding officer (CO) or designee. Inform the family member of the importance of reporting cases of domestic abuse and your mandated reporting requirements. You should consider domestic abuse to have been alleged if the spouse discloses to you an incident of abuse, a third party (e.g., a child) discloses to you that they witnessed domestic abuse or you have firsthand knowledge of an incident of domestic abuse. The validity of any allegations should be determined by trained professionals at FAP.

If you suspect domestic abuse, advise the individual that support is available and provide information about available FAP or community services. It is important to get the telephone number and location of the caller in order to notify law enforcement in case the connection is lost. If you believe the life, health or safety of an individual is in imminent danger, contact 911 or local emergency services. You are required to report the situation immediately to FAP and the appropriate command. Safety is the ultimate concern for anyone involved in an abusive situation. If there is no FFSC near your command, report the domestic abuse to the command and the nearest FAP, and provide local resource information. In cases where the victim is not near a Navy installation, you may report to a FAP at another military branch closer to the victim.

In cases where the service member and family member reside apart, the accountable FAP is the FAP responsible for the service member. FAP case managers will arrange for services near a victim. Services may be provided by a FAP that is in closer proximity to the victim or a civilian agency.

For education purposes, ombudsmen should know the reporting options for victims of domestic abuse. Adult victims of domestic abuse have two options:

- ★ **Restricted Reporting:** Allows a victim to seek medical attention, counseling or other human services by reporting only to a victim advocate, a FAP counselor, a FAP supervisor/FAR or a health care professional without requiring that notice be provided to the alleged offender's commander or to a criminal investigative organization. Restricted Reporting is intended to give adult victims additional time, while benefiting from receiving relevant information and support, to make more informed decisions about reporting the domestic abuse incident to the appropriate commander. There are some limitations to Restricted Reporting when children are involved in the incident or if there is imminent danger.
- ★ **Unrestricted Reporting:** Victims of domestic abuse who want to pursue an official command or criminal investigation of an incident or who would like to request a military protective order should use current reporting channels, such as the chain of command, FAP or law enforcement. Victim advocacy services and FAP clinical services will be offered to the victim and, at the victim's request, any forensic medical examination deemed appropriate.

Any time a spouse tells an ombudsman about domestic abuse, the ombudsman is required under the OPNAVINST 1750.1 series to report the incident, because an ombudsman cannot offer the Restricted Reporting option.

NOTE: Ombudsmen should keep family members informed of the two reporting options — Restricted and Unrestricted — so the victim can make an informed decision about talking to the ombudsman.

SCENARIO: IS IT ABUSE?

After a Family Readiness Group meeting, one of the spouses in your command asks to speak with you in private. You find a quiet adjoining room. She seems uncomfortable and is having difficulty getting started. You try to put her at ease. After a few minutes, she discloses that she is having some marital problems and would like to know where she can go to get help. Before you can interject, she goes on to say that she and her husband had an argument over the weekend that got loud and out of hand.

Is this a reportable situation? If so, why? If not, why not?

What do you do now?

What information can you provide about available help?

Continuing on, the spouse adds that her oldest child, who was home at the time, became distraught when the husband grabbed the spouse and threatened to hit her if she did not stop nagging him. While relating this, she demonstrates by pulling back her closed fist.

Is this a reportable situation? If so, why? If not, why not?

What do you do now?

What should you tell the spouse?

7.3 CHILD ABUSE

Child abuse takes many forms and includes physical abuse, emotional abuse, sexual abuse and neglect. Children are the most vulnerable abuse victims and the most likely to suffer serious physical injury. Offenders can be biological parents, stepparents, neighbors, friends or other adults entrusted to care for the child.

DEFINITION

Child abuse is defined as the physical or mental injury, sexual abuse or exploitation, or negligent treatment of a child. It does not include discipline administered by a parent or legal guardian to their child, provided it is reasonable in manner and moderate in degree and otherwise does not constitute cruelty.

Per DoD Instruction 6400.1, *Family Advocacy Program*, a child is defined as, “An unmarried person under 18 years of age for whom a parent, guardian, foster parent, caregiver, employee of a residential facility or any staff person providing out of home care is legally responsible. The term means a biological child, adopted child, stepchild, foster child or any ward. The term also includes a sponsor’s family member (except the sponsor’s spouse) of any age who is incapable of self-support because of a mental or physical incapacity, and for whom treatment in a DoD medical treatment program is authorized.”

If the adult in question meets this definition, then they can be considered a child in a FAP case.

RECOGNIZING CHILD ABUSE

The earlier child abuse is caught, the better the chance of recovery and appropriate treatment for the child. Child abuse is not always obvious. By learning some of the common warning signs of child abuse and neglect, you can catch the problem as early as possible and get both the child and the abuser the help they need.

Warning Signs

Warning signs may include, but are not limited to:

- ★ Excessive withdrawal, fearfulness or anxiety about doing something wrong.
- ★ Showing extremes in behavior (extremely compliant or extremely demanding; extremely passive or extremely aggressive).
- ★ Frequent injuries or unexplained bruises, welts or cuts.

- ★ Lack of proper nutrition.
- ★ Chronically dirty or unbathed.
- ★ Wearing inappropriate clothing to conceal injuries, such as long-sleeved shirts on hot days.
- ★ Untreated illnesses and physical injuries.
- ★ Making strong efforts to avoid a specific person, without an obvious reason.
- ★ Displaying knowledge or interest in sexual acts inappropriate to his or her age, or seductive behavior.

REPORTING CHILD ABUSE/NEGLECT

When allegations of child abuse or neglect come to the attention of an ombudsman, FAP and the CO or point of contact (POC) must be notified. FAP will also inform the member's command and law enforcement officials, if necessary.

A child's safety and well-being are protected by law. All states and U.S. territories have mandatory child abuse/neglect reporting statutes. All Department of Navy personnel, as well as ombudsmen, must report any incident or suspected incident of child abuse involving persons eligible for FAP services to a counselor for the Navy or military FAP.

The threshold for reporting is low, in that even the suspicion of child abuse/neglect must be reported. Suspected child abuse incidents that do not involve individuals eligible for FAP services should be reported to the nearest local law enforcement authorities and state child protective services agency. Ombudsmen must inform the family member of the requirement to report domestic abuse.

When making a report, the following information is needed:

- ★ Names of those involved.
- ★ Type of abuse.
- ★ Information about the situation (e.g., description of abuse allegations, any visible or reported injuries, and/or victim's perceived current safety).
- ★ Contact information for the family, such as a name, address or command.

7.4 SEXUAL ASSAULT

You may be contacted by someone who has been the victim of a sexual assault. It is important for you to know how to respond to the victim and to be familiar with the resources available to assist.

DEFINITION

Sexual assault is defined as intentional sexual contact characterized by the use of force or a physical threat, abuse of authority, or when the victim does not or cannot consent.

Sexual assault includes:

- ★ Rape.
- ★ Nonconsensual sodomy.
- ★ Indecent assault.
- ★ Attempts to commit such acts.

All alleged sexual assaults are now one of the six “reportables” that must be reported to the command and the sexual assault response coordinator (SARC) per the OPNAVINST 1750.1 series. Ombudsmen are not authorized to accept Restricted Reports of alleged sexual assaults.

MYTHS AND FACTS

Indicate in the space provided whether the following statements are myths or facts.

1. A rapist is sexually driven. -----
2. Most victims are assaulted by strangers. -----
3. Most victims of sexual assault do not report it. -----
4. People who are sexually assaulted ask for it because of the way they dress, excessive drinking, being out late, and being alone. -----
5. It is impossible to sexually assault someone against their will. If they did not want to be assaulted, they could have fought or run away. -----
If there are no bruises or injuries, there was no assault.

In a sexual assault, the majority of the crime scene is the victim’s body. Therefore, if the victim chooses to report the crime and seek justice, they must make some decisions while they most likely are still in shock.

Most often the victim of a sexual assault is acquainted with their attacker. The attacker may be a friend, neighbor, co-worker or even their spouse (marital rape). This type of rape is called acquaintance rape. Other types of rape include stranger rape and gang/multiple-subject rape. There are many misperceptions about sexual assault. It is not the ombudsman’s job to determine whether an assault occurred but to be supportive and provide whatever assistance is necessary.

ASSISTING VICTIMS OF SEXUAL ASSAULT

When an ombudsman receives a call from a sexual assault victim, they can follow the PACT model as discussed in Chapter 6: Information and Referral. Some additional steps need to be taken. Unlike professional victim advocates who must first establish a relationship when working with a victim, ombudsmen are a step ahead in that the caller contacted them. Therefore, the caller already sees the ombudsman as someone who can help.

One of the most common things that those working with victims of sexual assault tell victims is that the assault is not their fault. No matter what a victim did before or during the assault, they did not cause or deserve the assault.

It will be important to link the caller with a sexual assault victim advocate (VA) as soon as possible. VAs are FFSC staff, rape crisis center staff, volunteers and active-duty personnel who have been trained to assist a sexual assault victim through the initial trauma and the ensuing investigative, medical and legal procedures associated with the crime.



Problem

If the caller identifies himself or herself as a recent victim of a sexual assault, ask:

- ★ What is your name (if unknown)?
- ★ Where are you now?
- ★ Are you safe?
- ★ If currently in danger: Can you get to a safe place? If the caller is in danger, get their location and call 911 or the police.
- ★ Do you need medical attention?

It is important to get as much identifying information as possible in case the telephone connection is interrupted or the police need to be contacted.



Assess

Inform the caller that sexual assault is a crime. As a victim of a crime, one has rights:

- ★ They can report the crime and make a statement, or not.
- ★ They can have a professional advocate, chaplain or friend with them during the police interview.
- ★ They can seek medical treatment, or not.
- ★ They can allow physical evidence to be recovered from their body, or not.
- ★ They can have a professional advocate, friend or family member with them during the medical exam.



Choose

Explore options by asking questions. Help an assault victim restore their power by encouraging them to make decisions. Strongly encourage them to at least accept a referral to a professional advocate. SARCs and VAs are available through FFSC, or VAs are available at a local rape crisis center (Find your local listing online.). These personnel will help the victim make informed decisions about receiving medical assistance and preserving evidence in the event one decides to proceed with legal action at a future time. The DoD has created the Safe Helpline to provide sexual assault support for the DoD community. Safe Helpline has a comprehensive database for all service installations and civilian resources. Visit the Safe Helpline website at <https://www.safehelpline.org> or call 1-877-995-5247.

Sexual assault is one of the most unreported crimes. Some victims seek help immediately, directly from the crime scene. Others may come forward after weeks, months or even years. But most do not ever report the crime.

Ask:

- ★ Do you have a friend or neighbor who can be with you?
- ★ Is there a family member you would like me to notify?
- ★ Do you need to go to the emergency room for medical treatment?
- ★ Do you want me to call the police, or do you have anyone there who can call?
- ★ Do you have children? If so, where are they now? Who can care for them for a while?



Try

Ombudsmen should close a call by agreeing to the actions to be taken by the caller and by the ombudsman. At a minimum, the ombudsman should get the caller to agree to either contact a VA or allow the ombudsman to contact a VA. The caller is most likely in shock and will need assistance once the reality of the assault is realized. Offer to contact the caller later in the day or the following day to demonstrate concern and to ensure contact with the advocate was made.

7.5 SUICIDE

You may get a call from a person who is so overwhelmed by their current situation that they are considering suicide and have called the ombudsman for help.

RECOGNIZING SUICIDE WARNING SIGNS

The phrase **IS PATH WARM** can help you remember the warning signs of suicide.

| | |
|----------------|--|
| I _____ | Thoughts of suicide are expressed. |
| S _____ | Increased or excessive alcohol or drug use. |
| P _____ | Feels no sense of purpose or meaning in life. |
| A _____ | Anxious; immense feeling of being overwhelmed. |
| T _____ | Feeling there is no way out of the situation. |
| H _____ | Lost hope in self, others, the future. |
| W _____ | From family, friends, usual activities. |
| A _____ | Rage or uncontrolled anger, seeks revenge. |
| R _____ | Risky behavior; no regard for consequences. |
| M _____ | Dramatic changes in mood; unstable mood. |

Other warning signs may include:

- ★ Talking about death or a preoccupation with death.
- ★ Having a history of suicide attempts.
- ★ Self-loathing or self-hatred.
- ★ Seeking out lethal means.
- ★ Having a plan for how to commit suicide.
- ★ Getting affairs in order (e.g., composing a will, giving things away, saying goodbye).

Emotional Changes

Emotional changes associated with risk for suicide include:

- ★ Overwhelming pain that threatens to exceed the person's ability to cope with it.
- ★ Hopelessness or the feeling that the pain will continue or get worse; things will never get better.
- ★ Powerlessness — the feeling that one's resources for reducing pain are exhausted.
- ★ Feelings of worthlessness, shame, guilt, self-hatred, that no one cares.
- ★ Person becomes sad, withdrawn, tired, apathetic, anxious, irritable or prone to angry outbursts.

Behavioral Changes

Behavioral changes associated with risk for suicide include:

- ★ Giving away possessions or making a will.
- ★ High-risk behaviors that may include speeding and reckless driving.
- ★ Explicit statements of suicidal ideation or feelings.
- ★ Self-inflicted injuries, such as cuts, burns or head banging.
- ★ Inappropriately saying goodbye.
- ★ A decline in performance at school, work or in other activities.
- ★ Social isolation or association with a group that has different moral standards than those of the family.
- ★ Declining interest in sex, friends or activities previously enjoyed.
- ★ Neglect of personal welfare, deteriorating physical appearance.
- ★ Alterations in either direction in sleeping or eating habits.

Conditions Associated with Increased Risk

Conditions associated with increased risk of suicide include:

- ★ Death or terminal illness of a relative or friend.
- ★ Divorce, separation or a broken relationship.

- ★ Loss of health.
- ★ Loss of job, home, money, status, self-esteem, personal security.
- ★ History of alcohol or drug abuse.

Depression that seems to quickly disappear for no apparent reason is cause for concern. The early stages of recovery from depression can be a high-risk period for suicide.

Difficult times include holidays, anniversaries and the first week after discharge from a hospital; just before and after diagnosis of a major illness; just before and during disciplinary proceedings.

HOW TO ASSIST INDIVIDUALS AT RISK FOR SUICIDE

Do not worry about using the right words if you get a call from a potentially suicidal person. A concerned tone of voice and knowledge of resources to help the caller are what is most important. An excellent resource is the Suicide Prevention Lifeline. Assistance is available 24/7 at 1-800-273-8255 or on the webpage <http://suicidpreventionlifeline.org/#>.

ACT

If you suspect someone is at risk for suicide, remember to ACT!

- A** _____ if someone is depressed and is thinking about suicide.
- C** _____ Let them know you care.
- T** _____ Get them assistance (_____ment) as soon as possible.

Take all threats of suicide seriously:

- ★ Do not be afraid to ask a caller if they are having thoughts of suicide.
- ★ Callers who have a plan, the means and a time frame need immediate help.

Suicide Prevention Resources:

- ★ Chain of command
- ★ Chaplains
- ★ FFSC
- ★ Medical and mental health professionals

ASK

Ask:

- ★ Are you having thoughts of suicide?

Asking the question does not put the idea in someone's head. This demonstrates to the caller that they are being taken seriously, that it is OK to talk about their pain and that help is available. Many times the caller will simply say they are not thinking about harming themselves.

If the caller says "no," use the PACT model from Module 6: Information and Referral to help the caller create a plan for dealing with the situation.

If the caller says "yes," move to CARE.

CARE

Let the caller vent. Be sympathetic, nonjudgmental, patient, calm and accepting. Remind the caller that you care. Offer reassurance that suicidal feelings are temporary; problems can be solved.

Ask:

- ★ Have you thought about how you would do it? (Plan)
- ★ Do you have access to what you need (i.e. gun, drugs, or knife)? (Means)
- ★ Have you thought about when you would do it? (Time frame)

TREAT

If it seems that a suicide attempt is imminent:

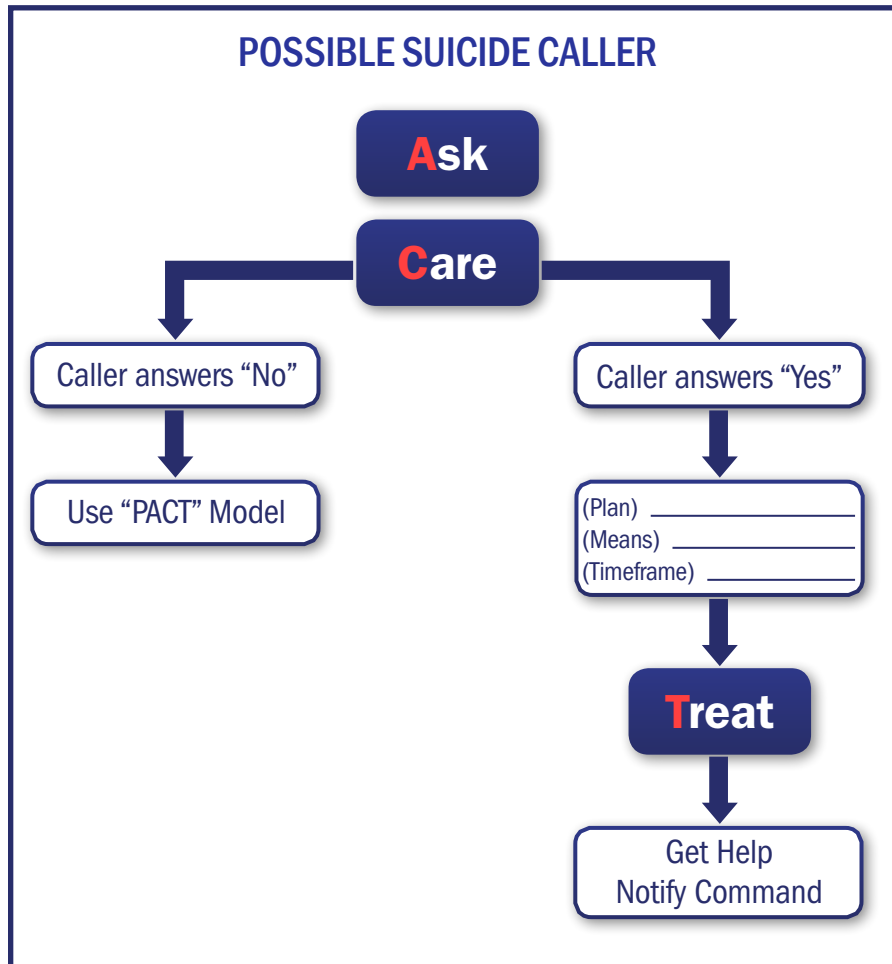
- ★ Seek professional help immediately. Call 911 or a local crisis center.
- ★ *Do not* leave the caller alone. Stay on the phone and call 911 or base security to send help. Do not go to be with the caller, but try to stay on the phone with him or her.

If Drugs Have Been Ingested

Get the details (e.g., what, how much, alcohol, other medications, last meal, general health) and call 911. Keep the person on the phone and use another phone line (if available) to call.

Notify the Command

You should always keep the situation confidential within Navy regulations and the law, but as all suspected and/or potential suicidal risks are reportable, notify the commanding officer.



7.6 DEATH OF A LOVED ONE

You may be contacted to help a family member deal with the death of a loved one. The loss of a parent, child, spouse or even a pet can be devastating. Many Sailors and their families are young and have not experienced the death of a loved one before.

THE FIVE STAGES OF GRIEF

According to Elisabeth Kübler-Ross, a psychiatrist who wrote extensively about death and dying, there are five stages associated with grieving:

1. Denial.
2. Anger.
3. Bargaining.
4. Depression.
5. Acceptance.

Not everyone goes through all of the stages. The stages are often experienced in sequence, but individuals can experience these feelings in a different order and may repeat some stages as grief is processed.

Denial

Upon hearing about a death, the most common reaction is shock and disbelief:

- ★ “That is not possible.”
- ★ “There must be some mistake.”
- ★ “You must have the wrong person.”

For many people, time seems to stand still while they attempt to process the news. Denial helps people to cope with the shock of their loss.

Anger

Anger may quickly set in. It may be directed at the messenger who delivers the news, the doctor, even the person who died. There is a need to know why this happened and whether the loss could have been prevented — who is at fault? Some may turn their anger inward and blame themselves for what happened.

Bargaining

People in crisis will make attempts to negotiate, either with another person involved, with God or a higher power:

- ★ “Please give me one more chance and I promise things will be better.”
- ★ “I will change.”
- ★ “If you will reverse this, then I will ...”

No matter what is said or done, things will not go back to the way they were before.

Depression

Although this phase is referred to as depression, it is more accurate to describe it as a combination of loss and loneliness. It may seem that this feeling will last forever. This intense sadness can leave an individual with little energy for work, chores, child care or outside activities. It is important to remember that this depression is a normal reaction to a great loss, not an indicator of mental illness.

Acceptance

At first, many people want to maintain life as it was before a loved one died. In time, they see that life has been changed and they must readjust. In time, and with support, individuals come to terms with the reality of the situation, recognize it as a fact and gradually let go of the intense grief and move beyond suffering.

There is no timetable for bereavement. Each person's experience is unique. For some, a few weeks' or months' time brings a sense of peace and renewed hope; others experience grief for years, with varying frequency and intensity.

MILITARY-RELATED DEATHS

Those whose loved ones die as a result of combat, a training exercise or other military-related cause may also:

- ★ Become preoccupied with how their loved one died: Did they feel pain? Were they conscious? How long did the pain last?
- ★ Be angry at others who survived and find it difficult to talk to their significant others. They may wish that other people had died, not their loved one, and these wishes make them feel guilty.
- ★ Encounter practical problems such as in body identification, death notification procedures, funeral arrangements, body transportation and reclaiming the deceased's property. In some disasters, it is impossible to reclaim a body and they may only reclaim body parts, or have nothing to bury or to cremate.
- ★ Feel guilty about something they did or did not do when they last saw or talked with their loved one before they died.
- ★ Blame the victim for their own death, particularly if there was a warning before the event or the service member volunteered for duty.

Casualty Assistance Calls Officer

www.cnic.navy.mil/om/base_support/command_and_staff/CasualtyAssistance.html

A command Casualty Assistance Calls Officer (CACO) is assigned to make personal notification to the next of kin that their active-duty service member is dead, unaccounted for or reported missing. The CACO's role extends to assisting with funeral arrangements as well as helping the survivors file the proper paperwork for receipt of their survivor benefits.

It is never appropriate for an ombudsman to accompany a CACO on the official notification visit or to contact the family about the casualty before CACO notification. After the CACO notifies the family, you may offer support to the family through information and referrals, or just by being a listening ear for family members.

Navy Gold Star Program

www.navygoldstar.com

Navy Gold Star (NGS) is the official program for providing long-term support to surviving families of Sailors who pass while on active duty.

Navy Gold Star is an inclusive program. Regardless of the branch of service, NGS offers support and helps Survivors access resources for the appropriate service branch. NGS support coordinators provide outreach and support for as long as the Survivor desires. NGS also coordinates activities with commands and community organizations to provide support and recognition for the Survivors of fallen service members.

7.7 CRISIS INTERVENTION

Crisis intervention refers to the process of offering short-term, immediate assistance to people in distress. Think of crisis intervention as emotional first aid.

GOALS

The goals of crisis intervention are to:

- ★ Restore individuals to their pre-crisis level of functioning.
- ★ Cushion the effect of the stressful event by offering practical and emotional support.
- ★ Identify and mobilize resources to cope with the crisis event.
- ★ Understand events leading to the crisis.

OMBUDSMAN ROLE

Not every problem may be an actual crisis by definition, but the individual may experience it as a crisis. Do not alienate the caller by placing your own definition of crisis on the situation. Crises are different for each person. Your role is to assist, not to judge.

The National Organization for Victim Assistance (www.trynova.org) suggests that helpers prepare to experience distress when working with a crisis victim. To prepare yourself for the demands of assisting others in crisis, you should:

- ★ Know your resources.
- ★ Educate yourself about reactions to crisis.
- ★ Be mentally available to a victim by putting aside your own concerns.
- ★ Cultivate a support system.
- ★ Be aware of how you deal with stress.
- ★ Make sure you have dealt with your own issues.
- ★ Be prepared physically by eating properly and getting enough sleep and exercise.
- ★ Diversify your activities. Make time for fun.

You may be tempted to try to solve your caller's problem. It is important for the person experiencing the crisis to be able to deal with the situation or the problem may never be resolved. Taking over for the caller can increase feelings of helplessness and powerlessness.

You may need to take a more direct role if one or more of the following conditions exist:

- ★ The individual is in danger (i.e., if an attacker is still present).
- ★ The individual is so overwhelmed they have limited or no ability to care for themselves.
- ★ The individual is injured.

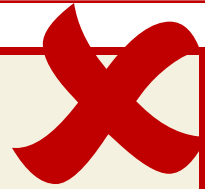
If these conditions are not present, it is more appropriate to take a facilitative role. You can empower a crisis victim by giving referrals to professional services and following up to see whether the chosen option is working. By empowering an individual in crisis, you are helping that person gain valuable coping and problem-solving skills. The individual may also learn to tolerate frustrating or painful situations and gain knowledge of helpful resources.

CRISIS INTERVENTION: DO AND DON'T

When responding to an individual in crisis:

Do:

- Make sure the caller is safe.
- Listen attentively, but do not force the caller to talk.
- Get the caller's name and phone number without becoming intrusive.
- Speak in a soft, calm voice; encourage the caller to focus on specific requests.
- Show concern, support, acceptance, hope and a positive attitude. This can have a more powerful effect than you realize.
- Be tolerant of intense emotions. A crisis brings a flood of emotions; do not take things personally.
- Be nonjudgmental. The individual has to take the path that is best for them.
- Maintain confidentiality. Inform the individual of situations that may have to be reported.
- Listen. Sometimes a listening, concerned, understanding ear is all that is needed.
- Use caring words and phrases, such as:
 - "I'm sorry that this has happened."
 - "I cannot imagine how difficult this must be for you. I'd like to be with you for a while if you wish."
 - "Would you like me to help you with ..."
 - "It's not your fault."
 - "What you're feeling is normal."
 - "I do not know how you feel, but I would like for you to please share your feelings with me."



Don't:

- Give unofficial information about injuries or casualties.
- Make physical contact unless permission is asked or they initiate it.
- Focus the conversation on yourself.
- Give advice or opinions unless asked.
- Offer false hope. No one has a magic wand to make everything better.
- Become a hero or rescuer. You should not bring people home, offer to care for children or promise punishment for wrongdoers.
- Fail to get assistance when needed. It is not a sign of weakness or ignorance to ask for help.
- Use phrases such as:
 - “I know how you feel.”
 - “It’s God’s will.”
 - “You are so strong. I know you can handle this.”
 - “Tell me what I can do.”
 - “It was a blessing that ...”
 - “You’ll get over this.”
 - “Just be thankful that ...”

7.8 DISASTERS

In addition to helping family members to cope with individual crises, you may be called upon to assist in a larger-scale crisis involving a command emergency or a community, state or national disaster.

DISASTER CHECKLIST

When disaster strikes, it can be easy to overlook some details. The following checklist can help you keep track of everything you need to do.

DISASTER CHECKLIST

✓ **Self-Care**

- Alert your family and your spouse’s family about the incident.
- Arrange your child care. If your children are older, leave money in case they need to order out for food later in the day. Leave phone numbers of neighbors and close friends.
- Contact your support system and ask them to assist you, if needed.

✓ Crisis Response

- Begin a notebook, log or electronic file to note all information gathered and disseminated.
- Establish a POC at the squadron, group or immediate superior in command (ISIC). Identify expectations, such as who calls whom, how often, the type of information to be shared, etc.
- Contact the CO, executive officer (XO) and command master chief (CMC) spouses and establish plans for communication.
- Activate the emergency call tree (if applicable).
- Update the Careline.
- Contact the public affairs officer (PAO), if needed.
- Get the command roster and any emergency data forms you might have.
- Keep your cellphone charger nearby.
- Work with the squadron or group regarding an informational meeting for families. Contact the PAO, FFSC, chaplain or others as appropriate.
- Identify a command spouse or other ombudsman to act as volunteer coordinator. Work with the volunteer coordinator to determine the needs of families and identify resources.

✓ After Care

- Contact the squadron/group and CACO regarding visitations/needs of casualty families.
- If requested, visit families in conjunction with CO, XO or CMC spouses.
- Attend any memorial services.
- Contact the FFSC to coordinate a critical incident stress debriefing, if needed.
- Follow up with casualty families.
- Follow up with the volunteer coordinator.
- Follow up with the squadron/group.

DISASTER PREPAREDNESS

Disasters can strike quickly and without warning. They can force families to evacuate from their neighborhoods or be confined to their homes. Local officials and relief workers will be on the scene after a disaster, but they cannot reach everyone right away.

During major crises such as Hurricane Sandy, the wildfires in California, Hurricane Katrina, the Sept. 11 attack or the USS Cole terrorist attack, ombudsmen have:

- ★ Served as the POC for evacuated families to get information about the crisis and for Sailors to get information about the status of their families.

- ★ Staffed family assistance or community support centers – facilities set up by the Navy to provide information and support services to those affected by a major crisis.
- ★ Coordinated food and clothing drives.
- ★ Answered toll-free telephone lines established by the Navy for families out of the area to get information.

OMBUDSMAN ROLE

You can help command families prepare for a disaster by:

- ★ Sharing disaster preparedness information via social media. Links to Ready Navy emergency response sites can be consolidated in one site for quick access.
- ★ Publishing short articles about the need for disaster preparation in the ombudsman newsletter and periodically listing websites that provide tips for family disaster readiness.
- ★ Using the Careline to provide notice of impending crises and command or installation guidance. Include command instructions/reporting phone number if evacuation is advised. Provide an out-of-state or cellphone number for ombudsmen.
- ★ Distributing printed materials about disaster preparedness at Family Readiness Group (FRG) meetings and at the command.
- ★ Drafting periodic notices to remind Sailors to prepare their homes and families for disaster, and asking the XO to include them in plan of the day, plan of the week or plan of the month (POD/POW/POM).

PREPAREDNESS RESOURCES

Many websites have information about disaster preparedness that include checklists or booklets that can be downloaded and personalized for families. Four excellent sites include:

- ★ Department of Homeland Security: www.ready.gov.
- ★ Federal Emergency Management Agency: www.fema.gov/media-library/assets/documents/7877.
- ★ American Red Cross: www.redcross.org.
- ★ Ready Navy: www.ready.navy.mil.

You can also prepare command families for potential disasters by:

- ★ Helping families who are new to the area become familiar with the types of disasters that are most likely to occur and how to best prepare for them.
- ★ Suggesting families develop an emergency communication plan.
- ★ Providing lists of items to include in a disaster supply kit.
- ★ Publicizing information about evacuation routes, emergency public shelters, care for animals and information specific to people with disabilities before disasters occur and when a disaster is imminent.

READY NAVY

www.ready.navy.mil

To help families prepare and cope with a disaster, Commander, Navy Installation Command's (CNIC) Ready Navy program suggests three simple steps:

Be informed

- ★ Know what emergencies are most likely to affect you and your family (e.g., natural disasters, man-made hazards, diseases, terrorism).
- ★ Learn your local emergency warning system.
- ★ Educate yourself and your family on the different ways to prepare for a disaster.

Have a plan

- ★ Prepare multiple emergency plans for the various types of disaster (e.g., what to do, where to go, whom to call).
- ★ Communicate your emergency plan with everyone in your family.
- ★ Practice your emergency plan and update it every six months.

Make a kit

- ★ Assemble an emergency kit with essential supplies for survival plus medicine and items for special needs and pets.
- ★ Store valuable documents in a portable, waterproof container.

TYPES OF DISASTERS

Disasters can take many forms. They may be command emergencies, natural disasters or man-made disasters. Develop a plan for dealing with emergencies and become familiar with the resources available to help when disaster strikes.

COMMAND EMERGENCIES

Command emergencies are incidents that affect the unit or ship. Examples include:

- ★ Death of Sailor(s) in a vehicle accident.
- ★ Accident at sea.
- ★ Helicopter or plane crash.
- ★ Terrorist attack.
- ★ Training incident.

You may be called upon to provide information to command families during a command emergency. You may also be assigned a specific role in command disaster preparedness drills. Check with your POC for information about your role during a command crisis. Regardless of the type and extent of the command emergency, you must never act independently or without explicit guidance from the command. You should be thoroughly aware of the CO's policies and expectations in a crisis or natural disaster that occurs where command families live. During an emergency, you may be asked to:

- ★ Post up-to-the minute information on the Careline.
- ★ Activate the phone tree to inform family members of an incident.
- ★ Arrange a group meeting of family members to provide information and support.
- ★ Represent command families with local and national media.
- ★ Arrange emergency child care.
- ★ Coordinate meal delivery for a grieving family.
- ★ Arrange transportation and accommodations for out-of-town guests.
- ★ Send flowers to a funeral on behalf of the command.

NATURAL DISASTERS

Natural disasters that affect an installation, community, state or the nation can have a much broader impact. They may include events such as:

- ★ Hurricanes.
- ★ Wildfires.
- ★ Floods.
- ★ Earthquakes.
- ★ Tornadoes.
- ★ Extreme winter storms.
- ★ Volcanic eruptions.
- ★ Pandemics, such as avian flu (bird flu), H1N1 flu (swine flu) or the Zika virus.

MAN-MADE DISASTERS

Man-made disasters may include:

- ★ Terrorist attacks.
- ★ Civil unrest.
- ★ Nuclear reactor incidents.

7.9 DISASTER ASSISTANCE

When disaster strikes, a wide range of resources is available to help military families recover.

NAVY FAMILY ACCOUNTABILITY AND ASSESSMENT SYSTEM

<https://navyfamily.navy.mil/>

The Navy Family Accountability and Assessment System (NFAAS) enables the Navy to account for, assess and monitor the recovery process for Navy personnel and their families affected by a widespread catastrophic event. The system allows families to identify their needs, including, but not limited to:

- ★ Medical.
- ★ Missing family locator.
- ★ Transportation.
- ★ Housing and personal property.
- ★ Financial.

There are two things Navy families should do immediately following a declared disaster:

- ★ Muster with their command.
- ★ Complete a needs assessment with NFAAS.

NFAAS allows personnel to do the following:

- ★ Report accounting status.
- ★ Update contact/location information.
- ★ Complete a needs assessment.
- ★ View reference information.

EXCEPTIONAL FAMILY MEMBER PROGRAM

Disaster preparation for families enrolled in the Exceptional Family Member Program (EFMP) requires additional planning. There may be a need for special transportation, electricity to power medical equipment or care for a service dog. *Disaster Ready* is a guide created by the Florida Developmental Disabilities Council to help families prepare for disaster. It contains information about preparing for and coping with the effects of a disaster, including:

- ★ Making the decision to remain at home or evacuate.
- ★ Planning for special needs (e.g., dietary, mobility, health).
- ★ Preparing a disaster supply kit.
- ★ Communicating with emergency personnel and support networks.

You can download a copy of *Disaster Ready* at www.volunteerflorida.org/wp-content/uploads/2013/03/DisasterGuide.pdf.

OMBUDSMAN READINESS

Ombudsmen may be called upon to assist command families before, during and after a catastrophic event. Your duties during a disaster may include:

- ★ Setting up a meeting with command families to share information or answer questions regarding an incident.
- ★ Sending out messages to a deployed command that families are safe after an incident.
- ★ Using the command roster and phone tree to update families with news from the CO.
- ★ Calling command families with information about the situation, such as evacuation routes and the locations for temporary shelters.
- ★ Coordinating assistance efforts with a sister command or squadron.
- ★ Updating the Careline.
- ★ Quelling rumors.

When helping during a disaster, all actions must be authorized by and coordinated through the command.

Contact the following resources if you need assistance:

- ★ Local FFSC.
- ★ Ombudsman assembly chair.
- ★ Command POC.
- ★ Installation PAO.

FAMILY DISASTER ASSISTANCE

Before the need arises, it is helpful to be familiar with the following organizations/ programs that provide assistance during crises:

- ★ Local military installation.
- ★ State emergency management.
- ★ Federal Emergency Management Agency (FEMA).
- ★ American Red Cross.
- ★ Casualty Assistance Calls Officers (CACOs).
- ★ Navy-Marine Corps Relief Society.
- ★ United Service Organizations (USO).

LOCAL MILITARY INSTALLATION

Each Navy installation has a disaster response plan. The plan takes effect when a crisis occurs that involves Sailors, Marines and/or their families. An emergency family assistance center (EFAC) may be opened on the installation to provide:

- ★ A place for those affected by the crisis to gather or seek safe haven.
- ★ Information as it becomes available.
- ★ Notification of the status of loved ones involved in the disaster.
- ★ Services such as food, shelter and financial assistance.

Ombudsmen not affected by the crisis may be asked to help at an EFAC by:

- ★ Answering phones.
- ★ Operating a check-in desk.
- ★ Helping family members.
- ★ Helping to organize staffing for a child care area.
- ★ Assisting with food/comfort services.
- ★ Documenting donations.

STATE EMERGENCY MANAGEMENT

Each state has an emergency management agency responsible for coordinating the state's response to a major disaster. This includes supporting local governments as needed

and coordinating assistance with the Federal Emergency Management Agency (FEMA). During an emergency, the state agency is likely to report directly to the governor of that state.

To find your state's emergency management agency, go to www.fema.gov/emergency-management-agencies.

Most state agencies:

- ★ Research, write, implement and review emergency plans and procedures.
- ★ Conduct drills with agencies and departments (e.g., police, rescue, fire) statewide.
- ★ Maintain a comprehensive telecommunications network for emergency operations.
- ★ Coordinate public information and awareness efforts.
- ★ Coordinate efforts with FEMA after the president has declared a disaster. This allows the flow of money and services to begin.

FEDERAL EMERGENCY MANAGEMENT AGENCY

www.fema.gov

FEMA is part of the Department of Homeland Security and is in charge of helping people before and after a disaster. FEMA is called in to help when the president declares a disaster. Disasters are declared when hurricanes, floods, earthquakes or other similar events strike a community.

FEMA:

- ★ Helps disaster victims find shelter if their homes are damaged or destroyed.
- ★ Provides resources to repair homes and works with city officials to repair public buildings.
- ★ Teaches people how to prepare for a disaster and how to make their homes as safe as possible.
- ★ Helps communities construct buildings that are less likely to be damaged.
- ★ Trains firefighters and emergency workers.
- ★ Operates a flood insurance program.

AMERICAN RED CROSS

www.redcross.org

The American Red Cross responds to more than 65,000 disasters each year. Of these responses, 90 percent are to house or apartment fires. They also respond to large-scale disasters, such as hurricanes, floods, earthquakes, tornadoes, hazardous materials spills, transportation accidents, explosions and other natural and man-made disasters.

Red Cross disaster relief focuses on meeting people's immediate needs. When a disaster strikes, the Red Cross provides shelter, food, and health and mental health services to address basic human needs. The goal of Red Cross disaster relief is to enable victims of disasters to resume their normal daily activities.

The Red Cross also feeds emergency workers, handles inquiries from concerned family members outside the disaster area, provides blood and blood products to disaster victims and helps disaster victims get access to other available resources.

CASUALTY ASSISTANCE CALLS PROGRAM

www.public.navy.mil/bupers-npc/support/casualty/caco/Pages/default.aspx

The mission of the Navy Casualty Assistance Calls Program (CACP) is to provide timely, compassionate and caring assistance to families in times of need. The Navy Casualty Assistance Division consists of:

- ★ Primary response.
- ★ Survivor benefits and entitlements.
- ★ Casualty case settlement.
- ★ Prisoner of war/missing in action.

Navy casualty assistance personnel are available by calling 1-800-368-3202 or 901-634-9279 (after hours). In the event of a mass casualty situation, an emergency coordination center is staffed by active duty and personnel from Navy Personnel Command at Millington, Tennessee, and provides assistance by:

- ★ Answering telephone inquiries.
- ★ Providing family members in the casualty assistance area with information and referral.
- ★ Acting as a clearinghouse for information in mass casualty scenarios.

The CACP trains Navy personnel to make death and injury notification visits. This program is managed regionally by Casualty Assistance Calls/Funeral Honors Support (CA/FHS) program coordinators. CACOs not only make notifications but also work with the family to:

- ★ Provide immediate financial death benefits.
- ★ Make funeral arrangements.
- ★ Coordinate military honors.
- ★ Process insurance and other financial claims.
- ★ Ensure personal effects are returned.

The CACO may work with the family as long as necessary.

NAVY-MARINE CORPS RELIEF SOCIETY

www.nmcrs.org

The Navy-Marine Corps Relief Society (NMCRS) assists service members and their eligible family members promptly and with compassion. Financial resources and assistance are available for:

- ★ Active-duty or retired Sailors and Marines.
- ★ Eligible family members with a military ID card.
- ★ Surviving spouses.
- ★ Reservists on active duty of 30 days or more (call to confirm eligibility).

The society provides:

- ★ Assistance with gas, food and lodging to support a pre-disaster evacuation that has been ordered by the base commander or other local authorities.
- ★ Assistance with immediate basic living expenses of families whose homes are uninhabitable or who have lost their food supply due to loss of electricity.

Similar services are available to all branches of the military:

- ★ Air Force Aid Society (AFAS): www.afas.org.
- ★ Army Emergency Relief (AER): www.aerhq.org.
- ★ Coast Guard Mutual Assistance (CGMA): www.cgmahq.org.

UNITED SERVICE ORGANIZATIONS

www.uso.org

The mission of the United Service Organizations (USO) is to provide support to service members and their families. During disasters, USO centers in the United States and throughout the world provide a variety of services.

The USO:

- ★ Coordinates donations from individuals, organizations and corporations who want to assist military families.
- ★ Expands hours and services provided at the centers to accommodate the needs of those affected by a disaster.
- ★ Provides food and a place to relax to service members and their families.
- ★ Assists families to locate temporary housing, clothing and food.
- ★ Offers emotional support and encouragement.

7.10 MEDIA RELATIONS

During a military crisis and anytime the media makes a request of the Navy to talk with military family members, an ombudsman may be the “go to” person to represent Navy families. If you are approached to do an interview, let the command POC know of the request and receive command approval before talking to the media. Using the media is a good way to:

- ★ Get accurate information to Navy families.
- ★ Provide reassurance.

During a crisis, print, radio and television media may want to talk with affected family members. Work with your installation or command PAO when talking with the media. Remember that you are representing other Navy families, the command and the Navy. Take time to review key points with the PAO. Ask for a practice session and get feedback and tips for improvement.

Many polished media personalities treat interviews like short briefings or presentations. The presentation consists of three parts:

- ★ Introductions.
- ★ Content.
- ★ Contact information.

Before talking with the media, clarify your message. You should have no more than three points to communicate. One of the three points should be a telephone number for individuals to call for more information.

For guidance on communicating with the media, review the *Navy Public Affairs Guide for Ombudsmen* at www.navy.mil/ah_online/OPSEC/docs/Policy/Navy_Public_Affairs_Guide_for_Ombudsmen.pdf.

TYPES OF INTERVIEWS

Whether the interview is for a newspaper or a radio or television station, there are two main types of interviews:

- ★ Interview for a command-produced product. This is the easiest type of interview because the command has full control over the final product. You may speak to the interviewer in person, on the phone or through email. Instead of a formal interview, you may be asked to provide a quote or approve a quote that is drafted for you.
- ★ Interviews for an externally produced product, such as a newspaper or radio program. It is helpful to ask a PAO help you prepare for the interview. You may speak to the reporter in person, on the phone or via email.

“Ambush” Interviews

The term “ambush” interview refers to interviews in which one of two things may occur:

- ★ A reporter appears for an unscheduled interview.
- ★ The questions asked are outside the agreed-upon topic.

The most important thing for you to do in an ambush interview is to remain calm. An appropriate response to questions asked by a reporter at the scene of a disaster or at a homecoming could be:

“It would be better for you to talk with the PAO. You should call (provide PAO’s telephone number). Or, you can give me your contact information and I will give it to the CO.”

TELEVISION TIPS

Prepare for a television appearance so that the audience is focused on your message and not your physical appearance. The PAO can help you prepare. Consider the following tips:

- ★ Keep answers short. Have two or three main points and talk in sound bites, not lengthy sentences.
- ★ Assume the microphone is on unless told otherwise.
- ★ Look at the interviewer. Do not let your eyes wander around the set or shift back and forth to the camera.
- ★ Use hand gestures if that is your normal style, but keep them more contained.
- ★ Manage facial expressions so you are not caught off guard when the camera starts rolling.
- ★ Remove eyeglasses unless the lenses are non-reflective.
- ★ Remove large, gaudy, noisy and shiny jewelry; it is distracting to the audience.

Remember to ask the interviewer to post contact information on the screen during the interview.

RADIO TIPS

A radio interview is often done over the telephone. The interviewer will typically ask your name and the name of the command you represent. The interviewer will ask a series of questions and will ask for contact information at the end of the interview.

Again, the three-point rule applies. What is the message that needs to be conveyed? Keep these tips in mind when conducting a radio interview:

- ★ Remember to talk slowly and clearly.
- ★ Try to delete the annoying filler words such as “um” and “you know.”
- ★ Have water handy to prevent dry mouth.
- ★ Talk in short sentences.
- ★ Sound confident and calm.

SOCIAL MEDIA TIPS

Social media can be an excellent means of connecting with command families and sharing information. Keep in mind that reporters may search social media sites to gain information for a story. If you are using social media, it is important to remember:

- ★ *Nothing* online is fully secure. Even closed groups can be breached.
- ★ Keep sensitive information safe. Do not discuss sensitive information, such as ship or unit schedules or anything else that may compromise the privacy of Sailors and their families.
- ★ Limit the amount of detailed information you post on social media about yourself, your Sailors and their activities.
- ★ Set and regularly check security settings. When social media platforms change their security settings they may change yours.
- ★ When using public wireless networks with your laptop, tablet or smartphone, always assume they are being monitored.
- ★ If you have any questions about what constitutes a breach of Operations Security (OPSEC), contact the PAO before posting or sharing.

SUMMARY

Command family members in crisis may look to you for assistance. Dealing with a crisis may seem overwhelming. In addition to remaining calm, listening carefully, taking notes as needed and providing information, you must:

- ★ Recognize a crisis
- ★ Refer for assistance.
- ★ Report as required.

As an ombudsman, it is imperative that you provide suitable crisis intervention, or emotional first aid, to appropriately intervene and help family members get needed assistance. If you have any questions or concerns about your role during a disaster, you should contact your command for clarification.



Ready ✓ or



Ready or Not Ready? Preparedness Quiz

*Emergencies such as natural disasters, an influenza pandemic, or terrorist event have the potential of disrupting thousands of lives. One may affect you and your family. Are you prepared for an emergency to strike? Take the **Ready or Not Ready? Preparedness Quiz** to find out!*

- 1. As long as I have all the necessary supplies for an emergency kit somewhere in my house, I am prepared for an emergency.**

True

False

- 2. If local authorities told me to evacuate, I would:**

Refuse to leave. Most 'emergencies' don't turn out to be a big deal.

Wait to see if the situation worsened, then decide.

Follow the advice of local responders to ensure my safety and theirs.

Call my neighbor and see what she thinks I should do.

- 3. Our emergency supply kit has enough materials to sustain myself and my family:**

For at least four hours.

Through the night.

Until we get to a shelter.

For at least three days.

- 4. As long as one person in my family knows what our emergency plan is, our family is prepared.**

True

False

- 5. My family and I have:**

An emergency kit at home.

An emergency kit in the car(s).

An emergency kit at work.

All of the above.

6. Since my spouse is in the Navy, he/she will be able to make sure our family is safe if an emergency strikes.

True

False

7. In terms of water, our emergency supply kit has:

A small bottle for each member of the family.

A gallon a day for each family member for three days.

One gallon for the family to share.

More water for the adults than the kids.

8. Our family's emergency plan contact person is:

Our next door neighbor.

Our family friend who lives two blocks away.

Grandma and Grandpa Smith who live in another state.

The Governor of our state.

9. The four aspects of being prepared for an emergency are:

Be informed, make a plan, build a kit, stay informed.

Call a friend, go to the hospital, go home, stand outside and watch.

Make a plan, practice the plan, keep the plan to myself, ignore the plan.

Water, batteries, map, perishable food.

10. Including children in the family emergency planning process will only scare them, so it should be avoided at all costs.

True

False

Now, let's see if you are ready!

1. Print your answer sheet to compare to the key.
2. Click out of this window (click on the X at the top right corner of the window), and click on **How Did You Do?** on the right hand side of the next screen.



CHAPTER 8

DEPLOYMENT AND MOBILIZATION

INTRODUCTION

Deployment is a fact of life for Navy families. You can help Sailors and their family members by providing them with the tools and resources they need to cope with the challenges of deployment.

Today's Sailors may be male, female, single, married to civilians, dual-military couples or single parents. Few other occupations require extended periods of six months or more away from home, frequent duty nights, sudden and unplanned deployments, and the risk of combat. This chapter provides an overview of issues unique to Navy life and to the Navy's mission: to maintain, train and equip combat-ready naval forces capable of winning wars, deterring aggression and maintaining freedom of the seas. Topics include:

- ★ The Emotional Cycle of Deployment.
- ★ Navy communities.
- ★ Readiness and deployment success strategies.

KEY TERMS

CIAC: Command Individual Augmentee Coordinator

ECRC: Expeditionary Combat Readiness Center

NECC: Navy Expeditionary Combat Command

NMPS: Navy Mobilization Processing Sites

OCO: Overseas Contingency Operations Coordinator

OSA: Overseas Contingency Operations Support Assignment

SELRES: Selected Reserve

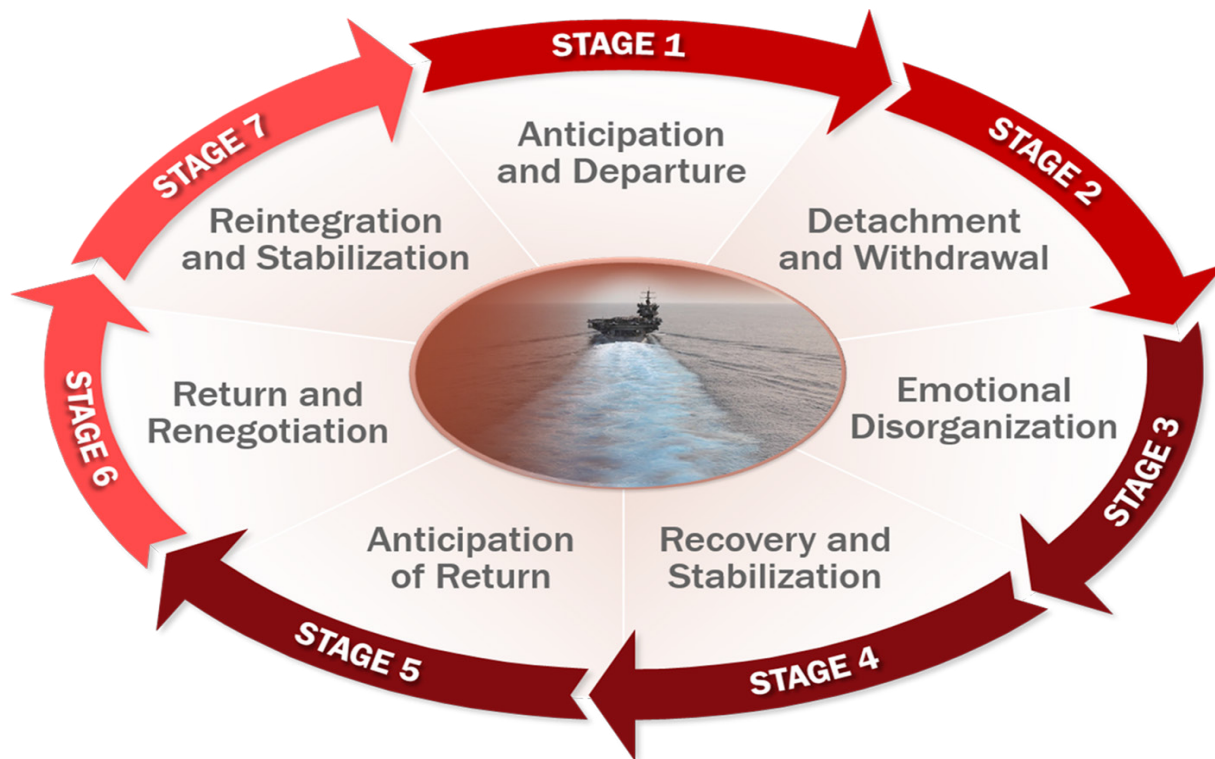
USFF: United States Fleet Forces Command

8.1 THE EMOTIONAL CYCLE OF DEPLOYMENT

The Emotional Cycle of Deployment is a helpful way to understand the emotions service members and their families may experience throughout a deployment.

The emotions Sailors and family members experience pre-deployment, during deployment and post-deployment follow a cyclical pattern. Understanding what to expect and knowing that their feelings in each phase are normal can help ease the anxiety Sailors and their families experience.

NOTE: Some research refers to a “spiral” of deployment, as compared to a “cycle” of deployment, based on the premise that families never return to the same place they started. Both references include the same stages organized in the same groupings of pre-deployment, deployment and post-deployment.



STAGE 1: ANTICIPATION OF DEPARTURE

This stage occurs four to six weeks before a planned deployment. It is a time of tension and conflicting emotions.

EMOTIONS AND BEHAVIOR

- ★ **Couples:** Partners may alternately feel denial and anticipation of loss. They also may be angry and resentful about the increased hours the service member spends preparing for the deployment. As reality sinks in, tempers may flare as couples attempt to take care of all of the items on a pre-deployment checklist while striving to make time for each other. Service members feel guilty about leaving their families. Arguments and bickering are common. These can be useful ways for a couple to distance themselves emotionally in preparation for the separation.
- ★ **Children:** Parents must be sure to tell their children about the upcoming deployment and reassure them that they will be cared for in the service member's absence.
- ★ **Single Sailors:** Single Sailors may eagerly anticipate the opportunity to put their training into action. They may also be concerned about the unknown aspects of the deployment.

OMBUDSMAN ROLE

You can help command family members prepare for deployment by providing information about deployment and helping them to understand that what they are feeling is normal. Be aware of your own feelings regarding upcoming deployments—your

emotions can affect the way you communicate with your command family members.

Notes: _____

STAGE 2: DETACHMENT AND WITHDRAWAL _____

This occurs in the final days before deployment. In many ways, this can be the most difficult stage.

EMOTIONS AND BEHAVIOR

- ★ **Couples:** Service members become more psychologically prepared for deployment, focusing on the mission and their command. Sadness and anger occur as couples attempt to protect themselves from the hurt of separation. Partners may stop sharing their thoughts and feelings with each other. Although physically together, they have separated emotionally. Often the non-deploying spouses think, “If you have to go, go,” and Sailors think, “Let’s get on with it!”
- ★ **Children:** Children may be confused and upset with the deploying parent. Younger children may believe their behavior caused their parent to leave.
- ★ **Single Sailors:** Single Sailors are often working extremely hard and trying to get their affairs in order before deploying.

OMBUDSMAN ROLE

You can help families by encouraging them to complete the preparation process. Provide deployment checklists and referrals to resources that assist with pre-deployment procedures, such as the Fleet and Family Support Center (FFSC) and Navy legal services.

Notes: _____

STAGE 3: EMOTIONAL DISORGANIZATION _____

This stage begins at the time of deployment and may last up to six weeks after departure.

EMOTIONS AND BEHAVIOR

- ★ **Couples:** The non-deploying partner may feel an initial sense of relief followed by guilt. Many feel disorganized, depressed or restless. Old routines have been disrupted and new ones not yet established. They often feel overwhelmed as they face total responsibility for family affairs. Some may become stuck in this stage, which can cause problems throughout the remainder of the deployment and beyond.
- ★ **Children:** Children may show signs of emotional upset. Schoolwork may suffer. Behavior may regress.

- ★ **Single Sailors:** Both service members in a relationship and service members who are single are usually excited at first, then they may become lonely or angry at the command for having taken them from their families and homeport.

OMBUDSMAN ROLE

You can suggest that family members at home become involved with activities, such as joining the Family Readiness Group (FRG), community support groups and volunteer organizations, participating in sports activities or enrolling in college classes.

Notes: _____

STAGE 4: RECOVERY AND STABILIZATION

This occurs when new routines are established, usually several weeks after the deployment begins.

EMOTIONS AND BEHAVIOR

- ★ **Couples:** Those at home have begun to feel more comfortable with their new roles and responsibilities. Sources of support and a sense of independence and freedom are developed. They may also develop increased confidence and a positive outlook.
- ★ **Children:** With time, children adjust to the new family dynamic and become comfortable.
- ★ **Single Sailors:** Service members may be at a point where the newness and adventure of the deployment have worn off and monotony sets in.

OMBUDSMAN ROLE

You can suggest that family members set personal goals to achieve during the deployment, such as finding a job, completing coursework or improving fitness. Encourage family members throughout the remainder of the deployment to reach those goals.

Notes: _____

STAGE 5: ANTICIPATION OF RETURN

Homecoming preparation begins at different times for those at home and those on deployment. Typically, it is about four to six weeks before the command is due to return home.

EMOTIONS AND BEHAVIOR

- ★ **Couples:** Spouses and partners who remained at home realize that they may not have accomplished everything they wanted to during the separation. There is a feeling of excitement in anticipation of being together again. There may also be some concern that the service member will not like some of the changes and decisions made during their absence. Service members in relationships are excited and anxious, wondering whether they will be accepted or needed by their families and whether their children will remember them.
- ★ **Children:** Younger children take their cues from their caregiver. Older children may have feelings similar to their parents. They will be excited, joyous and perhaps worried that they did not live up to their deployed parent's expectations.
- ★ **Single Sailors:** Sailors are eager for some time away from the command and concerned that friendships developed during deployment may change after returning home.

OMBUDSMAN ROLE

You can help normalize family members' feelings by providing information about reunion and homecoming. Are they planning a trip as soon as their Sailor returns? Perhaps the Sailor just wants to be home for a while. Encourage realistic expectations of what will happen upon the return of their loved one.

Notes: _____

STAGE 6: RETURN AND RENEGOTIATION

Renegotiation occurs at homecoming and for four to six weeks after the deployment ends (actual timeline may vary depending on the length of the deployment).

EMOTIONS AND BEHAVIOR

- ★ **Couples:** It takes time to become a couple again. Many spouses feel a loss of freedom and independence and resent the partner making decisions. Service members often feel like strangers in their own homes. During this stage, couples must make adjustments to their roles and responsibilities; the marriage cannot and will not be exactly as it was before the deployment. Each partner has had new experiences and has grown in different ways; these changes must be accommodated. Being aware of each other's needs is crucial at this point.
- ★ **Children:** Just as parents need time to re-establish relationships, so do children. It is best for the returning parent to adapt to the existing routine and rules at first. Children may need time to become comfortable approaching the returned parent for assistance.
- ★ **Single Sailors:** Single Sailors may need to renegotiate relationships with roommates, friends and family. They may choose to seek out new relationships.

OMBUDSMAN ROLE

Once the excitement of homecoming has passed, some families may struggle to adjust to being together. You may be receiving an influx of phone calls from concerned or upset individuals during this time. Refer these callers to a counselor or chaplain, who can help the families work together to find the new normal.

Notes: _____

STAGE 7: REINTEGRATION AND STABILIZATION

This stage can take up to six months as the couple and family stabilize their relationships.

EMOTIONS AND BEHAVIOR

- ★ **Couples:** Spouses feel more relaxed and comfortable with each other. There is a renewed sense of being a couple and a family. They are back on the same track emotionally and can enjoy the warmth and closeness of being a couple again.
- ★ **Children:** Young children may worry that their parent will leave again. Duty nights can be challenging. Older children are usually delighted that their family is reunited even though they may, at times, resent the discipline enforced by having two parents at home.
- ★ **Single Sailors:** Single Sailors are pursuing interests away from work, such as athletics, college, hobbies and developing relationships.

OMBUDSMAN ROLE

Help families recognize their success in surviving a deployment, highlight lessons that they learned and emphasize any coping strategies that they may have developed that could be used for their next separation.

Notes: _____

8.2 DEPLOYMENT PREPARATION

Before a scheduled deployment, most commands host events to prepare Sailors and their families. A representative from the Region Legal Service Office may come to the command to prepare wills and powers of attorney. Families are invited to attend pre-deployment briefs hosted by the command.

DEPLOYMENT READINESS CHECKLIST

The following checklist covers the practical financial and personal preparation needed to be deployment ready.

✓ Do you know where each of the following documents is located?

- Birth certificate
- Divorce decree(s)
- Death certificate(s)
- Medical records
- Dental records
- Veterinary records for each pet
- Passports/visas
- Insurance policies (life, health, home, vehicle, flood, others)
- Real estate documents (lease, deed, first and second mortgages)
- Car/motorcycle title, registration and inspection
- Most recent Leave and Earnings Statement (LES)
- Current address and phone number of immediate family members
- A list of important account numbers, usernames or passwords?

✓ Legal Documents

- Do you have a current will?
- Is your Record of Emergency Data (Page 2) current?
- Is coverage for Servicemembers' Group Life Insurance (SGLI) equal to your needs, and is the beneficiary information current?
- Will a general or special power of attorney be needed to manage your affairs in your absence?
- Will your ID card expire during deployment?
- Does your child's caregiver have a medical power of attorney to access emergency and routine care for your child/children?.

✓ **Financial Planning**

- Have you reviewed your monthly spending plan and provided a copy to your spouse or a trusted individual?
- Does your budget include money for port visits, phone calls, gifts/souvenirs?
- Will changes to entitlements such as sea, flight, submarine or imminent danger pay affect your income?
- Will there be promotion during deployment?
- Will a reenlistment bonus be received during deployment?
- Do you have access to myPay?
- Have you established a password for your spouse or trusted individual to access myPay?
- Are you enrolled in the Thrift Savings Plan?
- Does your spouse or trusted individual have the account number and a user ID and password?
- Have you established a financial goal(s) for this deployment, such as paying off a vehicle, increasing savings, saving money to purchase a new vehicle, etc.?

✓ **Banking**

- Is pay distribution set up the way you want? Direct deposit to correct account(s)? Split pay? Any allotments or automatic check drafts?
- Do you have overdraft protection for your checking accounts?
- Will your debit/credit cards expire during the deployment?

✓ **Bills**

- How will you be making payments to creditors? Do they have your correct address?
- How will you be paying rent/mortgage/utilities?
- Are there any annual/quarterly expenses, such as car or home insurance payments, due while you are deployed? If so, how will they be paid?

✓ **Taxes**

- If you need to file federal or state income taxes while deployed, do you have the necessary documents?
- Do you have a special power of attorney if someone else will be filing your tax return, or are you going to request a filing extension?

✓ Vehicles

- Are vehicle insurance, tags, registration, title and inspection stickers current?
- Is all routine maintenance current?
- Have you made arrangements for storing your vehicle(s)?
- Have you talked with your insurance agent about reducing coverage while your vehicle is in storage?
- If a friend or family member is storing your vehicle for you, does your insurance cover them?

✓ House

- Are you able to terminate your lease due to military deployment? Will there be a financial penalty?
- If you plan to maintain your house or apartment, is your renter's/homeowner's insurance current?
- Is your house/apartment prepared if it will be vacant for an extended period during deployment? Did you stop the mail and newspaper, turn off or reduce the temperature of the water heater, air conditioning or heat, arrange lawn maintenance, etc.?

✓ Emergencies

- Do you have a least one month's pay saved in case of financial emergency?
- Does your family know to use the American Red Cross in case of an emergency?
- Does your family have the name and number to the command ombudsman? Have you given the ombudsman permission to provide information to your family members?

✓ Communication

- Have you discussed how often you will communicate and by which methods?
- Have you discussed how sensitive news will be shared?
- Does your family have the number to the command Careline, if available?
- Is your family on the command phone/email tree?

8.3 OMBUDSMAN ROLE DURING DEPLOYMENT

During deployment, your role as the communication link between the command and families becomes even more crucial. Both the CO and the families at home will rely on you for accurate, timely information.

FAMILY EMERGENCIES DURING DEPLOYMENT

A service member may or may not be able to return from deployment during a family emergency. It is recommended that families follow command procedures for notifying a service member about an emergency while deployed. The commanding officer (CO) may instruct you to contact the command in emergencies, or you may be directed to instruct family members to contact the American Red Cross.

Encourage family members to use the Red Cross communication service or command channels to notify deployed service members about family emergencies. This will ensure that the command is aware of the emergency and can provide emotional support to the Sailor. Commands may also be able to arrange emergency leave if the situation requires the return of the service member.

INTEGRATING COMMAND PERSONNEL COMPONENT FAMILIES

Individuals who may not normally be assigned to the command—foreign navy personnel, U.S. Naval Academy or Navy ROTC midshipmen, aviation or special warfare detachments, activated Reservists, etc.—may join the command during a deployment. Check with your CO to determine their expectations for integrating these individuals' families. You may be asked to:

- ★ Respond to calls for information or emergencies.
- ★ Provide the Careline number and encourage use by all.
- ★ Send copies of the ombudsman newsletter.
- ★ Invite families to command and FRG functions.
- ★ Keep families informed about homecoming events.

Many times when groups of commands deploy together, one or more leadership spouses will organize a meeting or a luncheon and invite leadership spouses from each command. This allows everyone an opportunity to meet, plan social activities and coordinate homecoming festivities. Teamwork is key, because all are part of the Navy family.

MAINTAIN COMMAND COMMUNICATION

The days and weeks before deployment are hectic. Before the command deploys, it is essential to have a plan for communication. Command ombudsmen should make sure they:

- ★ Are familiar with the CO's emergency leave policy and expectations for verification.

- ★ Are aware of the types of situations about which the CO and command point of contact (POC) want to be informed.
- ★ Create a plan for regularly scheduled email communication.
- ★ Have a telephone number for the command that generally is not made available to others.
- ★ Have the command's mailing address.
- ★ Develop a plan to receive updated command rosters.
- ★ Arrange for the CO or command master chief (CMC) to provide regular oral or written updates for the Careline.
- ★ Know their POC at the squadron, group or other command who can assist while the command is deployed.
- ★ Arrange funding for the printing and distribution of the ombudsman newsletter, as needed.

8.4 HOMECOMING

Preparation for homecoming is hectic. Maintain regular communication with the command and families to ensure a successful homecoming.

RETURN-AND-REUNION BRIEFS

Return-and-reunion briefs for deployed service members generally take place aboard ship at the request of the command. FFSC staff members meet the ship and present programs during the transit home. For submarines and land-based air squadrons, return-and-reunion briefs can be provided at their last in-port availability.

HOMECOMING PROGRAMS

The command's FRG usually plans homecoming festivities. The ombudsman, FRG leader or a senior spouse may be asked to relay plans to the CO for approval. FRG leadership, or another member of the command support team (CST), should contact the FFSC or chaplain to schedule an educational homecoming discussion for command families.

The focus of homecoming programs is:

- ★ Planning for homecoming.
- ★ Establishing realistic expectations.
- ★ Dealing with change.
- ★ Anticipating children's reactions.
- ★ Identifying resources for additional help.

8.5 NAVY COMMUNITIES

ACTIVATED RESERVISTS

The focus of the U.S. Navy Reserve is to provide mission-capable units and individuals to the Navy and Marine Corps throughout the full range of operations during times of peace or war. In today's environment, this mandate takes on added meaning and responsibilities because the Reserve plays an increasingly active role in the day-to-day planning and operational requirements of the active Navy. It is a significant force multiplier, enabling the fleet to meet growing global commitments.



Reservists may be:

- ★ Former active-duty Sailors.
- ★ Veterans of other service branches.
- ★ Personnel with no previous military experience.

When individuals join the Navy, they must commit to eight years of service. Not all of it has to be served as an active-duty Sailor. Part of the eight years may be spent in the Reserve force.

The Navy Reserve force consists of the:

- ★ Ready Reserve.
- ★ Standby Reserve.
- ★ Retired Reserve.

When Navy Reservists are recalled to active duty for an extended period, the gaining command assumes responsibility for the Sailors and their families. To ensure the geographically dispersed Reservist's family receives the support services to which they are entitled, the losing command's ombudsman should contact the gaining command's ombudsman to coordinate services.

CHALLENGES OF MOBILIZATION FOR FAMILIES

Mobilization brings service members into readiness for immediate service in time of war or crisis. With a downsized Navy, there is a greater need to immediately deploy service members and/or to activate the Selected Reserve (SELRES) in time of war, crisis or in support of a mission.

Mobilization brings challenges to service members and their families. For Sailors with no previous Navy service or those who were active duty in another service branch, mobilization can be a particular challenge.

These challenges include:

- ★ Reservists may mobilize with little notice or time for preparation.
- ★ Reservists and their families may be unprepared practically, emotionally and financially for separation.
- ★ Family members may have no experience with and do not understand military life.
- ★ Military support services may be unavailable locally.

MOBILIZATION PREPARATION

Deployment Readiness Training (DRT) prepares Reservists and their family members to meet the challenges of deployment. Service providers are brought together for the convenience of the families needing readiness support. Attendees will receive information about military support agencies and programs. Representatives from the following are typically present:

- ★ Administrative personnel to complete SGLI election forms and to update the service member's Record of Emergency Data (Page 2).
- ★ Personnel Support Detachment (PSD) to help family members to obtain ID cards.
- ★ A representative who can address the Uniformed Services Employment and Reemployment Rights Act (USERRA) of 1994.
- ★ Legal services to complete simple wills and powers of attorney.
- ★ TRICARE.
- ★ American Red Cross.
- ★ Chaplain.
- ★ FFSC, if available in the area.
- ★ Other agencies as invited by the command.

SAMPLE ACTIVATION MOBILIZATION CHECKLIST

Documents you must bring for activation/mobilization (applicable to you and your family members).

✓ Pay/Direct Deposit/Allotments

- Voided personal check or deposit slip (displaying bank address/telephone number, bank routing/account numbers).
- Bank account information (bank address/telephone number, bank routing/account numbers) for each desired allotment.
- Copy of current mortgage(s) (with principal/interest/tax/insurance breakdown) and documentation of one month's average utilities, or a copy of a house or apartment rental agreement and documentation of one month's average utilities.
- Copy(s) of current child support agreement(s).

If Medical Corps (MC), Dental Corps (DC), Medical Service Corps (MSC) (Clinical), Nurse Corps (NC), certified copies or proof of the following:

- Current license/certificate.
- Current Basic Cardiac Life Support (BCLS), Advanced Cardiac Life Support (ACLS), Pediatric Advanced Life Support (PALS) etc.
- Current demographic information, if MC.
- Internship.
- Residency.
- Board certification in specialty or board certification qualifications.

✓ Service Records/PSD

- Certification of discharge/separation (DD Form 214) for all former periods of active duty.
- Birth certificate or passport (for those deploying Outside Continental United States).
- Birth, adoption or guardianship certificates for dependents.
- Social Security numbers for self and dependents.
- Certified copy of marriage certificate for present marriage.
- Certified copies of documentation terminating any previous marriage (i.e., divorce, annulment, spouse's death certificate).
- Certification of full-time enrollment for self and college-age dependents (from school registrar).
- Signed statement from a licensed physician for dependent parent/children over 21 years of age who are incapacitated.
- Current DoN Family Care Plan Certification (NAVPERS 1740/6).

✓ Security Clearance

- Certified copy of naturalization papers.
- Names/addresses of personal/professional references (minimum of three each required).
- Names/addresses/dates of employment for the past 10 years (or since graduation from high school).

OMBUDSMAN SUPPORT TO NAVY RESERVES

Reserve ombudsmen may be remotely located from many command/unit family members. This makes the use of technology critical for the timely distribution of information important for family members. Approved social media pages, toll-free phone numbers, voicemail, computers, etc., should be used if available and authorized by the CO.

In addition, Reserve ombudsmen must thoroughly research resources available in the areas where their command family members live. Assistance may be available from other military installations. Information about resources can be found on the Military OneSource website at www.militaryonesource.mil.

Entitlement to some services can change based on the duration of the active-duty period. The local Navy Reserve activity can provide specific eligibility information. Additional information can be found at <http://ra.defense.gov> in the Reserve integration section and at the Navy Family Ombudsman Program website, www.cnrc.navy.mil/ffr/family_readiness/fleet_and_family_support_program.html.

When Reservists are recalled to active duty for an extended period, family members usually do not relocate with them. The gaining command assumes responsibility for the Sailors and their family members. To ensure the Reservist's family receives services to which they are entitled, the Navy Reserve ombudsman should contact the gaining command's ombudsman to coordinate services.

At the discretion of the respective COs, the two ombudsmen may agree to share responsibility for those family members who do not accompany the Sailor to the area of the active-duty assignment. Ombudsmen should:

- ★ Work with the CST to establish and administer family readiness programs.
- ★ Advise Reservists and their families to use a mobilization checklist, get dependent identification cards and complete wills, powers of attorney or guardianship agreements.

These programs should be conducted on an ongoing basis to adequately prepare Reservists and their families for mobilization.

Before mobilization occurs:

- ★ Understand the command's mobilization plans and processes. Ensure both the Reserve ombudsman and gaining command's ombudsman contact information are included in mobilization packages.
- ★ Be able to refer Reservist families to mobilization information, such as the Reserve integration section of the DoD Reserve affairs website, <http://ra.defense.gov>.

- ★ Network with the Reserve ombudsman and other ombudsmen to be able to serve mobilized families who live all over the country. To locate an ombudsman for a specific command, go to the Navy's Ombudsman Registry at <https://ombudsmanregistry.cnic.navy.mil>.

GEOGRAPHICALLY DISPERSED FAMILIES

When factoring in families (i.e., parents, grandparents, siblings) of single Sailors, families that move away from the homeport during deployments, recruiting duty and the Reserve community, it is highly likely that there will be some family members that live outside the local area. It can be challenging to help them feel a part of the command family and the Navy family. Some things you can do to maintain a connection with geographically dispersed families include:

- ★ Keep them informed.
- ★ Maintain a current Careline message.
- ★ Use command-approved social media tools; update them regularly.
- ★ Distribute newsletters at least monthly during a deployment.
- ★ Maintain an email distribution list. Send short notices and uplifting messages on a regular basis.
- ★ Be available to respond to calls.
- ★ Have a toll-free telephone number so families can contact you at no cost.

It is imperative that you get approval from service members to provide information to individuals who are not listed on the command roster. There may be a reason the service member does not want to maintain contact with family members.

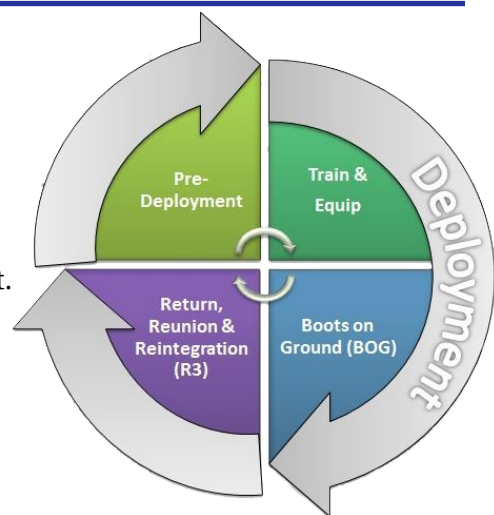
INDIVIDUAL AUGMENTEES

INTRODUCTION TO IAs

Individual augmentees (IAs) are Sailors with needed skills that are sent temporarily from their current command to assist, or augment, another command. The Navy tries to use volunteers, but when there are none with the required skills, non-volunteers are sent.

There may be Sailors from your command who are being sent on IA deployments. You can help these family members by explaining the IA process and connecting them with the appropriate resources.

IA assignments are not new to the Navy; it has always used service members to support another command as needed. For example, if a destroyer was getting ready to deploy and the independent corpsman could not get under



way for some reason, then an independent corpsman from another command would be assigned to deploy with the destroyer, generally until the assigned corpsman could meet the ship or until another corpsman was permanently assigned.

Sailors may be called upon to augment other branches of the military – primarily the Army and the Marine Corps. Sailors are supporting Soldiers and Marines on the ground anywhere they are needed in support of the Overseas Contingency Operations (OCO).

Although IA deployments are becoming more common and accepted, there are some unique aspects to an IA deployment when compared to a traditional Navy deployment. Some of the ways that an IA deployment differs from a traditional deployment include:

The command ombudsman may be able to assist with these by:

IA RESOURCES

Several organizations have a major role in the IA deployment process and family support. You should take the time to become familiar with them so you can provide appropriate referrals, when needed.

- ★ U.S. Fleet Forces Command (USFF)
- ★ Navy Expeditionary Combat Command (NECC)
- ★ Expeditionary Combat Readiness Center (ECRC)
- ★ Navy Mobilization Processing Sites (NMPS)
- ★ Command Individual Augmentee Coordinator (CIAC)
- ★ Fleet and Family Support Center (FFSC)

IA SUPPORT

U.S. Fleet Forces Command www.public.navy.mil/usff/Pages/default.aspx

NAVADMIN 160/08, *Individual Augmentation Policy Update*, issued in July 2008, announced the assignment of U.S. Fleet Forces Command (USFF) as the executive agent and supported commander for IA Sailors and IA family support across the IA continuum.



USFF:

- ★ Is dedicated to providing consistent, comprehensive support to IAs and their families throughout the entire IA process.
- ★ Issues regular IA Grams with up-to-date information on topics pertaining to IA matters. All IA Grams can be found at www.public.navy.mil/ia/Pages/iagrams.aspx.
- ★ Has established a website for up-to-date IA support information at www.public.navy.mil/ia/Pages/index.aspx.



Navy Expeditionary Combat Command www.public.navy.mil/necc/Pages/default.aspx

NECC manages readiness, resources, training and equipping of the Navy's 21,000 expeditionary forces. These include:

- ★ Coastal Riverine Force
- ★ Explosive Ordnance Disposal
- ★ Naval Construction Force (NCF) Seabees
- ★ Navy Expeditionary Intelligence Command (NEIC)
- ★ Expeditionary Combat Camera (COMCAM)
- ★ Navy Expeditionary Logistics Support Group (NAVELSG)
- ★ Expeditionary Combat Readiness Center (ECRC)



Expeditionary Combat Readiness Center www.public.navy.mil/necc/ecrc/Pages/default.aspx

The Expeditionary Combat Readiness Center (ECRC) is part of the NECC. The ECRC provides support to IA Sailors and their families. It:

- ★ Provides training on services available for families.
- ★ Is the primary stateside POC for all theater-related family issues.
- ★ Is the conduit for communications with U.S. Naval Forces Central Command (COMUSNAVCENT) for family issues.
- ★ Moderates the Navy Knowledge Online (NKO) "Family Community of Practice" website.
- ★ NKO's Web portal, www.nko.navy.mil, has the most current information for Sailors and their families regarding IA tours. A mandatory deployment checklist is posted for all IA Sailors to complete.



Navy Mobilization Processing Sites www.cnmc.navy.mil/om/administrative_services/nmps.html

Navy Mobilization Processing Sites (NMPS) handle active-duty IAs and Reserve Component (RC) Mobilization IAs. The purpose of the processing site is to ensure the Sailor is ready to deploy (with RC Mobilization personnel also demobilizing at NMPS at the conclusion of their IA tour). Deployment briefings and reviews of medical, dental, training and personnel records are completed and the Sailor is determined to be ready to deploy. Most IA Sailors spend only a few days at NMPS.



Command Individual Augmentee Coordinator www.public.navy.mil/ia/Pages/ciacinformation.aspx

A Command Individual Augmentee Coordinator (CIAC), pronounced “kayak,” is the essential link between the parent command and the IA Sailor and their family. Important facts about the CIAC include:

- ★ The CIAC does not replace the command ombudsman but works with the ombudsman to support the command’s IA Sailors and their families.
- ★ The CIAC should be the first point of contact for IA Sailors and their families if they have questions or problems at any time during their IA deployment.
- ★ The CIAC should also be the command’s subject matter expert in all areas that relate to IAs. CIACs will ensure that their IA Sailors are prepared for deployment, supported throughout the deployment cycle and welcomed home, as directed in IA Gram 5 (NAVADMIN 099/09, *Individual Augmentation [IA] Gram #5—Assignment of Command Individual Augmentee Coordinator*).
- ★ CIACs will inform the CO of any issues affecting their IA Sailors and families.
- ★ All Sailor and family contacts will be recorded in the Navy Family Accountability and Assessment System (NFAAS) at <https://navyfamily.navy.mil/> or through the NFAAS app available on IOS and Android devices.

A proactive and involved CIAC can mean the difference between a positive and a negative IA tour by answering questions and providing assistance, when needed.



Fleet and Family Support Program www.cnic.navy.mil/ffr/family_readiness.html

The Fleet and Family Support Program (FFSP) promotes resiliency in service members and families, supports mission readiness and helps build a network of services through community outreach and partnership. The FFSP offers Sailors and their families support services when and where they are needed through 80 service delivery sites worldwide. Encourage command families to take advantage of the services provided through their local FFSC.

Families can follow FFSP on:

- ★ Facebook at www.facebook.com/navyffsc
- ★ Twitter at www.Twitter.com/Fleet_Family

They can also follow CNIC on:

- ★ Facebook at www.facebook.com/NavyInstallations
- ★ Twitter at <https://twitter.com/cnichg>

TheselinksareavailableontheFFSPwebsiteatwww.cnic.navy.mil/ffr/family_readiness.html.

Additional services available through CNIC's Fleet and Family Readiness (FFR) programs include:

- ★ Family readiness.
- ★ Fleet readiness.
- ★ Housing.

Follow FFR on Facebook at www.facebook.com/navyffr.

PARENT COMMAND ROLES AND RESPONSIBILITIES

There are a number of ways the parent command can maintain the connection between IA Sailors, their families and the command. Commands:

- ★ Will assign at least one CIAC and instruct them to maintain at least monthly contact with IA Sailors via telephone or Internet and keep a record of contacts in NFAAS.
- ★ May periodically acknowledge those serving in IA assignments in the command plan of the day (POD).
- ★ Should periodically make a telephone call or send a letter or email from the CO, executive officer (XO) or CMC to IA Sailors and/or their families.
- ★ Ensure welcome-home arrangements have been made when a Sailor from the command returns from an IA assignment.
- ★ Welcome IA Sailors back from their temporary duty during all-hands calls, in the Pod, via a command newsletter or through other means.
- ★ Reorient IA Sailors to the command. While attendance at a full session of command indoctrination may not be necessary, a command "update" is in order.

OMBUDSMAN ROLES AND RESPONSIBILITIES

When working with IA Sailors and family members, you should:

- ★ Understand the unique aspects of IA assignments.
- ★ If requested by your command, maintain monthly contact with IA families, unless otherwise directed by the family, via telephone, Internet or in person. Document contacts for inclusion in the Ombudsman Registry.
- ★ Communicate with CIACs and know who the IA Sailors are at their commands.
- ★ Know the local individual deployment support specialist (IDSS) at the FFSC.
- ★ Inform the CO and CIAC of any concerns expressed by IA families.
- ★ Include IA families on any command correspondence, such as newsletters, telephone trees, social rosters, etc.
- ★ Link IA families to the ECRC via its:
 - Website: www.ECRC.Navy.mil
 - IA Family Helpdesk: ecrc.fs.fct@navy.mil
 - IA family support's toll-free line: 877-364-4302
- ★ Ensure IA families are aware of the USFF IA website at www.ia.Navy.mil.

OVERSEAS CONTINGENCY OPERATIONS SUPPORT ASSIGNMENTS

OSA is an acronym for Overseas Contingency Operations Support Assignments. Overseas Contingency Operations (OCO) has replaced the global war on terrorism (GWOT) assignment process for enlisted Sailors.

Service members who volunteer and are selected for OSA billets will receive orders that take them from their parent command to their check-in site (NMPS), through training and into a country for their assignment. Upon completion of the assignment, the member will return to their parent command.

The OSA business policy process and procedures are outlined in NAVADMIN 334/10, *Individual Augmentation (IA) Gram 08, Individual Augmentation Overseas Contingency Operations Support Assignment (OSA) Business Rules for Enlisted Personnel*.

ADDITIONAL SPECIAL COMMANDS

Within the Navy, there are several types of communities or commands, known as type commands (TYCOMS). Each has a similar structure but a different mission and culture. Navy TYCOMS include:

- ★ Surface
- ★ Aviation
- ★ Submarine
- ★ Reserve commands
- ★ Expeditionary warfare
- ★ Special warfare
- ★ Shore commands
- ★ Recruiting commands
- ★ Pre-commissioning units
- ★ Forward-deployed commands

All family members feel the effects of deployment in their own unique way, and all have to cope with their own tasks and emotions. The length of deployment, the mission, the presence or absence of communication, and the level of danger affect service members and their families.

SURFACE COMMUNITY

The surface community consists of ships that sail the surface of the seas. Characteristics of the surface community include:

- ★ Communications vary. Email, Sailor phones and mail are available, but not always on a regular basis. It is possible, however, to communicate with the deployed service member.
- ★ Crews on many surface ships consist of both male and female Sailors.
- ★ The Navy is experimenting with crew rotation by leaving ships deployed and changing entire crews.
- ★ Missions vary, from showing the flag to combat.
- ★ Naval amphibious vessels transport Marines.

- ★ Ships can make port calls.
- ★ Ships vary in the number of personnel, from fewer than 100 to almost 3,000.
- ★ Examples include: USS Momsen (DDG 92), USS Wasp (LHD 1) and USS Whirlwind (PC 11).

AVIATION COMMUNITY

The aviation, or air, community consists of both aircraft and aircraft carriers. Characteristics of the air community include:

- ★ The deployment cycle is similar to that of the surface community.
- ★ Some aviation squadrons deploy on ships, while others deploy to land-based locations.
- ★ Missions may be classified.
- ★ Some squadrons have detachments, or dets, which are a small number of the crew who are separated from the rest of the squadron.
- ★ Communications vary. Email, Sailor phones and mail are available, but not always on a regular basis. It is, however, possible to communicate with the deployed service member.
- ★ Examples include: USS George H.W. Bush (CVN 77), Strike Fighter Squadron (VFA) 143 and Carrier Airborne Early Warning Squadron (VAW) 115.

SUBMARINE COMMUNITY

The submarine community consists of three types of submarines: fast-attack (SSN), ballistic missile (SSBN)—also known as tridents or “boomers”—and guided missile (SSGN). Characteristics of the submarine community include:

- ★ Submarine crews have been integrated to include female officers and enlisted personnel. Both male and female submariners are specially selected.
- ★ Missions are often classified.
- ★ Fast-attack subs have one crew that deploys for six to eight months at a time.
- ★ SSBNs have “blue” and “gold” crews that operate on 105-day deployment cycles. Each crew completes a deployment cycle; the crews then combine for a maintenance period known as a “refit.”
- ★ SSGNs refit away from homeport, making deployments longer than the SSBN deployments.
- ★ It is difficult to have regular communication. Due to Operations Security (OPSEC) and mission requirements, email is available on a limited basis.
- ★ There may or may not be port calls.
- ★ Examples include: USS Asheville (SSN 758), USS Wyoming (SSBN 742) and USS Ohio (SSGN 726).

RESERVE COMMANDS

In general, Reservists:

- ★ Are a vital source of trained, mission-capable individuals and units.
- ★ May or may not have active-duty military experience.

- ★ Do not necessarily live near a Navy port.
- ★ Currently comprise more than 20 percent of total Navy assets.
- ★ May be called to active-duty service as individuals or an entire unit.

NAVY EXPEDITIONARY COMBAT

Navy Expeditionary Combat Command (NECC) includes Naval Construction Forces, also known as “Seabees,” Explosive Ordnance Disposal (EOD), Coastal Riverine Forces, Mobile Diving and Salvage and other expeditionary forces. Characteristics of this community include:

- ★ Deploy to sites throughout the world on a wide range of missions.
- ★ May deploy as a full group or as detachments (small groups).
- ★ Many expeditionary forces fly to their deployment sites.
- ★ Deployment lengths may vary; typical deployments are now approximately eight months.
- ★ Examples include: Naval Mobile Construction Battalion One (NMCB 1), Coastal Riverine Group One (CORIVGRU 1) and Explosive Ordnance Disposal Group One.

NAVAL SPECIAL WARFARE

Naval Special Warfare Command includes SEALs (Sea, Air and Land) and Special Warfare Combatant Craft (SWCC). Characteristics of special warfare commands include:

- ★ Small groups of highly trained Sailors operating as a cohesive unit on sea, air or land.
- ★ Although SEALs are all male, female support personnel may be deployed as part of a squadron.
- ★ Often on highly classified missions.
- ★ For security purposes, family members are generally not aware of the service member’s whereabouts.
- ★ Communication may be minimal or non-existent.
- ★ Deployment can occur with little or no notice for an unspecified period of time.
- ★ Examples of special warfare commands include: SEAL Team Two and Special Boat Team 12 (SBT 12).

SHORE COMMANDS

The shore establishment provides support to the fleet by operating:

- ★ Facilities for the repair of machinery and electronics.
- ★ Communications centers.
- ★ Training areas and simulators.
- ★ Ship and aircraft repair.

- ★ Intelligence and meteorological support.
- ★ Storage areas for repair parts, fuel and munitions.
- ★ Medical and dental facilities.
- ★ Air bases.

Shore duty assignments can be in the United States and overseas. Sailors assigned to shore commands may have to travel as part of their duties, but they are not likely to deploy for extended periods.

RECRUITING COMMANDS

Navy recruiting commands generally cover a large geographic area or region. Within a region, one or two active-duty Sailors are assigned to a smaller territory, where they attract and encourage civilian men and women to join the Navy. Key features of recruiting duty include:

- ★ Personnel have recruitment goals and often work long hours to achieve these goals.
- ★ The primary task of recruiters is to encourage civilians to join the Navy.
- ★ Families are frequently isolated from military installations and other military families.
- ★ Ombudsmen are appointed for each Navy recruiting district.

PRE-COMMISSIONING UNITS

While under construction, Navy vessels are not referred to as ships or boats but as pre-commissioning units (PCUs). A PCU has leadership assigned but generally will not have a full crew until construction is complete. On PCUs:

- ★ Crews are housed in buildings until the boat or ship is habitable.
- ★ Commands are generally not fully manned.
- ★ Crews attend training.
- ★ Crew, families and ombudsman may be geographically separated.
- ★ Programs, protocols and procedures must be developed.
- ★ Funding is not in place for all programs and services.

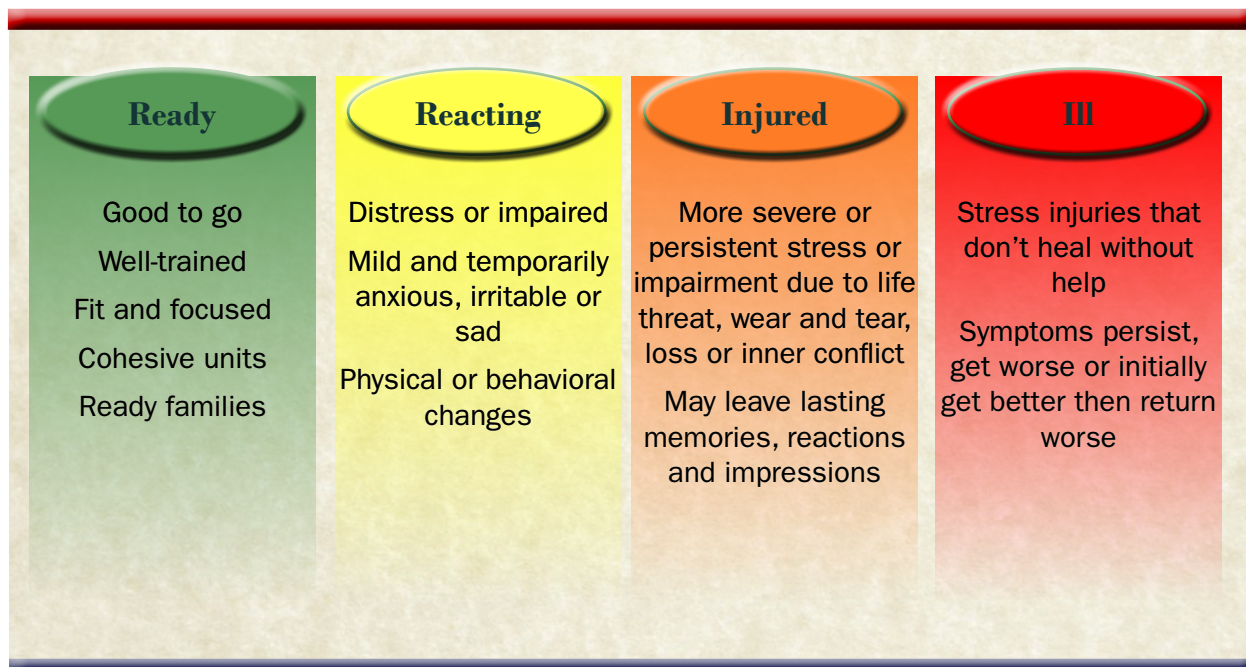
FORWARD-DEPLOYED COMMANDS

Forward-deployed ships include those homeported at overseas installations such as Japan, Guam and Spain. These vessels may experience higher operations tempo (OPTEMPO); they may be deployed more frequently than stateside ships.

OPERATIONAL STRESS CONTINUUM

You should be familiar with the Operational Stress Continuum in order to identify a possible need for referrals to the local FFSC, chaplain, medical, Veterans Affairs or Military OneSource.

The Stress Continuum consists of four stages: Ready, Reacting, Injured and Ill. The chart below describes the characteristics of each stage:



Combat and operational stress is not an illness; it may be the result of stressful conditions during training, deployment, humanitarian missions, government support missions and other assignments.

For more information, go to the Naval Center for Combat and Operational Stress Control at www.med.navy.mil/sites/nmcsc/nccosc/Pages/welcome.aspx.

POST-TRAUMATIC STRESS DISORDER

Post-traumatic stress disorder (PTSD) is an anxiety condition that can result from experiencing an event involving direct or indirect threat of death, serious injury or a physical threat. Such a life-threatening incident could be a car accident, a sexual assault, a natural disaster, a physical assault or military combat.

PTSD symptoms include:

- ★ Flashbacks of the event.
- ★ Nightmares.
- ★ Inability to feel a range of emotions.
- ★ Insomnia, difficulty concentrating.
- ★ Persistent anxiety.
- ★ Being easily startled.

If you notice behavioral changes in a Sailor or a family member, encourage them to contact a medical professional, FFSC counselor, chaplain or Military OneSource.

Links to wellness resources for the service members and families can be found via <http://afterdeployment.dcoe.mil>.

TRAUMATIC BRAIN INJURY

Traumatic brain injury (TBI) is one of the leading health issues among combat veterans. A TBI can be a penetrating injury or it can be a closed-head injury that is caused by a blow or a jolt to the head, or from bomb or mortar blasts.

Symptoms of mild TBI include:

- ★ Headaches.
- ★ Concentration problems, forgetfulness.
- ★ Irritability.
- ★ Excessive tiredness, sleep problems.
- ★ Vision changes, ringing in the ears.

Living with a service member who has suffered a TBI is one of the greatest challenges any family can face. Caregivers often say they do not need support, but research shows that a strong support network is essential for the family to function at a healthy level.

For more information about TBI, visit the Defense and Veterans Brain Injury Center website at <http://dvbic.dcoe.mil>, or call toll-free at 800-870-9244.

8.6 READINESS AND DEPLOYMENT SUCCESS STRATEGIES

Being separated from loved ones can be difficult, but many Navy families manage to remain strong. What are their success strategies? While families may develop their own ways of coping during extended separations, there are some common strategies. These include:

- ★ Developing a support system.
- ★ Being adequately prepared in such areas as finances, home and vehicle maintenance.
- ★ Communicating during the course of the separation.
- ★ Setting goals and working toward them.
- ★ Maintaining trust.
- ★ Maintaining physical and emotional health.
- ★ Using available resources, including their command ombudsman.

SUPPORT PROGRAMS

Additional support is available to help Sailors and family members prepare for and cope with the challenges of deployment and mobilization.

YELLOW RIBBON REINTEGRATION PROGRAM

www.jointservicesupport.org/yrrp

The Yellow Ribbon Reintegration Program is a DoD-wide effort to support National Guard and Reserve members and their families by connecting them with resources throughout the deployment cycle.



The Yellow Ribbon Reintegration Program works with the Departments of Labor and Veterans Affairs, the Small Business Administration, veteran service organizations and the American Red Cross to help service members and their families access benefits and services. The program provides assistance with entitlement subjects and issues, including:

- ★ TRICARE benefits and dental plans.
- ★ Referrals to counseling services, such as financial counseling and child and youth counseling services.
- ★ Veterans Affairs (VA) benefits and VA enrollment.
- ★ Substance abuse awareness and counterdrug programs.
- ★ Safety awareness.
- ★ Domestic violence and sexual assault awareness.
- ★ Emotional, psychological and behavioral services.
- ★ Marriage and singles enrichment.
- ★ Employment issues.

This is accomplished through Yellow Ribbon Reintegration Program events, which are held in every state. Most events involve group sessions and offer the chance to speak one-on-one with service providers, giving service members immediate access to professionals who can help answer their questions.

RETURNING WARRIOR WORKSHOP

www.public.navy.mil/ia/Pages/R3_FM_RWW.aspx

The Returning Warrior Workshop (RWW) is available to Reserve Component and active-duty Sailors who have served as IAs. Participants learn how to overcome the challenges of returning to civilian life. Events are held at a hotel over a weekend, and all lodging, meals and conference fees are covered. The intent of the workshop is to give the Sailor and their loved ones a chance to reconnect.

Qualifying participants include Reserve and active-duty Sailors who have served as IAs and one guest. The guest can be a spouse, significant other, close family member or friend.

Facilitators lead warriors and their guests through presentations and tabletop discussions that address returning home from extended deployments, post-combat stress and transition to civilian life. The goals of RWW include:

- ★ Honoring the warrior and the warrior's guest for their service.
- ★ Providing information about the resources available for the family that will assist with reintegration into civilian life.
- ★ Raising awareness about the symptoms associated with combat stress and providing the service member with resources for assessment and referrals.

Topics covered include:

- ★ Warrior Transitions
- ★ Spiritual Balance and Well-Being
- ★ Telling Your Story
- ★ Improving The Process
- ★ Transformational Growth
- ★ Military Families
- ★ Combat Operational Stress
- ★ Financial Management
- ★ Couples Communication
- ★ Why I Want to Go Back
- ★ Stress Management

RWW is held at locations nationwide throughout the year to welcome returning warriors and help them integrate back into civilian life.

ACTIVITY: READINESS SUPPORT STRATEGIES

Use the space provided to make notes about ways ombudsmen can support the Navy communities listed.

Surface: _____

Submarine: _____

Aviation: _____

Expeditionary warfare: _____

Special warfare: _____

Other: _____

SUMMARY

Preparation is the key to deployment success for the command, Sailors and their families. Command leadership focuses on maintaining command readiness for deployment—training, equipment and safety. You can support family readiness by educating families about common emotions, helpful resources and coping strategies. This will ensure that Sailors and their families are prepared to successfully navigate the challenges of deployment.

NOTES:

Module 6: Information and Referral

Module 7: Crisis Calls and Disasters

Module 8: Deployment and Mobilization

9.2 WHAT'S NEXT?

Now that you have completed Ombudsman Basic Training (OBT), we hope that you are excited to face your new responsibilities and are ready to share your knowledge. Even with training and your experience as a Navy spouse, you may encounter situations or questions that are new to you. Remember that you are not expected to know how to handle every situation or have an instant answer to every question. Rely on your resources to help you tackle each new challenge:

- ★ Your commanding officer (CO) should be your primary contact, however, he or she may designate a point of contact (POC) for any day-today issues you encounter. Arrange to have regular communication with the CO. Use the *Getting Started Checklist* found in Module 2 of this manual as a guide for this meeting. It benefits everyone when the entire command leadership team is clear on everyone's role and responsibilities.
- ★ The command POC, usually the command master chief (CMC) or chief of the boat (COB), is someone with whom you should have regular contact. Your POC can help you with the daily issues that arise and point you to the appropriate resource.
- ★ The command support team spouses may be another resource for you. They are often willing to serve as advisers to the ombudsman. Many will attend OBT with you so that they have a clear understanding of the Ombudsman Program. Ask your CO or POC if their spouses are interested in assuming this role.
- ★ Another valuable resource is the ombudsman coordinator. These Fleet and Family Support Center (FFSC) staff members maintain rosters for all installation ombudsmen. They ensure that you receive updated information, and they communicate with the various commands at the installation. Reserve Component Command (RCC) Warrior and Family Support Specialists provide the same service to Reserve ombudsmen. If you have not met your ombudsman coordinator, or have not had any contact recently, call or send an email to make a connection.
- ★ Become familiar with the programs provided at your FFSC. FFSC staff are more than willing to provide support to ombudsmen and family members.
- ★ Participate in ombudsman assembly meetings and advanced training. If you live near an FFSC, make every effort to attend these events. They provide valuable training, program updates and an opportunity to network with other ombudsmen. Attendance is required per the OPNAVINST 1750.1 series, *Navy Family Ombudsman Program*.
- ★ If you do not live near an FFSC and cannot attend meetings and trainings, check out the Ombudsman Program webinars. Monthly webinars are offered both by Commander, Navy Installations Command (CNIC) and throughout many regions. The schedule for CNIC's offerings can be found on the Ombudsman Registry at <https://ombudsmanregistry.cnic.navy.mil> or the FFSP webpage at https://www.cnic.navy.mil/ffr/family_readiness/fleet_and_family_support_program/ombudsman_program/ombudsman_training_materials.html. Guidance for creating an account and using the webinar platform is provided on these sites. Check with your ombudsman coordinator for regional webinars.

- ★ The Ombudsman Registry is an important resource for ombudsmen and command leadership as well as Ombudsman Program staff. Information received via e-bulletin may be used in your command newsletter. Ombudsmen and family members can locate and contact ombudsmen through the registry. You can also request assistance through the support feature of the registry.
- ★ The U.S. Navy Ombudsman Program Discussion Group is a resource for information updates, sharing concerns and issues, and an opportunity to talk with other ombudsmen.
- ★ The *Navy Family Ombudsman Program Manual* is a great resource. When you have questions, refer to your manual for the answer. Spend time becoming familiar with the content. Take additional time to review the OPNAVINST 1750.1 series. This is the governance for the Ombudsman Program and a document with which you should become familiar.

9.3 COURSE EVALUATION

Please complete the Ombudsman Basic Training Course Evaluation on the following page. This information will be used to improve the quality of the course.

SUMMARY

You have learned a lot of new information, and have a better understanding of your role and responsibilities as an ombudsman.

Be sure to talk with your CO when you have questions or concerns about your duties. Call on your support network for additional resources or strategies for handling situations that arise.

Remember, you have resources to assist you as you provide support to command families.

OPNAVINST 1750.1 series contains the policy that governs the Navy Family Ombudsman Program. If you have questions about your responsibilities, turn to the instruction for guidance.

Everything you learned in training is included in this manual. Read it, make notes in it and turn to it when you have questions.

- ★ Your commanding officer and/or POC want the best for you and should be standing by to lend support and guidance.
- ★ The FFSC Ombudsman Coordinator or RCC Warrior and Family Support Specialists are available to answer questions, provide updates to the program and ensure that you have a reliable source of current information.
- ★ Once you are registered in the Ombudsman Registry, you will receive the most current information concerning program updates/changes and opportunities for your command families via bulletins.

- ★ On-going training is available at the FFSC and via online webinars; many of the webinars are recorded for later access. Your coordinator can help you stay abreast of all training opportunities. To join the U.S. Navy Ombudsman Program Discussion Group at <https://www.facebook.com/groups/242277432495/#!/groups/242277432495/>, you must be registered in the Ombudsman Registry, www.ombudsmanregistry.cnic.navy.mil.

Ombudsman Assembly Meetings will allow you to network and interact with the ombudsmen in your local base/installation or region.

The U.S. Navy Ombudsman Discussion Group on Facebook is a great way to network and interact with other ombudsmen, especially for those who may be with a command that is geographically dispersed.

You are not alone on this journey—reach out for the help that is in place for you and enjoy your volunteer role as command ombudsman. Thank you for volunteering to become an ombudsman and for the work that you do to support our military families!

OMBUDSMAN BASIC TRAINING

NAVY FAMILY OMBUDSMAN PROGRAM STANDARDIZED EVALUATION FORM

Name: _____ (optional)

Command: _____ (optional)

| Overall rating of the course (please check one) | Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree |
|---|----------------|-------|---------|----------|-------------------|
| My knowledge has increased after attending OBT. | | | | | |
| I found the material easy to understand. | | | | | |
| The activities helped me learn the material. | | | | | |
| The instructor was knowledgeable and competent. | | | | | |
| The instructor encouraged my participation. | | | | | |
| The learning environment was comfortable. | | | | | |
| This course has met my expectations. | | | | | |
| This course has helped prepare me in my role as an ombudsman or member of the command support team. | | | | | |

Overall Rating of Course (circle one): 1 = Very Poor 2 = Poor 3 = Fair 4 = Good 5 = Excellent

What did you like most about the course? _____

What did you like least about the course? _____

Is there anything else you would like to share? _____



APPENDIX A

RESOURCES

2-1-1: www.211.org

After Deployment: <https://afterdeployment.dcoe.mil>

Air Force Aid Society (AFAS): www.afas.org

American Red Cross (ARC): www.redcross.org

Are You Ready? Disaster Preparedness Guide: www.fema.gov/media-library/assets/documents/7877

Army Emergency Relief (AER): <https://www.aerhq.org>

Casualty Assistance: www.cnic.navy.mil/om/base_support/command_and_staff/CasualtyAssistance.html

Casualty Support: www.public.navy.mil/bupers-npc/support/casualty/caco

Child Development Program Request for Care Record: www.dtic.mil/whs/directives/forms/eforms/dd2606.pdf

Claim for Reimbursement for Expenditures on Official Business: www.gsa.gov/portal/forms/download/150834

CNIC Ombudsman Program Overview: www.cnic.navy.mil/ffr/family_readiness/fleet_and_family_support_program/ombudsman_program.html

Coast Guard Mutual Assistance (CGMA): www.cgmahq.org.

Combat and Operational Stress Control (COSC): www.med.navy.mil/sites/nmcsc/nccosc

Command IA Coordinator (CIAC): www.public.navy.mil/ia/Pages/ciacinformation.aspx

Commander, Navy Installations Command (CNIC) Facebook: www.facebook.com/NavyInstallations

Commander, Navy Installations Command (CNIC) Twitter: <https://twitter.com/cnichg>

Copyright Office: www.copyright.gov

Defense Finance and Accounting Service (DFAS): www.dfas.mil

Department of Defense Education Activity Educational Partnership: www.dodea.edu/partnership

Disaster Ready: www.volunteerflorida.org/wp-content/uploads/2013/03/DisasterGuide.pdf

Document Services Online (DSO): www.dla.mil/HQ/InformationOperations/DocumentServices/UserGuides.aspx

Emergency Management Agencies: www.fema.gov/emergency-management-agencies

Exceptional Family Member Program (EFMP): www.public.navy.mil/bupers-npc/support/efm

Expeditionary Combat Readiness Center (ECRC): www.public.navy.mil/necc/ecrc

Family Readiness: www.cnlic.navy.mil/ffr/family_readiness.html

Federal Emergency Management Agency (FEMA): www.fema.gov

Fleet and Family Readiness Facebook: www.facebook.com/navyffr

Fleet and Family Support Center Twitter: www.twitter.com/Fleet_Family

Fleet and Family Support Program: www.cnlic.navy.mil/ffr/family_readiness/fleet_and_family_support_program.html

Fleet and Family Support Program Facebook: www.facebook.com/navyffsc

Human Performance Resource Center: <http://hprc-online.org/mind-body/stress-management>

Individual Augmentee (IA) Family Helpdesk: ecrc.fs.fct@navy.mil

Manpower and Reserve Affairs: <http://ra.defense.gov>

Mileage Reimbursement Rates: www.gsa.gov/portal/content/100715

Military OneSource: www.militaryonesource.mil/health-and-wellness/managing-stress

National Foundation for Credit Counseling (NFCC): www.nfcc.org

National Organization for Victim Assistance (NOVA): www.trynova.org

Naval Center for Combat and Operational Stress Control: www.med.navy.mil/sites/nmcsc/nccosc/serviceMembersV2/stressManagement

Naval Criminal Investigative Service (NCIS): www.ncis.navy.mil

Naval Services FamilyLine: www.nsfamilyline.org

Navy 311: www.public.navy.mil/spawar/peoeis/navy311

Navy Expeditionary Combat Command (NECC): www.public.navy.mil/necc

Navy Gold Star Program: www.navygoldstar.com

Navy Housing: www.cnlic.navy.mil/ffr/housing.html/onestop

Navy Individual Augmentee: www.public.navy.mil/ia

Navy Judge Advocate General (JAG): www.jag.navy.mil/legal_services.htm

Navy Mobilization Processing Sites (NMPS): www.cnlic.navy.mil/om/administrative_services/nmps.html

Navy Personnel Command (NPC): www.public.navy.mil/bupers-npc/psd

Navy Personnel Command Support Services: www.public.navy.mil/bupers-npc/support

Navy Public Affairs Guide for Ombudsmen: www.navy.mil/ah_online/OPSEC/docs/Policy/Navy_Public_Affairs_Guide_for_Ombudsmen.pdf

Navy Ranks and Rates: www.navy.mil/navydata/ranks/rankrate.html

Navy Wounded Warrior/Safe Harbor: <http://safeharbor.navylive.dodlive.mil>

Navy-Marine Corps Relief Society (NMCRS): www.nmcrs.org

Ombudsman Program Webinars: <http://learning.zeiders.com>

Ombudsman Registry: <https://ombudsmanregistry.cnicy.navy.mil>

Operations Security (OPSEC): www.navy.mil/ah_online/OPSEC

Privacy and PII Awareness Online Training: www.doncio.navy.mil/PIICourse

Rank Insignia Charts: www.defense.gov/About-DoD/Insignias

Ready Navy: www.ready.navy.mil

Ready.gov: www.ready.gov

Restricted/Unrestricted Reporting Options: www.cnicy.navy.mil/ffr/family_readiness/fleet_and_family_support_program/family_advocacy/restricted_unrestricted_options.html

Returning Warrior Workshop (RWW): www.public.navy.mil/ia/Pages/R3_FM_RWW.aspx

Safe Helpline: <https://www.safehelpline.org>

School Liaison Officers (SLO): www.dodea.edu/Partnership/schoolLiaisonOfficers.cfm

Sexual Assault Prevention and Response (SAPR): www.cnicy.navy.mil/ffr/family_readiness/fleet_and_family_support_program/sexual_assault_prevention_and_response.html

TRICARE: www.TRICARE.mil

TRICARE Customer Service Community Directory: www.tricare.mil/bcacdcao?sc_database=web

TRICARE Mental Health Care: www.tricare.mil/mentalhealth

U.S. Fleet Forces Command (USFF): www.public.navy.mil/usff

United Service Organizations (USO): www.uso.org

United States Office of Government Ethics: <https://www.oge.gov/>

Volunteer Agreement Form: www.dtic.mil/whs/directives/forms/eforms/dd2793.pdf

Yellow Ribbon Reintegration Program (YRRP): www.jointservicessupport.org/yrrp



APPENDIX B

ACRONYMS AND ABBREVIATIONS

- ACT:** Ask, Care, Treat
- AER:** Army Emergency Relief
- AFAS:** Air Force Aid Society
- AOR:** Area of Responsibility
- ARC:** American Red Cross
- CAC:** Common Access Card
- CACO:** Casualty Assistance Calls Officer
- CCCS:** Consumer Credit Counseling Service
- CDC:** Child Development Center
- CDH:** Child Development Home
- CFS:** Command Financial Specialist
- CIAC:** Command Individual Augmentee Coordinator
- CMC:** Command Master Chief
- CNIC:** Commander, Navy Installations Command
- CNO:** Chief of Naval Operations
- CO:** Commanding Officer
- COB:** Chief of the Boat
- COT:** Certified Ombudsman Trainer
- CST:** Command Support Team
- CWO:** Chief Warrant Officer
- CYP:** Child and Youth Program
- DAPA:** Drug and Alcohol Program Adviser
- DFAS:** Defense Finance and Accounting Service
- DoD:** Department of Defense
- DoN:** Department of the Navy
- DoN CIO:** Department of the Navy Chief Information Officer
- DRT:** Deployment Readiness Training
- ECHO:** Extended Care Health Option
- ECRC:** Expeditionary Combat Readiness Center
- EFMP:** Exceptional Family Member Program
- eOBT:** Electronic Ombudsman Basic Training (online version of OBT)
- EOD:** Explosive Ordnance Disposal
- FAP:** Family Advocacy Program
- FAR:** Family Advocacy Representative
- FEMA:** Federal Emergency Management Agency
- FERP:** Family Employment Readiness Program
- FFR:** Fleet and Family Readiness
- FFSC:** Fleet and Family Support Center
- FFSP:** Fleet and Family Support Program
- FRG:** Family Readiness Group
- FY:** Fiscal Year
- GSA:** General Services Administration
- HSC:** Housing Service Center
- HEAT:** Housing Early Assistance Tool
- I&R:** information and Referral
- IA:** Individual Augmentee
- IAMM:** Individual Augmentation Manpower Management
- IDSS:** Individual Deployment Support Specialist
- ITO:** Invitational Travel Orders
- LDO:** Limited Duty Officer

| | |
|---|--|
| LES: Leave and Earnings Statement | POD: Plan of the Day |
| MCPON: Master Chief Petty Officer of the Navy | POW: Plan of the Week |
| MTF: Medical Treatment Facility | PRD: Projected Rotation Date |
| MWR: Morale, Welfare and Recreation | PSD: Personnel Support Detachment |
| NAF: Non-Appropriated Funds | R&R: Return and Reunion |
| NECC: Navy Expeditionary Combat Command | RAINN: Rape, Abuse and Incest National Network |
| NFAAS: Navy Family Accountability and Assessment System | RAP: Relocation Assistance Program |
| NMCRS: Navy-Marine Corps Relief Society | RCC: Reserve Component Command |
| NMPS: Navy Mobilization Processing Sites | RLSO: Region Legal Service Office |
| NOST: Naval OPSEC Support Team | ROI: Return on Investment |
| NPS: New Parent Support | SAPR: Sexual Assault Prevention and Response |
| OBT: Ombudsman Basic Training | SAPR VA: Sexual Assault Prevention and Response Victim Advocate |
| OCO: Overseas Contingency Operations | SARC: Sexual Assault Response Coordinator |
| OPNAVINST: Office of the Chief of Naval Operations Instruction | SEAL: Sea, Air and Land |
| OPSEC: Operations Security | SECO: Spouse Education and Career Opportunities |
| OPTEMPO: Operations Tempo | SELRES: Selected Reserve |
| OSA: Overseas Contingency Operations Support Assignment | SLO: School Liaison Officer |
| PACT: Problem, Assess, Choose, Try | SWCC: Special Warfare Combatant Craft |
| PAO: Public Affairs Officer | TAD: Temporary Additional Duty |
| PCS: Permanent Change of Station | TDY: Temporary Duty |
| PCU: Pre-Commissioning Unit | USFF: United States Fleet Forces Command |
| PFM: Personal Financial Management | USO: United Service Organizations |
| PII: Personally Identifiable Information | WIIFM: What's in It for Me |
| POC: Point of Contact | XO: Executive Officer |



APPENDIX C

OMBUDSMAN FORMS

CHILD DEVELOPMENT PROGRAM REQUEST FOR CARE (DD 2606)

CLAIM FOR REIMBURSEMENT (OF 1164)

CONTACT LOG

FAMILY MEMBER MEDICAL SUMMARY (DD FORM 2792)

GETTING STARTED CHECKLIST

OMBUDSMAN INDIVIDUAL CONTACT LOG

SAMPLE APPOINTMENT LETTER

SAMPLE OMBUDSMAN ASSEMBLY INSTRUCTION

SAMPLE OMBUDSMAN ASSEMBLY CHAIRPERSON DUTIES

SAMPLE RESIGNATION LETTERS

SAMPLE TRAINING RECORD

SPECIAL EDUCATION/EARLY INTERVENTION SUMMARY (DD 2792-1)

VOLUNTEER AGREEMENT (DD 2793)

| | | | | | | |
|--|----|---|---|--|---|---|
| DEPARTMENT OF DEFENSE CHILD DEVELOPMENT PROGRAM REQUEST FOR CARE RECORD <i>(Read Privacy Act Statement and Instructions on back before completing form.)</i> | | | | | OMB No. 0704-0515 OMB approval expires May 31, 2017 | |
| The public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, Executive Services Directorate, Information Management Division, 4800 Mark Center Drive, Alexandria, VA 22350-3100 (0704-0515). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. RETURN COMPLETED FORM TO THE APPROPRIATE CHILD AND YOUTH PROGRAM REPRESENTATIVE. | | | | | | |
| 1. DATE OF REQUEST (YYYYMMDD) | | | 2. EXPIRATION DATE (YYYYMMDD) (To be completed by Facility) | | | |
| 3. FAMILY INFORMATION | | | | | | |
| a. SPONSOR'S NAME (Last, First, Middle Initial) | | | b. SPOUSE'S NAME (Last, First, Middle Initial) | | | |
| c. CHILD'S NAME (Last, First, Middle Initial) | | | d. CHILD'S DATE OF BIRTH (YYYYMMDD) | | e. CHILD'S AGE | |
| f. HOME ADDRESS (Street, City, State, Zip Code) | | | g. SPONSOR'S BRANCH OF SERVICE | | | |
| | | | h. DUTY ORGANIZATION | | | |
| i. HOME TELEPHONE NUMBER (Include Area Code) | | | j. DUTY TELEPHONE NUMBER (Include Area Code) | | | |
| k. SIBLING CARE | | | | | | |
| (1) NAME (Last, First, Middle Initial) | | (2) DATE OF BIRTH (YYYYMMDD) | | (1) NAME (Last, First, Middle Initial) | | (2) DATE OF BIRTH (YYYYMMDD) |
| | | | | | | |
| 4. PROGRAM(S) DESIRED (X as applicable) | | | | 5. AGE GROUP (X one) | | |
| a. FULL-DAY CARE | | d. FAMILY DAY CARE (FDC) | | a. INFANTS (0 - 12 months) | | |
| b. PART-DAY CARE | | e. PART-DAY ENRICHMENT | | b. TODDLERS (13 - 35 months) | | |
| c. SCHOOL-AGE | | f. PRE-SCHOOL | | c. PRESCHOOL (3 - 5 years) | | |
| | | | | d. SCHOOL AGE (5+ years) | | |
| 6. SPONSOR STATUS (X one) | | | | | | |
| a. SINGLE MILITARY | | e. SINGLE DOD CIVILIAN | | i. MILITARY/UNEMPLOYED SPOUSE | | |
| b. DUAL MILITARY | | f. RETIRED MILITARY | | j. MILITARY/OTHER THAN DOD SPOUSE | | |
| c. MILITARY/DOD SPOUSE | | g. MILITARY RESERVE | | k. OTHER (Specify) | | |
| d. DUAL DOD CIVILIANS | | h. NATIONAL GUARD | | | | |
| 7. PRESENT CHILD CARE ARRANGEMENTS (X as applicable) | | | | | | |
| a. FCC ON-INSTALLATION | | d. CIVILIAN CDC | | g. IN-HOME CARE | | |
| b. FCC OFF-INSTALLATION | | e. MILITARY ALTERNATE CARE | | h. NO PRESENT CARE | | |
| c. OTHER MILITARY CHILD DEVELOPMENT CENTER (CDC) | | f. NON-MILITARY ALTERNATE CARE | | i. OTHER (Specify) | | |
| 8. GENERAL INFORMATION (X and complete as applicable) | | | | | | |
| YES | NO | a. IF CHILD IS NOT PRESENTLY IN CARE, IS EMPLOYMENT OF SPOUSE IMPACTED? (If Yes, estimate average annual income lost) | | YES | NO | c. IS CHILD ON OTHER MILITARY WAITING LIST? (If Yes, name installation) |
| | | | | | | |
| | | b. HAS CHILD BEEN IDENTIFIED FOR SPECIAL NEEDS CARE? | | d. CURRENT COST OF CARE PER WEEK (If child is currently in care) | | |
| | | | | | | |
| 9. ACCOMMODATION UPDATES/REVERIFICATION (For Office Use Only) | | | | | | |
| | | (1) | (2) | (3) | (4) | (5) |
| a. DATE CALLED (YYYYMMDD) | | | | | | |
| b. DECLINED/ PLACED | | | | | | |
| c. COMMENTS/ INITIALS | | | | | | |
| d. PLACEMENT TIME (In months) | | | | | | |

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 3013, Secretary of the Army; 10 U.S.C. 5013, Secretary of the Navy; 10 U.S.C. 5041, Headquarters, Marine Corps; 10 U.S.C. 8013, Secretary of the Air Force; DoD Instruction 6060.02, Child Development Programs; Army Regulation 608-10, Child Development Services; OPNAV Instruction 1700.9 series, Child and Youth Programs; Marine Corps Order P1710.30E, Children, Youth, and Teen Program (CYTP); Air Force Instruction 34-248, Child Development Programs; and Air Force Instruction 34-249, Youth Programs, and 34-276, Family Child Care.

PRINCIPAL PURPOSE(S): To collect applicant information for Child Development Programs and establish waiting lists for program services. This information may also be used for statistical analysis, tracking, reporting, and evaluating program effectiveness. When completed, records are covered by one of the appropriate SORNS:

Department of the Army: <http://dpclo.defense.gov/privacy/SORNSIndex/tabid/5915/article/6160/a0608-10-cfsc.aspx>;

Department of the Navy: <http://dpclo.defense.gov/privacy/SORNSIndex/tabid/5915/article/6527/nm01754-3.aspx>;

Department of the Air Force: <http://dpclo.defense.gov/privacy/SORNSIndex/DODwideSORNArticleView/tabid/6797/Article/5793/f034-af-sva-c.aspx>

ROUTINE USE(S): Department of the Army records may be disclosed to civilian health and welfare departments/agencies in emergencies.

Department of the Navy records may be disclosed to local, state and Federal officials involved in child care services, if required, in the performance of their official duties relating to child abuse reporting and investigations. Department of the Air Force records may be disclosed to civilian health and welfare departments/agencies in emergency situations.

DoD Blanket Routine Uses 1 (Law Enforcement), 4 (Congressional Inquiries), 6 (Required by International Agreement), 9 (Department of Justice for Litigation), 12 (National Archives and Records Administration), and 15 (Data Breach Remediation) specifically apply to this system. Other DoD Blanket Routine Uses found at <http://dpclo.defense.gov/Privacy/SORNSIndex/BlanketRoutineUses.aspx> may apply to these records. Any release under a blanket routine use will be compatible with the purpose of the collection.

DISCLOSURE: Voluntary; however, if you fail to furnish the needed information, you might not be added to a waiting list or notified when there is space for your child.

INSTRUCTIONS

This form is to be completed by authorized patrons (per Department of Defense Instruction 6060.02, Child Development Programs) and serves as the Official Request for Care for use of Department of Defense operated Child Development Programs. Providing this information is voluntary, but failure to complete the form may result in a denial of care.

1. Provide the date the request is completed.
2. To be completed by facility where care is requested. This form expires one year from the initial date of request.
3. Family Information.
 - 3.a. Provide the sponsor's last name, first name and middle initial.
 - 3.b. Provide the spouse's last name, first name and middle initial (when applicable).
 - 3.c. Provide the last name, first name and middle initial of the child for whom care is being requested.
 - 3.d. Provide the date of birth of the child for whom care is being requested.
 - 3.e. Provide the age of the child for whom care is being requested at the time of application.
 - 3.f. Provide the residential address of the child for whom care is being requested.
 - 3.g. Provide the sponsor's branch of service. For DoD civilians, provide the service or agency of employment. If this is not applicable, enter NA.
 - 3.h. Provide the organization to which the sponsor is employed. If this is not applicable, enter NA.
 - 3.i. Provide the home telephone number of the sponsor.
 - 3.j. Provide the work telephone number of the sponsor.
 - 3.k. If the family is requesting care for additional children, enter their last name, first name, middle initial and date of birth, and complete a separate form for each child when applicable.
4. Program(s) Desired.
 - Place an "X" to indicate the family's desire for where the child's need for care may be accommodated.
5. Age Group.
 - Place an "X" to indicate the age group that the child falls on the date of application.
6. Sponsor Status.
 - Place an "X" to indicate the status of the sponsor on the date of application.
 - For "Other", specify the sponsor's status.
7. Present Child Care Arrangements.
 - Place an "X" to indicate the present arrangement for child care of the child for whom care is being requested.
 - For "Other", specify the sponsor's status.
8. General Information.
 - 8.a. Indicate "Yes" or "No" if the lack of child care is impacting the ability of the spouse (where applicable) to find employment.
 - 8.b. Indicate "Yes" or "No" if the child has been identified for special needs care.
 - 8.c. Indicate "Yes" or "No" if the child is on other military waiting lists for child care. If, "yes", provide the name of the installation where the child is on a waiting list.
 - 8.d. If the child is currently accommodated in non-DoD child care, indicate the weekly cost for care.
9. To be completed by the facility only.

DD FORM 2606 (BACK), MAY 2014

**INSTRUCTIONS FOR COMPLETING DD FORM 2792,
FAMILY MEMBER MEDICAL SUMMARY**

GENERAL.

The DD Form 2792 and attached addenda are completed to identify a family member with special medical needs.

There is a Certification Section on page 3 that should be signed AFTER the entire form is completed by medical provider(s) and the form has been reviewed for completeness and accuracy.

The Parent/Guardian or Person of Majority Age signs block 11b, and the MTF coordinator/authorized reviewer signs block 12b.

A **Qualified Medical Provider** is responsible for assessing whether the services they are eligible to prescribe are within the scope of their practice and their state licensing requirements.

AUTHORIZATION FOR DISCLOSURE (Page 1)

Health Insurance Portability and Accountability Act (HIPAA) Requirement.

Each adult family member must sign for the release of his/her own medical information. The sponsor or spouse cannot authorize the release of information for those dependent family members who have reached the age of majority unless they are court-appointed guardians. Please consult with your military treatment facility (MTF) or dental treatment facility (DTF) privacy/HIPAA coordinator about questions regarding authorizations for disclosure.

DEMOGRAPHICS/CERTIFICATION (Page 2).

Item 1. Self-explanatory.

Item 2.a. Family Member (FM). Name of family member described in subsequent pages.

Item 2.b. Sponsor Name. Name of the military member responsible for the family member identified in Item 2.a.

Items 2.c. - e. Self-explanatory.

Item 2.f. Family Member Prefix (FMP). Applies to Military medical beneficiary only. The Family Member Prefix is assigned when the family member is enrolled in DEERS.

Item 2.g. DoD Benefits Number (DBN). This 11-digit number has two components. The first nine digits are assigned to the sponsor; the last two digits identify the specific person covered under that sponsor. The first nine digits do not reflect the sponsor's nine-digit SSN. The DBN can be found above the bar code on the back of the beneficiary's ID card. If the child has not been issued an ID card, enter the first 9 digits of the parent's DBN.

Items 2.h. - j. Self-explanatory.

Items 3.a. - h. All items refer to the sponsor. Self-explanatory.

Item 3.i. Annotate with an "X" whether the family member resides with the sponsor. If the family member does not, then provide an explanation.

Item 4.a. Answer Yes if both spouses are on active duty or if the enrolling spouse was a former member of the U.S. military. If Yes, complete Items 4.b. - e.

Item 5.a. - d. If Yes, enter SSN, name of sponsor and branch of Service. Military only.

Item 6.a. If Yes, complete b. - c. Self-explanatory.

Item 7. Identify current medically necessary adaptive equipment or special medical equipment used by the family member. Include make and model of the equipment.

Item 8. Required Actions. Self-explanatory.

Item 9. Required Addenda. To be completed by the EFMP/Screening Coordinator completing the administrative review/certification. Please note: Each addenda is completed, and submitted for EFMP review, only if applicable to the patient described. **SIGNATURE of a Qualified Medical Provider is REQUIRED.**

Items 10.a. - c. To be completed by the administrator in consultation with the family. Mark (X) all services being provided to the family member.

Items 11.a. - c. Parent/Guardian or Person of Majority Age. Parent/guardian or person of majority age certifies that the information contained in the DD 2792 is correct. **Individual must ensure that all applicable forms are completed and attached before signing.**

Items 12.a. - f. The MTF authorized case coordinator/administrator name, signature, date, location of military treatment facility or certifying EFMP program, telephone number, and official stamp. Self-explanatory. **Administrator must ensure that all forms are complete and attached before signing.**

MEDICAL SUMMARY beginning on page 4 must be completed by a qualified medical professional. Sponsor, spouse, or family member of majority age must sign release authorization on page 1 before this summary is completed. Please complete as accurately as possible using ICD-9-CM or, when approved, ICD-10-CM. If the patient has an asthma, mental health or autism spectrum disorder/developmental delay diagnosis, enter ONLY the diagnostic description/code on Page 4 and the remainder of the information on the appropriate attached addendum form.

Items 1.a. - c. Place an "X" in the appropriate box if the information is included in an addendum.

Items 2.a. - b. Primary Diagnosis. Enter the primary diagnosis and corresponding diagnostic code for the family member.

Items 3.a. - c. Medication History. Enter all current medications associated with the primary diagnosis, the dosage and frequency medication should be taken.

Items 4.a. - d. Hospital Support for the Last 12 Months. Enter the number of emergency room visits/urgent care visits, hospitalizations, ICU admissions, and number of outpatient visits.

Item 5. Prognosis. Self-explanatory.

Item 6. Treatment Plan for Primary Diagnosis. Include medical and/or surgical procedures, special therapies planned or recommended over the next three years. Also include the expected length of treatment, required participation of family members, and if treatment is ongoing.

Items 7. - 21. Secondary Diagnoses. Follow procedures for Items 2. - 6. above.

Item 22. Minimum Health Care Required. Codes in the first column are used by Army coding teams only. In column 1, mark with an X any specialists **REQUIRED** to meet the patient's needs. If a specialist was used to determine a diagnosis, and is not necessary for ongoing care, **DO NOT** place an X next to that specialist. If a developmental pediatrician is a child's primary care manager, but a pediatrician meets the needs, **DO NOT** mark developmental pediatrician. This section is not a wish list, but should reflect the providers that are necessary to meet the needs of the patient.

Items 23. - 26. Self-explanatory.

Items 27.a. - f. Provider Information. Official stamp or printed name and signature of the provider completing this summary, date the summary was signed, telephone number(s) for the provider, email and medical specialty.

INSTRUCTIONS FOR COMPLETING DD FORM 2792 *(Continued)*

ADDENDUM 1 - ASTHMA/REACTIVE AIRWAY DISEASE SUMMARY

(p. 8). **To be completed by a qualified medical professional.** This addendum is completed only if applicable to the patient described.

Item 1. Diagnostic Description Code. Enter the diagnostic description code (ICD-9-CM or, when approved, ICD-10-CM) for patients evaluated or treated for asthma within the past 5 years and continue the completion of the addendum and sign. **Signature of Qualified Medical Provider is REQUIRED in Item 5.b.**

Items 2. - 4. Self-explanatory.

Item 5.a. - f. Provider Information. Official stamp or printed name and signature of the provider completing this addendum, the date the summary was signed, the telephone number(s) for the provider, email, and medical specialty.

ADDENDUM 2 - MENTAL HEALTH SUMMARY (pp. 9 - 10). **To be completed and signed by a qualified medical professional.** This addendum is completed only if applicable to the patient described.

Items 1.a. - c. Diagnosis(es). Complete as accurately as possible using ICD-9-CM or, when approved, ICD-10-CM if the patient has current or past (within the last 5 years) history of mental health diagnosis (to include attention deficit disorders).

Items 2.a. - c. Medication History. Provide current medications, dosage, and frequency for diagnoses listed in Item 1.a.

Items 2.d. - e. Include any discontinued medication(s) related to the diagnosis(es), with reasons for discontinuing, and the frequency taken.

Items 3.a. - b. Therapy Received or Recommended. Include past compliance with treatment programs, frequency and expected length of treatment, required participation of family members, and if treatment is ongoing.

Items 4.a. - c. Treatment. Insert the number of outpatient visits in the **LAST YEAR**, the number of hospitalizations in the **LAST FIVE YEARS**, and the number of residential treatment admissions in the **LAST FIVE YEARS** (include the date of last admission).

Items 5.a. - h. History. Answer Yes or No, and include additional details as directed on the patient's mental health history for the last five years.

Items 6. - 9. Self-explanatory.

Items 10.a. - f. Provider Information. Official stamp or printed name and signature of the provider completing this addendum, the date the summary was signed, the telephone number(s) for the provider, email and medical specialty.

ADDENDUM 3 - AUTISM SPECTRUM DISORDERS AND SIGNIFICANT DEVELOPMENTAL DELAYS (p.11). **To be completed by a qualified medical professional.** This addendum is completed only if applicable to the patient described.

Item 1.a. - c. Indicate the diagnosis(es) using an X. Insert the date when diagnosed and select the appropriate specialty provider(s) or school-based team that diagnosed the patient.

Items 2. - 3. Self-explanatory.

Items 4.a. - d. Current Medications. List all current medications used to treat the diagnosis(es) listed in Items 1 and 3, the dosage, the frequency taken, and the reason prescribed.

Items 5.a. - e. Current Interventions/Therapies. Providing a list of current interventions and therapies is important information for the family travel determination for this patient. The information should be completed by a qualified medical professional in consultation with the family. Self-explanatory.

Item 6. Communication. Using an X, indicate if the patient is verbal or non-verbal. If non-verbal, indicate the appropriate communication methods used.

Item 7. Self-explanatory.

Item 8. Behavior. Answer yes if the child exhibits high risk or dangerous behaviors. Additional information may be included in item 13 if more space is required.

Item 9. Cognitive Ability. Indicate appropriate intelligence quotient (IQ), if known.

Items 10. - 11. Self-explanatory.

Item 12. Respite Care Received. Provide the number of hours per month, and the source, e.g., EFMP Respite Care Program, ECHO or Medicaid.

Item 13. General Comments. Self-explanatory.

Item 14. Provider Information. Official Stamp or printed name, signature, date signed, telephone number(s), official email and medical specialty. Self-explanatory.

| | | | |
|---|--------------------------------------|---|---|
| FAMILY MEMBER MEDICAL SUMMARY <i>(To be completed by service member, adult family member, or civilian employee.)</i> <i>(Read Instructions before completing this form.)</i> | | | OMB No. 0704-0411 OMB approval expires Jul 31, 2017 |
| The public reporting burden for this collection of information is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, Executive Services Directorate, Directives Division, 4800 Mark Center Drive, Alexandria, VA 22350-3100 (0704-0411). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. | | | |
| PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. | | | |
| PRIVACY ACT STATEMENT | | | |
| <p>AUTHORITY: 10 U.S.C. 136; 20 U.S.C. 927; DoDI 1315.19; DoDI 1342.12; and E.O. 9397 (SSN) as amended.</p> <p>PRINCIPAL PURPOSE(S): Information will be used by DoD personnel to evaluate and document the special medical needs of family members. This information will enable: (1) military assignment personnel to match the special medical needs of family members against the availability of medical services, and (2) civilian personnel officers to advise civilian employees about the availability of medical services to meet the special medical needs of their family members. The personally identifiable information collected on this form is covered by a number of system of records notices pertaining to Official Military Personnel Files, Exceptional Family Member or Special Needs files, Civilian Personnel Files, and DoD Education Activity files. The SORNS may be found at http://dpclo.defense.gov/Privacy/SORNSIndex/DODComponentNotices.aspx.</p> <p>ROUTINE USE(S): DoD Blanket Routine Uses 1, 4, 6, 8, 9, 12, and 15 found at http://dpclo.defense.gov/Privacy/SORNSIndex/BlanketRoutineUses.aspx may apply.</p> <p>DISCLOSURE: Voluntary for civilian employees and applicants for civilian employment. Mandatory for military personnel: failure or refusal to provide the information or providing false information may result in administrative sanctions or punishment under either Article 92 (dereliction of duty) or Article 107 (false official statement), Uniform Code of Military Justice. The Social Security Number of the sponsor (and sponsor's spouse if dual military) allows the Military Healthcare System and Service personnel offices to work together to ensure any special medical needs of your dependent can be met at your next duty assignment. Dependent special needs are annotated in the official military personnel files which are retrieved by name and Social Security Number.</p> | | | |
| AUTHORIZATION FOR DISCLOSURE OF MEDICAL INFORMATION | | | |
| By signing this authorization, you confirm you understand your sponsor will have access to the health information contained herein and in addenda. The sponsor may be held accountable for the accuracy and completeness of the DD 2792 and addenda and should review all pages prior to signing on page 2. | | | |
| I authorize _____ (MTF/DTF/Civilian Provider) (Name of Provider) | | | |
| to release my patient information to the Relocation or Suitability Screening Office and/or the Exceptional Family Member/Special Needs Program to be used in the family travel review process and/or registration in the Exceptional Family Member Program. The information on this form and addenda may be used for DoD and Service-specific programs to determine whether there are adequate medical, housing and community resources to meet your medical needs at the sponsor's proposed duty locations. | | | |
| a. The military medical department will use the information to determine recommendations on the availability of care in communities where the sponsor may be assigned or employed. | | | |
| b. Information that you have a special need (not the nature or scope of the need) may be included in the sponsor's personnel record or be maintained in the community office responsible for supporting families with special needs, if EFMP enrollment criteria are met. | | | |
| c. The authorization applies to the summary data included on the medical summary form, its addenda and subsequent updates to information on this form. These data may be stored in electronic databases used for medical management or dedicated to the assignment process. Access to the information is limited to representatives from the medical departments, the offices responsible for assignment coordination, and at your request other military agents responsible for care or services. Summary data may be transmitted (e.g., faxing or emailing) using authorized secure media transfer. | | | |
| <p>Start Date: The authorization start date is the date that you sign this form authorizing release of information.</p> <p>Expiration Date: The authorization shall continue until enrollment in the Exceptional Family Member Program is no longer necessary according to criteria specified in DoD Instruction 1315.19, or if family member no longer meets the criteria to qualify as a dependent, or the sponsor is no longer in active military service or employment of the U.S. Government overseas, or completion of assignment coordination, or eligibility determination for specialized services if that is the sole purpose for the completion of the form.</p> | | | |
| I understand that: | | | |
| a. I have the right to revoke this authorization at any time. My revocation must be in writing and provided to the facility where my or my child's medical records are kept. I am aware that if I later revoke this authorization, the person(s) I herein name will have used and/or disclosed protected information on the basis of this authorization. My revocation will have no impact on disclosures made prior to the revocation. | | | |
| b. If I authorize my or my child's protected health information to be disclosed to someone who is not required to comply with federal privacy protection regulations, then such information may be re-disclosed and would no longer be protected. | | | |
| c. I have a right to inspect and receive a copy of my own or my child's protected health information to be used or disclosed, in accordance with the requirements of the federal privacy protection regulations found in the Privacy Act and 45 CFR 164.524. I request and authorize the named provider/treatment facility to release the information described above for the stated purposes. | | | |
| d. The Military Health System (which includes the TRICARE Health Plan) may not condition treatment in MTFs/DTFs, payment by the TRICARE Health Plan, enrollment in the TRICARE Health Plan or eligibility for TRICARE Health Plan benefits on failure to obtain this authorization. However, failure to coordinate accompanied assignments prior to OCONUS travel may result in ineligibility for TRICARE Prime status (<i>does not pertain to civilian employees</i>). | | | |
| e. Failure to release this information or any subsequent revocation may result in ineligibility for accompanied family travel at government expense. | | | |
| f. Refusal to sign does not preclude the provision of medical and dental information authorized by other regulations and those noted in this document. | | | |
| NAME OF PATIENT | SIGNATURE OF PATIENT/PARENT/GUARDIAN | RELATIONSHIP TO PATIENT <i>(If applicable)</i> | DATE (YYYYMMDD) |

| DEMOGRAPHICS/CERTIFICATION: To be completed by the Sponsor, Parent or Guardian, or Patient | | | | | |
|--|--|--|---|--|---|
| 1. PURPOSE OF THIS FORM (X one) | | | | | |
| <input type="checkbox"/> EFMP Registration/Enrollment Update | <input type="checkbox"/> Request Change in EFMP Status: | | <input type="checkbox"/> No Longer Have Previously Identified Condition | <input type="checkbox"/> Family Member Deceased* | |
| <input type="checkbox"/> Request for Government Sponsored Travel | <input type="checkbox"/> No Longer Qualifies as a Dependent* | <input type="checkbox"/> Divorce/Change in Custody* | | | |
| (*Provide documentation to verify change in status - do not update medical information.) | | | | | |
| 2.a. FAMILY MEMBER/PATIENT NAME (Last, First, Middle Initial) | | b. SPONSOR NAME (Last, First, Middle Initial) | | c. SPONSOR SSN | |
| d. FAMILY MEMBER GENDER (X) | | e. FAMILY MEMBER DATE OF BIRTH (YYYYMMDD) | | f. FAMILY MEMBER PREFIX (FMP) | |
| <input type="checkbox"/> Male | <input type="checkbox"/> Female | | | | |
| g. DOD BENEFITS NUMBER (DBN) (on back of ID Card) | | | | | |
| h. CURRENT FAMILY MEMBER MAILING ADDRESS (Street, Apartment Number, City, State, ZIP Code, APO/FPO) | | | i. HOME TELEPHONE NUMBER (Include Area Code/Country Code) | | |
| | | | j. FAMILY HOME E-MAIL ADDRESS | | |
| 3.a. SPONSOR RANK OR GRADE | | b. DESIGNATION/NEC/MOS/AFSC (Military only) | | c. INSTALLATION OF SPONSOR'S CURRENT ASSIGNMENT | |
| d. BRANCH OF SERVICE (Military only) | | e. STATUS (X one) | | | |
| <input type="checkbox"/> Army | <input type="checkbox"/> Navy | <input type="checkbox"/> Air Force | <input type="checkbox"/> Regular Active Service Member | <input type="checkbox"/> Active Reserve | <input type="checkbox"/> Active Guard |
| <input type="checkbox"/> Marine Corps | <input type="checkbox"/> Coast Guard | <input type="checkbox"/> Reserves | <input type="checkbox"/> National Guard | <input type="checkbox"/> Civilian | |
| f. SPONSOR'S OFFICIAL E-MAIL ADDRESS | | | g. DUTY TELEPHONE NUMBER (Include Area Code/Country Code) | | h. MOBILE NUMBER (Include Area Code/Country Code) |
| i. DOES CHILD RESIDE WITH SPONSOR? (X one. If No, explain.) | | | | | |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO | | | | |
| 4.a. ARE YOU DUAL MILITARY OR IS YOUR SPOUSE FORMER MILITARY? (Military only) (X one. If Yes, complete 4.b. - e. below) | | | | | |
| <input type="checkbox"/> YES | b. SPOUSE'S NAME (Last, First, Middle Initial) | | c. BRANCH OF SERVICE | d. RANK/RATE | e. SPOUSE SSN |
| <input type="checkbox"/> NO | | | | | |
| 5.a. IS FAMILY MEMBER ENROLLED IN DEERS OR EVER BEEN ENROLLED IN DEERS UNDER A DIFFERENT SPONSOR'S NAME OR SSN? (Military only) (X one) | | | | | |
| <input type="checkbox"/> YES | b. IF YES, UNDER WHAT SSN? | | c. NAME OF SPONSOR (Last, First, Middle Initial) | | d. BRANCH OF SERVICE |
| <input type="checkbox"/> NO | | | | | |
| 6.a. DOES THIS FAMILY MEMBER RECEIVE CASE MANAGEMENT SERVICES? (X one) | | | | | |
| <input type="checkbox"/> YES | <input type="checkbox"/> NO (If Yes, complete 9.b. and c.) | | b. LOCATION OF CASE MANAGER (X) | | <input type="checkbox"/> MTF <input type="checkbox"/> TRICARE <input type="checkbox"/> Civilian |
| c. CASE MANAGER CONTACT INFORMATION | | | | | |
| (1) NAME (Last, First, Middle Initial) | | | (2) EMAIL ADDRESS (If available) | | (3) TELEPHONE NUMBER (Include Area Code/Country Code) |
| 7. MEDICALLY NECESSARY EQUIPMENT (X and complete as applicable) | | | | | |
| <input type="checkbox"/> | a. COCHLEAR IMPLANT | If applicable: (1) MAKE | | (2) MODEL | |
| <input type="checkbox"/> | b. HEARING AIDS | If applicable: (1) MAKE | | (2) MODEL | |
| <input type="checkbox"/> | c. INSULIN PUMP | If applicable: (1) MAKE | | (2) MODEL | |
| <input type="checkbox"/> | d. PACEMAKER | If applicable: (1) MAKE | | (2) MODEL | |
| <input type="checkbox"/> | e. OTHER EQUIPMENT (Specify and include make and model as appropriate.) | | | | |

| | | | |
|---|--|--|-------------------|
| FAMILY MEMBER/PATIENT NAME <i>(Last, First, Middle Initial)</i> | SPONSOR NAME | SPONSOR SSN <i>(Last four)</i> | |
| FOR ADMINISTRATIVE USE ONLY | | | |
| 8. REQUIRED ACTIONS <i>(X one)</i> | | | |
| <input type="checkbox"/> First Review of Medical History for the Family Member | <input type="checkbox"/> Qualifies for Change in EFMP Status: | | |
| <input type="checkbox"/> Request for Government Sponsorship/Family Travel | <input type="checkbox"/> Family Member No Longer Has Previously Identified Condition | <input type="checkbox"/> Family Member Deceased* | |
| <input type="checkbox"/> Update to a Previous Evaluation for the Family Member | <input type="checkbox"/> Family Member No Longer Qualifies as a Dependent* | <input type="checkbox"/> Divorce/Change in Custody* | |
| <input type="checkbox"/> Other <i>(e.g., Extended Care Health Option Eligibility):</i> | <i>(*Maintain documentation to verify change in status - do not update medical information.)</i> | | |
| 9. REQUIRED ADDENDA. Verify required addendum is attached and has been signed <i>(X each that applies)</i> . Do not submit a blank addendum for EFMP review. | | | |
| <input type="checkbox"/> Asthma Addendum 1 is required and <input type="checkbox"/> Attached. | | | |
| <input type="checkbox"/> Mental Health Summary Addendum 2 is required and <input type="checkbox"/> Attached. | | | |
| <input type="checkbox"/> Autism Spectrum Disorder/Developmental Delay (AS/DD) Addendum 3 is required and <input type="checkbox"/> Attached. | | | |
| 10. SPECIAL ASSIGNMENT CONSIDERATIONS <i>(X all that apply)</i> | | | |
| <input type="checkbox"/> a. Possible Special Education/Early Intervention <i>(If checked, DD Form 2792-1 must be completed)</i> | | | |
| <input type="checkbox"/> b. Receiving TRICARE Extended Care Health Option (ECHO) Benefits | | | |
| <input type="checkbox"/> c. Receiving State Medicaid/Medicare Waiver Services | | | |
| CERTIFICATION | | | |
| 11. CERTIFICATION. DO NOT CERTIFY BEFORE THE MEDICAL PROVIDER COMPLETES THE ENTIRE FORM AND ADDENDA. By signing below, we certify that the information submitted on this DD Form 2792 is complete and accurate. | | | |
| PARENT/GUARDIAN OR PERSON OF MAJORITY AGE: | | | |
| a. PRINTED NAME | b. SIGNATURE | c. DATE <i>(YYYYMMDD)</i> | |
| 12. ADMINISTRATIVE CERTIFICATION | | | |
| a. PRINTED NAME <i>(Last, First, Middle Initial)</i> | b. SIGNATURE | c. DATE <i>(YYYYMMDD)</i> | f. OFFICIAL STAMP |
| d. LOCATION OF MILITARY TREATMENT FACILITY OR CERTIFYING EFMP OFFICE | | e. TELEPHONE NUMBER <i>(Include area code/Country Code)</i> | |

| | | | | | | | | | | | |
|--|---|--|--------------------------------|----------------------------------|-----------------------------------|--|---|--|--|--|--|
| FAMILY MEMBER/PATIENT NAME <i>(Last, First, Middle Initial)</i> | SPONSOR NAME | SPONSOR SSN <i>(Last four)</i> | | | | | | | | | |
| MEDICAL SUMMARY: To be completed by a Qualified Medical Professional | | | | | | | | | | | |
| PART A - PATIENT STATUS <i>(Authorization by patient or parent/guardian included on Page 1 of this form)</i> | | | | | | | | | | | |
| Please complete as accurately as possible using ICD-9-CM or, when approved, ICD-10-CM. If the patient has an asthma, mental health, or autism spectrum disorder/developmental delay diagnosis, enter ONLY the diagnostic description/code on this page and the remainder of the information on the appropriate attached addendum form. | | | | | | | | | | | |
| 1. INFORMATION INCLUDED IN ADDENDUM <i>(X all that apply)</i> | | | | | | | | | | | |
| <input type="checkbox"/> a. Asthma <i>(Addendum 1)</i> | <input type="checkbox"/> b. Mental Health/ADHD <i>(Addendum 2)</i> | <input type="checkbox"/> c. Autism/Developmental Delay (AS/DD) <i>(Addendum 3)</i> | | | | | | | | | |
| 2. PRIMARY DIAGNOSIS | | | | | | | | | | | |
| a. DIAGNOSIS | b. CODE <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: none; padding: 0 5px;">.</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> | | | | | . | | | | | |
| | | | . | | | | | | | | |
| 3. MEDICATION HISTORY <i>(Associated with primary diagnosis)</i> | | | | | | | | | | | |
| a. CURRENT MEDICATION(S) | b. DOSAGE | c. FREQUENCY | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 4. HOSPITAL SUPPORT FOR THE LAST 12 MONTHS <i>(Associated with primary diagnosis)</i> | | | | | | | | | | | |
| a. NUMBER OF ER VISITS/URGENT CARE VISITS | b. NUMBER OF HOSPITALIZATIONS | c. NUMBER OF ICU ADMISSIONS | d. NUMBER OF OUTPATIENT VISITS | | | | | | | | |
| | | | | | | | | | | | |
| 5. PROGNOSIS <i>(X one)</i> | | | | | | | | | | | |
| <input type="checkbox"/> EXCELLENT | <input type="checkbox"/> GOOD | <input type="checkbox"/> FAIR | <input type="checkbox"/> POOR | <input type="checkbox"/> GUARDED | <input type="checkbox"/> UNSTABLE | <input type="checkbox"/> NON-COMPLIANT | | | | | |
| 6. TREATMENT PLAN FOR PRIMARY DIAGNOSIS <i>(Medical, mental health, surgical procedures or therapies planned or recommended over the next three years. For cancer patients, include date of diagnosis, types of treatment, responses to treatment, if treatment is active and if treatment is completed.)</i> | | | | | | | | | | | |
| | | | | | | | | | | | |
| 7. SECONDARY DIAGNOSIS 1 | | | | | | | | | | | |
| a. DIAGNOSIS | b. CODE <table style="width:100%; border: none;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: none; padding: 0 5px;">.</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table> | | | | | | . | | | | |
| | | | . | | | | | | | | |
| 8. MEDICATION HISTORY <i>(Associated with secondary diagnosis)</i> | | | | | | | | | | | |
| a. CURRENT MEDICATION(S) | b. DOSAGE | c. FREQUENCY | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 9. HOSPITAL SUPPORT FOR THE LAST 12 MONTHS <i>(Associated with secondary diagnosis)</i> | | | | | | | | | | | |
| a. NUMBER OF ER VISITS/URGENT CARE VISITS | b. NUMBER OF HOSPITALIZATIONS | c. NUMBER OF ICU ADMISSIONS | d. NUMBER OF OUTPATIENT VISITS | | | | | | | | |
| | | | | | | | | | | | |
| 10. PROGNOSIS <i>(X one)</i> | | | | | | | | | | | |
| <input type="checkbox"/> EXCELLENT | <input type="checkbox"/> GOOD | <input type="checkbox"/> FAIR | <input type="checkbox"/> POOR | <input type="checkbox"/> GUARDED | <input type="checkbox"/> UNSTABLE | <input type="checkbox"/> NON-COMPLIANT | | | | | |
| 11. TREATMENT PLAN FOR SECONDARY DIAGNOSIS <i>(Medical, mental health, surgical procedures or therapies planned or recommended over the next three years. For cancer patients, include date of diagnosis, types of treatment, responses to treatment, if treatment is active and if treatment is completed.)</i> | | | | | | | | | | | |
| | | | | | | | | | | | |

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|--|---|--------------------------------|--------------------------------|----------------------------------|-----------------------------------|--|
| FAMILY MEMBER/PATIENT NAME <i>(Last, First, Middle Initial)</i> | SPONSOR NAME | SPONSOR SSN <i>(Last four)</i> | | | | |
| MEDICAL SUMMARY <i>(Continued): To be completed by a Qualified Medical Professional</i> | | | | | | |
| PART A - PATIENT STATUS <i>(Continued)</i> | | | | | | |
| 12. SECONDARY DIAGNOSIS 2 | | | | | | |
| a. DIAGNOSIS | b. CODE <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | | | |
| 13. MEDICATION HISTORY <i>(Associated with secondary diagnosis)</i> | | | | | | |
| a. CURRENT MEDICATION(S) | b. DOSAGE | c. FREQUENCY | | | | |
| | | | | | | |
| | | | | | | |
| 14. HOSPITAL SUPPORT FOR THE LAST 12 MONTHS <i>(Associated with secondary diagnosis)</i> | | | | | | |
| a. NUMBER OF ER VISITS/URGENT CARE VISITS | b. NUMBER OF HOSPITALIZATIONS | c. NUMBER OF ICU ADMISSIONS | d. NUMBER OF OUTPATIENT VISITS | | | |
| | | | | | | |
| 15. PROGNOSIS <i>(X one)</i> | | | | | | |
| <input type="checkbox"/> EXCELLENT | <input type="checkbox"/> GOOD | <input type="checkbox"/> FAIR | <input type="checkbox"/> POOR | <input type="checkbox"/> GUARDED | <input type="checkbox"/> UNSTABLE | <input type="checkbox"/> NON-COMPLIANT |
| 16. TREATMENT PLAN FOR THIS DIAGNOSIS <i>(Medical, mental health, surgical procedures or therapies planned or recommended over the next three years. For cancer patients, include date of diagnosis, types of treatment, responses to treatment, if treatment is active and if treatment is completed.)</i> | | | | | | |
| | | | | | | |
| 17. SECONDARY DIAGNOSIS 3 | | | | | | |
| a. DIAGNOSIS | b. CODE <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | | | | | |
| 18. MEDICATION HISTORY <i>(Associated with secondary diagnosis)</i> | | | | | | |
| a. CURRENT MEDICATION(S) | b. DOSAGE | c. FREQUENCY | | | | |
| | | | | | | |
| | | | | | | |
| 19. HOSPITAL SUPPORT FOR THE LAST 12 MONTHS <i>(Associated with secondary diagnosis)</i> | | | | | | |
| a. NUMBER OF ER VISITS/URGENT CARE VISITS | b. NUMBER OF HOSPITALIZATIONS | c. NUMBER OF ICU ADMISSIONS | d. NUMBER OF OUTPATIENT VISITS | | | |
| | | | | | | |
| 20. PROGNOSIS <i>(X one)</i> | | | | | | |
| <input type="checkbox"/> EXCELLENT | <input type="checkbox"/> GOOD | <input type="checkbox"/> FAIR | <input type="checkbox"/> POOR | <input type="checkbox"/> GUARDED | <input type="checkbox"/> UNSTABLE | <input type="checkbox"/> NON-COMPLIANT |
| 21. TREATMENT PLAN FOR THIS DIAGNOSIS <i>(Medical, mental health, surgical procedures or therapies planned or recommended over the next three years. For cancer patients, include date of diagnosis, types of treatment, responses to treatment, if treatment is active and if treatment is completed.)</i> | | | | | | |
| | | | | | | |

APPENDIX C: SAMPLE FORMS AND INSTRUCTIONS

| | | | | | |
|--|---|--|-----|---|--|
| FAMILY MEMBER/PATIENT NAME <i>(Last, First, Middle Initial)</i> | | SPONSOR NAME | | SPONSOR SSN <i>(Last four)</i> | |
| MEDICAL SUMMARY (Continued): To be completed by a Qualified Medical Professional | | | | | |
| PART B - REQUIRED MEDICAL SPECIALTIES | | | | | |
| 22. MINIMUM HEALTH CARE REQUIRED | | | | | |
| INDICATE FREQUENCY OF CARE: A - ANNUALLY B - BIANNUALLY <i>(Twice a year)</i> Q - QUARTERLY M - MONTHLY BI - BI-MONTHLY W - WEEKLY | | | | | |
| | (1) CARE PROVIDER <i>(X as appropriate)</i> | (2) FREQUENCY <i>(See above)</i> | | (1) CARE PROVIDER <i>(X as appropriate)</i> | (2) FREQUENCY <i>(See above)</i> |
| C01 | a. ALLERGIST/IMMUNOLOGIST | | C57 | hh. ORAL SURGEON | |
| C99 | b. AUDIOLOGIST | | C47 | ii. ORTHOPEDIC SURGEON - ADULT | |
| C52 | c. BEHAVIOR ANALYST | | C48 | jj. ORTHOPEDIC SURGEON - PEDIATRIC | |
| C42 | d. CARDIAC/THORACIC SURGEON | | C56 | kk. OTORHINOLARYNGOLOGIST | |
| C02 | e. CARDIOLOGIST - ADULT | | C77 | ll. PAIN CLINIC | |
| C03 | f. CARDIOLOGIST - PEDIATRIC | | C72 | mm. PEDIATRIC NURSE PRACTITIONER | |
| C70 | g. CLEFT PALATE TEAM - PEDIATRIC | | C30 | nn. PEDIATRICIAN | |
| C05 | h. DERMATOLOGIST | | C49 | oo. PEDIATRIC SURGEON | |
| C06 | i. DEVELOPMENTAL PEDIATRICIAN | | C32 | pp. PHYSIATRIST <i>(Physical Rehabilitation)</i> | |
| C53 | j. DIALYSIS TEAM | | C58 | qq. PHYSICAL THERAPIST | |
| C07 | k. DIETARY/NUTRITION SPECIALIST | | C50 | rr. PLASTIC SURGEON - ADULT | |
| C08 | l. ENDOCRINOLOGIST - ADULT | | C71 | ss. PLASTIC SURGEON - PEDIATRIC | |
| C09 | m. ENDOCRINOLOGIST - PEDIATRIC | | C99 | tt. PODIATRIST | |
| C10 | n. FAMILY PRACTITIONER | | C35 | uu. PSYCHIATRIST - ADULT | |
| C11 | o. GASTROENTEROLOGIST - ADULT | | C36 | vv. PSYCHIATRIST - PEDIATRIC | |
| C12 | p. GASTROENTEROLOGIST - PEDIATRIC | | C72 | ww. PSYCHIATRIST NURSE PRACTITIONER | |
| C43 | q. GENERAL SURGEON | | C37 | xx. PSYCHOLOGIST - ADULT | |
| C14 | r. GENETICS | | C38 | yy. PSYCHOLOGIST - PEDIATRIC | |
| C15 | s. GYNECOLOGIST | | C33 | zz. PULMONOLOGIST - ADULT | |
| C99 | t. GYNECOLOGIST/ONCOLOGIST | | C76 | aaa. PULMONOLOGIST - PEDIATRIC | |
| C17 | u. HEMATOLOGIST/ONCOLOGIST - ADULT | | C99 | bbb. RADIATION ONCOLOGIST | |
| C18 | v. HEMATOLOGIST/ONCOLOGIST - PEDIATRIC | | C60 | ccc. RESPIRATORY THERAPIST | |
| C75 | w. INFECTIOUS DISEASE | | C39 | ddd. RHEUMATOLOGIST - ADULT | |
| C20 | x. INTERNIST | | C40 | eee. RHEUMATOLOGIST - PEDIATRIC | |
| C21 | y. NEPHROLOGIST - ADULT | | C61 | fff. SOCIAL WORKER | |
| C22 | z. NEPHROLOGIST - PEDIATRIC | | C62 | ggg. SPEECH AND LANGUAGE PATHOLOGIST | |
| C23 | aa. NEUROLOGIST - ADULT | | C41 | hhh. TRANSPLANT TEAM | |
| C24 | bb. NEUROLOGIST - PEDIATRIC | | C51 | iii. UROLOGIST - ADULT | |
| C44 | cc. NEUROSURGEON | | C78 | jjj. UROLOGIST - PEDIATRIC | |
| C54 | dd. OCCUPATIONAL THERAPIST - ADULT | | C99 | kkk. VASCULAR SURGEON | |
| C55 | ee. OCCUPATIONAL THERAPIST - PEDIATRIC | | C99 | lll. OTHER <i>(Describe)</i> | |
| C26 | ff. OPHTHALMOLOGIST - ADULT | | | | |
| C27 | gg. OPHTHALMOLOGIST - PEDIATRIC | | | | |

| | | | | | | |
|---|--|--------------------------------|------------------------------------|---------------------------------|--|--|
| FAMILY MEMBER/PATIENT NAME <i>(Last, First, Middle Initial)</i> | | SPONSOR NAME | | SPONSOR SSN <i>(Last four)</i> | | |
| MEDICAL SUMMARY - PART B <i>(Continued): To be completed by a Qualified Medical Professional</i> | | | | | | |
| 23. ARTIFICIAL OPENINGS/PROSTHETICS <i>(X all that apply)</i> | | | | | | |
| <input type="checkbox"/> | YES | <input type="checkbox"/> | F01 - GASTROSTOMY | <input type="checkbox"/> | F05 - COLOSTOMY | |
| <input type="checkbox"/> | NO | <input type="checkbox"/> | F02 - TRACHEOSTOMY | <input type="checkbox"/> | F06 - ILEOSTOMY | |
| | | <input type="checkbox"/> | F03 - CSF SHUNT | <input type="checkbox"/> | F07 - OTHER UNSPECIFIED PROSTHETICS <i>(Specify)</i> | |
| | | <input type="checkbox"/> | F04 - CYSTOSTOMY | | <input type="checkbox"/> | F99 - OTHER UNSPECIFIED OPENING <i>(Specify)</i> |
| 24. MEDICALLY INDICATED <i>(as indicated in diagnostic information)</i> ENVIRONMENTAL/ARCHITECTURAL CONSIDERATIONS | | | | | | |
| <input type="checkbox"/> | R01 - LIMITED STEPS <i>(If Yes, please explain)</i> | <input type="checkbox"/> | R03 - AIR CONDITIONING | <input type="checkbox"/> | R03c - POLLEN CONTROL | |
| <input type="checkbox"/> | R02 - COMPLETE WHEELCHAIR ACCESSIBILITY | <input type="checkbox"/> | R03a - TEMPERATURE CONTROL | <input type="checkbox"/> | R03d - AIR FILTERING | |
| <input type="checkbox"/> | R04 - SINGLE STORY/LEVEL HOUSE | <input type="checkbox"/> | R03b - HEPA FILTER | | | |
| <input type="checkbox"/> | R05 - CARPET PROHIBITED | <input type="checkbox"/> | R99 - OTHER <i>(Specify below)</i> | | | |
| <i>(Specify and provide justifications for environmental/architectural considerations):</i> | | | | | | |
| 25. MEDICALLY NECESSARY ADAPTIVE EQUIPMENT/SPECIAL MEDICAL EQUIPMENT <i>(Identified in diagnostic information). (If marked, describe.)</i> | | | | | | |
| a. TYPE OF EQUIPMENT (X) | | b. DESCRIPTION | | a. TYPE OF EQUIPMENT (X) | | |
| b. DESCRIPTION | | b. DESCRIPTION | | b. DESCRIPTION | | |
| <input type="checkbox"/> | L03 - APNEA HOME MONITOR | | | <input type="checkbox"/> | L14 - HOME VENTILATOR | |
| <input type="checkbox"/> | L31 - COCHLEAR IMPLANT | | | <input type="checkbox"/> | L22 - INSULIN PUMP | |
| <input type="checkbox"/> | L21 - CONTINUOUS POSITIVE AIRWAY PRESSURE (CPAP) THERAPY | | | <input type="checkbox"/> | L32 - INTERNAL DEFIBRILLATOR | |
| <input type="checkbox"/> | L33 - FEEDING PUMP | | | <input type="checkbox"/> | L23 - PACEMAKER | |
| <input type="checkbox"/> | L04 - HEARING AIDS | | | <input type="checkbox"/> | L07 - SPLINTS, BRACES, ORTHOTICS | |
| <input type="checkbox"/> | L20 - HOME DIALYSIS MACHINE | | | <input type="checkbox"/> | L08 - WHEELCHAIR | |
| <input type="checkbox"/> | L13 - HOME NEBULIZER | | | <input type="checkbox"/> | L99 - OTHER <i>(Specify)</i> | |
| <input type="checkbox"/> | L12 - HOME OXYGEN THERAPY | | | | | |
| 26. IDENTIFY ANY LIMITATIONS FOR ACTIVITIES OF DAILY LIVING AND ANY TRAVEL LIMITATIONS <i>(Please explain.)</i> | | | | | | |
| PART C - PROVIDER INFORMATION | | | | | | |
| 27.a. PROVIDER PRINTED NAME OR STAMP | | | b. SIGNATURE | | c. DATE (YYYYMMDD) | |
| d. TELEPHONE NUMBERS <i>(Include Area Code/Country Code)</i> | | | e. OFFICIAL E-MAIL ADDRESS | | f. MEDICAL SPECIALTY | |
| (1) COMMERCIAL | | (2) DSN (Military only) | | | | |

| | | | |
|--|--------------------------------|--|--------------------------------|
| FAMILY MEMBER/PATIENT NAME <i>(Last, First, Middle Initial)</i> | | SPONSOR NAME | SPONSOR SSN <i>(Last four)</i> |
| ADDENDUM 1 - ASTHMA/REACTIVE AIRWAY DISEASE SUMMARY: To be completed by a Qualified Medical Professional Complete addendum if patient has been evaluated or treated for asthma within the past five years. | | | |
| 1. DIAGNOSTIC DESCRIPTION CODE (ICD-9-CM or, when approved, ICD-10-CM) □ □ □ . □ □ □ □ | | | |
| 2. MEDICATION HISTORY | | | |
| a. MEDICATION(S) | b. DOSAGE | c. FREQUENCY | |
| | | | |
| | | | |
| 3. HISTORY ASSOCIATED WITH ASTHMA ATTACKS <i>(X as applicable)</i> | | | |
| YES | NO | | |
| | | a. ARE THERE ANY TRIGGERS FOR THE PATIENT'S ASTHMA ATTACKS <i>(stress, environment, exercise)?</i> | |
| | | b. DOES THE PATIENT ROUTINELY <i>(greater than 10 days per month/four months per year)</i> USE INHALED ANTI-INFLAMMATORY AGENTS AND/OR BRONCHODILATORS? | |
| | | c. HAS THE PATIENT TAKEN ORAL STEROIDS DURING THE PAST YEAR <i>(prednisone, prednisolone)?</i> IF "YES", NUMBER OF DAYS IN PAST YEAR: _____ | |
| | | d. HAS THE PATIENT EVER EXPERIENCED UNCONSCIOUSNESS OR SEIZURES ASSOCIATED WITH ASTHMA ATTACKS? | |
| | | e. HAS THE PATIENT REQUIRED AN URGENT VISIT TO THE ER OR CLINIC FOR ACUTE ASTHMA DURING THE PAST YEAR? IF "YES", INDICATE THE NUMBER OF VISITS IN THE PAST YEAR: _____ | |
| | | f. HAS THE PATIENT BEEN HOSPITALIZED FOR PULMONARY DISEASE <i>(pneumonia, bronchitis, bronchiolitis, croup, RSV)</i> DURING THE PAST YEAR? IF "YES", INDICATE THE DATE(S) OF HOSPITALIZATION <i>(YYYYMMDD)</i> : _____ | |
| | | g. DOES THE PATIENT HAVE A HISTORY OF ONE OR MORE HOSPITALIZATIONS FOR ASTHMA RELATED CONDITIONS WITHIN THE PAST FIVE YEARS? IF "YES", HOW MANY? _____ INDICATE DATE OF LAST ADMISSION <i>(YYYYMMDD)</i> : _____ | |
| | | h. HAS THE PATIENT REQUIRED MECHANICAL VENTILATION <i>(Intubation/use of respirator)</i> DURING THE PAST 3 YEARS? | |
| | | i. DOES THE PATIENT HAVE A HISTORY OF INTENSIVE CARE ADMISSIONS? | |
| j. APPROXIMATE NUMBER OF DAYS THAT THE PATIENT MISSED SCHOOL/WORK/PLAY DUE TO ASTHMA-RELATED PROBLEMS <i>(including visits to physicians)</i> DURING THE PAST YEAR? _____ | | | |
| k. HOW OFTEN DOES THE PATIENT USE HIS/HER RESCUE INHALER OR NEBULIZER MEDICATION <i>(such as Albuterol or Levalbuterol)</i> FOR INCREASED OR ACUTE SYMPTOMS? | | | |
| 4. SEVERITY LEVEL. What is the patient's severity level based on the current treatment plan? <i>(Select one level of severity. Definitions are examples of severity. Pulmonary function tests are required only if clinically indicated.)</i> | | | |
| a. INTERMITTENT ASTHMA . Intermittent symptoms ≤1 time per week. Brief exacerbations (from a few hours to a few days). Nighttime asthma symptoms <2 times a month. Asymptomatic and normal lung function between exacerbations. PEF or FEV1 ≥80% predicted; variability <20%. | | | |
| b. MILD PERSISTENT ASTHMA . Symptoms ≥2 times a week but <1 time per day. Exacerbations may affect sleep and activity. Nighttime asthma symptoms >2 times a month. PEF or FEV1 ≥80% predicted; variability 20 - 30%. | | | |
| c. MODERATE PERSISTENT . Symptoms daily. Exacerbations affect sleep and activity. Nighttime asthma >1 time a week. Daily use of inhaled short-acting B2 agonist. PEF or FEV1 ≥60% and 80% predicted; variability > 30%. | | | |
| d. SEVERE PERSISTENT . Continuous symptoms. Frequent exacerbations. Frequent nighttime asthma symptoms. Physical activities limited by asthma symptoms. PEF or FEV1 ≤60% predicted; variability > 30%. | | | |
| 5.a. PROVIDER PRINTED NAME OR STAMP | | b. SIGNATURE | c. DATE <i>(YYYYMMDD)</i> |
| d. TELEPHONE NUMBERS <i>(Include Area Code/Country Code)</i> | | e. OFFICIAL E-MAIL ADDRESS | f. MEDICAL SPECIALTY |
| (1) COMMERCIAL | (2) DSN <i>(Military only)</i> | | |

| | | | | | |
|--|--------------------------|--|--------------------------------|---|--|
| FAMILY MEMBER/PATIENT NAME <i>(Last, First, Middle Initial)</i> | | SPONSOR NAME | | SPONSOR SSN <i>(Last four)</i> | |
| ADDENDUM 2 - MENTAL HEALTH SUMMARY: To be completed by a Qualified Clinical Provider | | | | | |
| Complete addendum if the patient has current or past <i>(duration of 6 months or longer)</i> history <i>(within the last 5 years)</i> of mental health diagnosis <i>(to include attention deficit disorders)</i> . | | | | | |
| 1. DIAGNOSIS(ES) . Please complete as accurately as possible using ICD-9-CM or, when approved, ICD-10-CM. | | | | | |
| a. DIAGNOSIS | | | b. ICD OR DSM (Required) | c. AGE AT DIAGNOSIS | |
| | | | | | |
| | | | | | |
| 2. MEDICATION HISTORY RELATED TO THE DIAGNOSIS LISTED ABOVE. | | | | | |
| a. CURRENT MEDICATION(S) | | b. DOSAGE | | c. FREQUENCY | |
| | | | | | |
| | | | | | |
| d. DISCONTINUED MEDICATION(S) RELATED TO DIAGNOSIS(ES) <i>(Include reason for discontinuing)</i> | | | | e. FREQUENCY | |
| | | | | | |
| | | | | | |
| | | | | | |
| 3.a. THERAPIES RECEIVED OR RECOMMENDED. <i>(Include past compliance with treatment programs, expected length of treatment, required participation of family members, and if treatment is ongoing.)</i> | | | | b. FREQUENCY | |
| | | | | | |
| | | | | | |
| | | | | | |
| 4. COMPLETE FOR TREATMENT: | | | | | |
| a. NUMBER OF OUTPATIENT VISITS IN THE LAST YEAR: | | b. NUMBER OF HOSPITALIZATIONS IN THE LAST FIVE YEARS: | | c. NUMBER OF RESIDENTIAL TREATMENT ADMISSIONS IN THE LAST FIVE YEARS: | |
| | | | | DATE OF LAST ADMISSION (YYYYMMDD): | |
| | | | | | |
| 5. HISTORY <i>(X and provide details for each "Yes" answer)</i> | | | | | |
| YES | NO | WITHIN THE LAST 5 YEARS, HAS THE PATIENT HAD A: | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | a. HISTORY OF SUICIDAL GESTURES/ATTEMPTS? <i>(If Yes, include dates)</i> | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | b. HISTORY OF SUBSTANCE ABUSE? | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | c. HISTORY OF ADDICTIVE BEHAVIORS? | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | d. HISTORY OF EATING DISORDERS? | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | e. HISTORY OF OTHER COMPULSIVE BEHAVIORS? | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | f. HISTORY OF PROBLEMS WITH LEGAL AUTHORITY? <i>(If Yes, specify)</i> | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | g. HISTORY OF PSYCHOTIC EPISODES? | | | |
| <input type="checkbox"/> | <input type="checkbox"/> | h. HISTORY OF SERVICES RECEIVED FOR ALLEGATIONS OF FAMILY MALTREATMENT? <i>(If Yes, and services are delivered by Family Advocacy, note case determination.)</i> | | | |

| | | |
|---|---------------------------------------|--|
| FAMILY MEMBER/PATIENT NAME <i>(Last, First, Middle Initial)</i> | SPONSOR NAME | SPONSOR SSN <i>(Last four)</i> |
| ADDENDUM 2 - MENTAL HEALTH SUMMARY <i>(Continued): To be completed by a Qualified Clinical Provider</i> | | |
| 6. TREATMENT PLAN <i>(Related to the patient's mental health condition planned over the next three years).</i> | | |
| | | |
| 7. PROGNOSIS <i>(X one)</i> | | |
| <input type="checkbox"/> EXCELLENT | <input type="checkbox"/> GOOD | <input type="checkbox"/> FAIR |
| <input type="checkbox"/> POOR | <input type="checkbox"/> GUARDED | <input type="checkbox"/> UNSTABLE |
| <input type="checkbox"/> NON-COMPLIANT | | |
| 8. PROVIDERS REQUIRED TO IMPLEMENT TREATMENT PLAN AND FREQUENCY OF VISITS | | |
| <input type="checkbox"/> PSYCHIATRIST | <input type="checkbox"/> PSYCHOLOGIST | <input type="checkbox"/> SOCIAL WORKER |
| <input type="checkbox"/> OTHER <i>(Specify)</i> | | |
| <input type="checkbox"/> WEEKLY | <input type="checkbox"/> WEEKLY | <input type="checkbox"/> WEEKLY |
| <input type="checkbox"/> BI-MONTHLY | <input type="checkbox"/> BI-MONTHLY | <input type="checkbox"/> BI-MONTHLY |
| <input type="checkbox"/> MONTHLY | <input type="checkbox"/> MONTHLY | <input type="checkbox"/> MONTHLY |
| <input type="checkbox"/> QUARTERLY | <input type="checkbox"/> QUARTERLY | <input type="checkbox"/> QUARTERLY |
| <input type="checkbox"/> BIANNUALLY | <input type="checkbox"/> BIANNUALLY | <input type="checkbox"/> BIANNUALLY |
| <input type="checkbox"/> ANNUALLY | <input type="checkbox"/> ANNUALLY | <input type="checkbox"/> ANNUALLY |
| 9. OTHER COMMENTS <i>(Include additional information that would assist in determining necessary treatments.)</i> | | |
| | | |
| 10.a. PROVIDER PRINTED NAME OR STAMP | b. SIGNATURE | c. DATE <i>(YYYYMMDD)</i> |
| d. TELEPHONE NUMBERS <i>(Include Area Code/Country Code)</i> | e. OFFICIAL E-MAIL ADDRESS | |
| (1) COMMERCIAL | f. MEDICAL SPECIALTY | |
| (2) DSN <i>(Military only)</i> | | |

| | | | | | |
|---|------------------|---|--|---|---------------------------------------|
| FAMILY MEMBER/PATIENT NAME <i>(Last, First, Middle Initial)</i> | | SPONSOR NAME | | SPONSOR SSN <i>(Last four)</i> | |
| ADDENDUM 3 - AUTISM SPECTRUM DISORDERS AND SIGNIFICANT DEVELOPMENTAL DELAYS: To be Completed by a Qualified Medical Professional Complete addendum if the patient has been evaluated or received treatment(s) for autism spectrum disorders and/or significant developmental delays. | | | | | |
| 1.a. DIAGNOSIS(ES) <input type="checkbox"/> Autism Spectrum Disorder <input type="checkbox"/> Global Developmental Delay <input type="checkbox"/> Other <i>(Specify)</i> | | | b. AGE WHEN DIAGNOSED _____ | | 2. DATE OF BIRTH (YYYYMMDD) |
| c. DIAGNOSED BY: <input type="checkbox"/> Child Psychologist <input type="checkbox"/> Child Psychiatrist <input type="checkbox"/> Developmental Pediatrician <input type="checkbox"/> Other Physician <input type="checkbox"/> Medical Multidisciplinary Team <input type="checkbox"/> School-Based Team <input type="checkbox"/> Other <i>(Specify)</i> | | | | | |
| 3. COEXISTING DIAGNOSES <i>(X all that apply)</i> <input type="checkbox"/> Chromosomal Abnormalities <input type="checkbox"/> Intermittent Explosive Disorder <input type="checkbox"/> Major Depressive Disorder, Depressive Disorder, NOS <input type="checkbox"/> Obsessive Compulsive Disorder <input type="checkbox"/> Circadian-Rhythm Sleep Disorder <input type="checkbox"/> Seizure Disorder <input type="checkbox"/> Attention Deficit/Hyperactivity Disorder <input type="checkbox"/> Generalized Anxiety Disorder, Anxiety Disorder, NOS <input type="checkbox"/> Other <i>(Specify)</i> | | | | | |
| 4. CURRENT MEDICATIONS <i>(Used to treat diagnoses on this page)</i> | | | | | |
| a. CURRENT MEDICATION(S) | | b. DOSAGE | c. FREQUENCY | d. REASON PRESCRIBED | |
| | | | | | |
| | | | | | |
| 5. CURRENT INTERVENTION THERAPIES | | | | | |
| a. TYPE <i>(To be completed by a qualified medical professional in consultation with the family)</i> | | b. SCHOOL HOURS/WEEK <i>(If known)</i> | c. TRICARE HOURS/WEEK <i>(If known)</i> | d. OTHER SOURCE HOURS/WEEK <i>(If known)</i> | e. OTHER <i>(Identify)</i> |
| (1) Speech Therapy | | | | | |
| (2) Occupational Therapy | | | | | |
| (3) Physical Therapy | | | | | |
| (4) Psychological Counseling | | | | | |
| (5) Intensive Behavioral Intervention <i>(Includes ABA)</i> | | | | | |
| (6) OTHER <i>(Specify)</i> | | | | | |
| 6. COMMUNICATION <i>(X)</i> <input type="checkbox"/> VERBAL <input type="checkbox"/> NON-VERBAL <i>(Uses:)</i> <input type="checkbox"/> Signing <input type="checkbox"/> Communication Device <input type="checkbox"/> Picture Exchange Communication System (PECS) <input type="checkbox"/> Combination | | 7. OTHER INTERVENTIONS/THERAPIES USED BY THE FAMILY <i>(Specify alternate or complementary therapies)</i> | | | |
| | | 8. BEHAVIOR: CHILD EXHIBITS HIGH RISK OR DANGEROUS BEHAVIOR <input type="checkbox"/> YES <input type="checkbox"/> NO <i>(If Yes, provide details in Item 13 below)</i> | | | |
| 9. COGNITIVE ABILITY <i>(X)</i> <input type="checkbox"/> <50 <input type="checkbox"/> 50 - 70 <input type="checkbox"/> >70 <input type="checkbox"/> Unknown <input type="checkbox"/> Indeterminate | | 10. EDUCATION <i>(X)</i> <input type="checkbox"/> Receives Early Intervention <input type="checkbox"/> Receives Special Education <input type="checkbox"/> Attends Public School <input type="checkbox"/> Attends Private School <input type="checkbox"/> Attends Special Private School <input type="checkbox"/> Is Home Schooled | | | |
| 11. REQUIRED MEDICAL SERVICES | | | 12. RESPITE CARE RECEIVED | | |
| (X) | a. TYPE | b. FREQUENCY | (X) | a. TYPE | b. FREQUENCY |
| | Child Psychology | | | Child Neurology | |
| | Child Psychiatry | | | Developmental Pediatrics | |
| a. HOURS PER MONTH | | b. SOURCE | | | |
| | | | | | |
| 13. GENERAL COMMENTS <i>(Include Functional Levels)</i> _____ _____ _____ | | | | | |
| 14.a. PROVIDER PRINTED NAME OR STAMP | | b. SIGNATURE | | c. DATE (YYYYMMDD) | |
| | | | | | |
| d. TELEPHONE NUMBERS <i>(Include Area Code/Country Code)</i> (1) COMMERCIAL (2) DSN <i>(Military only)</i> | | e. OFFICIAL E-MAIL ADDRESS | | f. MEDICAL SPECIALTY | |
| | | | | | |

OMBUDSMAN BASIC TRAINING GETTING STARTED CHECKLIST

- NO YES I have an appointment letter.
- NO YES I know the name, telephone number and email address of the command point of contact for the Ombudsman Program.
- NO YES I have completed a Volunteer Agreement Form (DD 2793).
- NO YES I have been registered by the command in the Ombudsman Registry.
- NO YES I know my commanding officer's priorities.
- NO YES I have discussed confidentiality requirements with my commanding officer.
- NO YES I have read the OPNAVINST 1750.1 series, *Navy Family Ombudsman Program*.
- NO YES I can abide by the Ombudsman Code of Ethics.
- NO YES I know what types of information I am required to report and to whom.
- NO YES I know how to complete an expense form (OF 1164) and when and where to submit it.
- NO YES I have a current command roster and I know how often and from whom I will receive updates.
- NO YES I have an ombudsman pin.
- NO YES I have an ombudsman name tag (provided by the command).
- NO YES I have ombudsman contact cards, either provided by the command or made by me.
- NO YES I have written an introductory letter to include in the ombudsman newsletter.
- NO YES I have the codes, know how to change the Careline message, and I have drafted my first message for recording.
- NO YES I know the telephone number of the ombudsman telephone line and I have recorded a professional message on it.
- NO YES I have access to a computer and the Internet.
- NO YES I have created, or been given, an appropriate ombudsman email address.
- NO YES I have a resource list that includes telephone numbers and basic services provided by local military and community agencies.
- NO YES I know when and where my local or region ombudsman assembly meets.
- NO YES I understand the importance of this position and I am committed to completing all of my training.

If you have a fair number of NOs on your checklist, talk with your commanding officer, visit your ombudsman coordinator and continue to do your homework and preparation before you execute your command ombudsman duties.

OMBUDSMAN BASIC TRAINING

OMBUDSMAN INDIVIDUAL CONTACT LOG

Date: _____

Caller's name: _____

Telephone/email: _____

Situation:

Referrals provided:

Follow-up:

OMBUDSMAN BASIC TRAINING

SAMPLE APPOINTMENT LETTER

Dear [name of ombudsman],

Congratulations on your selection as an ombudsman for (name of command)'s Family Ombudsman Program. As such, you will play a critical role in helping to maintain family readiness.

Your term of appointment is (length of time) including a probationary period of (number) months. You are expected to attend Ombudsman Basic Training (OBT/eOBT). Information about upcoming class dates is available at www.ffsp.navy.mil or through the FFSC Ombudsman Coordinator. Please report back to the command upon completion of OBT/eOBT.

Commander, Navy Installations Command provides OBT Orientation On-Demand training, in the event you are unable to attend Ombudsman Basic Training within the first six weeks of appointment. Go to www.cnic.navy.mil/OmbudsmanProgramTraining to access this training.

To ensure (name of command) families have the most current information and resources available to them, you are expected to attend the local Ombudsman Assembly Meetings and advanced trainings. The information and resources obtained should be shared with command families via newsletter, emails and command briefs, as appropriate. You may also be asked to provide an update at command Family Readiness Group meetings.

Your information has been added to the Ombudsman Registry at <http://ombudsmanregistry.cnic.navy.mil>. Data from the Ombudsman Monthly/Quarterly Worksheets is required to be entered in the automated ombudsman data collection system at the same site. My door is always open to you. Your command point of contact is (insert name). S/he can be reached at (XXX) XXX-XXXX.

When mailing or receiving mail in your official position as command family ombudsman, please use the official command address:

(Ombudsman Name), Command Family Ombudsman

(Command Name)

(Address)

Sincerely,

(CO)

Copy to:

File

Fleet and Family Support Center Ombudsman Coordinator or RCC Warrior and Family Support Specialist

Local Ombudsman Assembly Chair

OMBUDSMAN BASIC TRAINING

SAMPLE OMBUDSMAN ASSEMBLY INSTRUCTION

SAMPLE OMBUDSMAN ASSEMBLY INSTRUCTION

(COMMAND) INST 1750.XX

(Code)

(Date)

(COMMAND) INSTRUCTION 1750.XX

Subj: OMBUDSMAN ASSEMBLY

Ref: (a) OPNAVINST 1750.1 series

Encl: (1) Ombudsman Assembly Chairperson Description of Duties

1. Purpose. To provide guidance and establish procedures governing the organization and operation of COMXXXGRU 5 Ombudsman Assembly.

2. Cancellation. (COMMAND) INST 1750.XX.)

3. Background. The Chief of Naval Operations established the Navy Family Ombudsman Program on 14 September 1970. Reference (a) contains program requirements and guidelines for execution of this program throughout Navy. The Command Family Ombudsman serves as a communication link between the command, command family members, and as an information and referral specialist.

4. Discussion. The Ombudsman Assembly exists to support the local, appointed command ombudsmen.

As a non-policy making and non-supervisory entity, it serves primarily as a forum for discussion among the membership and to help provide continuing training opportunities. It is also an advocate for Navy's mission and Navy family members.

5. Assembly Membership. Membership in the Ombudsman Assembly, per reference (a) and this instruction, shall include the appointed ombudsmen of all commands resident at the station, including local tenant and afloat commands, and any other commands in the area which need support, such as the naval hospital.

Membership begins when individuals submit their ombudsman letter of appointment from the sponsoring command and will continue until a notice of termination is received from the command. Commanding officers, executive officers, command master chiefs, chaplains, and their respective spouses, are encouraged to attend all Ombudsman Assembly meetings and activities. Other interested parties are invited to attend.

6. Action. (Issuing command) will:

- a. Appoint an action officer as liaison with the assembly.
- b. Appoint an Ombudsman Assembly Chairperson, in writing, for the designated term of office.
- c. Ensure the assembly has a suitable place to conduct meetings.
- d. Provide administrative support, including administrative supplies and printing services as deemed appropriate.

7. Ombudsman Assembly Chairperson. The Assembly Chairperson must be a current ombudsman.

The Fleet and Family Support Center should not serve as the Assembly Chairperson, but can serve in an advisory capacity. Term of office will be for one year but may be renewed for another term at the discretion of the issuing command.

8. Fleet and Family Support Center Ombudsman Coordinator will serve as an advisor to the assembly, maintain an up-to-date ombudsman recall list, and provide this list to the assembly chair as it is modified.

Additional support will be determined by [issuing command] and may include:

- a. Assistance in planning continual training for ombudsmen.
- b. Agenda recommendations for monthly assembly meetings.
- c. Offering program guidance and policy clarification in consultation with the Ombudsman Program Manager, as applicable.
- d. Additional, appropriate assistance as requested by commanding officers/ombudsmen.

9. Assembly Meetings and Activities. The assembly is not a policy making body and in no way will interfere with the individual command/ombudsman relationship or duties.

- a. The Ombudsman Assembly shall meet monthly for the purpose of sharing information and as a resource for advanced ombudsman training and other functions as directed by sponsoring commands (e.g., provision of area resource handbooks and materials, publication of a newsletter, and maintenance of a calendar of events).
- b. The assembly may make recommendations about community matters that affect the well-being of area families. The group may not petition or actively and aggressively protest command-initiated action or policy.

10. Ombudsman Recognition. The assembly is authorized to assist commands to recognize and show appreciation of all command ombudsmen, per reference (a). The Fleet and Family Support Center Ombudsman Coordinator may be invited to work closely with the assembly and the commands to provide appropriate recognition of the ombudsmen in conjunction with Ombudsman Appreciation Day, 14 September, and on other occasions as appropriate.

(COMMAND) INST 1750.XX

J. A. BOSS Captain, U.S. Navy

OMBUDSMAN BASIC TRAINING

SAMPLE OMBUDSMAN ASSEMBLY CHAIRPERSON DUTIES

SAMPLE OMBUDSMAN ASSEMBLY CHAIRPERSON DESCRIPTION OF DUTIES

Responsibilities

- a. Practice and enforce application of the Ombudsman Code of Ethics during all assembly meetings and activities.
- b. Preside over all meetings of the Ombudsman Assembly.
- c. Call special meetings as required.
- d. Provide information and support to the area ombudsmen.
- e. Team with the Fleet and Family Support Center Ombudsman Coordinator to plan and schedule monthly training to meet the needs of the assembly. Make sure that prospective speakers/trainers have the necessary education and experience to meet training requirements. This includes a clear understanding of OPNAVINST 1750.1 series policy regarding the topic.
- f. Prepare and distribute an agenda for all meetings.
- g. Serve as a member of all standing committees and special committees deemed necessary by [issuing command].
- h. Review all assembly correspondence prior to distribution and maintain copies on file.
- i. Ensure the assembly is represented at meetings pertaining to quality-of-life issues that directly affect family members, per approval of the CO.
- j. Coordinate with the Fleet and Family Support Center to perform orientation of all newly appointed ombudsmen.

Qualifications

- a. Current ombudsman possessing a working knowledge of the military chain of command and lifestyle.
- b. Good judgment, sound leadership skills and demonstrated ability to communicate effectively, both orally and in writing.

OMBUDSMAN BASIC TRAINING

SAMPLE RESIGNATION LETTERS

Sample Resignation Letter 1 (change of command)

From: [Ombudsman]

To: [Commanding Officer]

Via: [Point of Contact]

Subject: Resignation as command family ombudsman

Ref: OPNAVINST 1750.1 series.

1. I tender my resignation as command family ombudsman when a new commanding officer reports, as directed by the OPNAVINST 1750.1 series.
2. I am available to continue as the command family ombudsman for approximately six months, at which time my spouse transfers to a new command. I am also willing to help recruit and train a new command ombudsman.
3. I appreciate the opportunity I have had to serve the command and the command family members.

Sincerely,

[Ombudsman name]

Sample Resignation Letter 2 (general resignation)

From: [Ombudsman]

To: [Commanding Officer]

Via: [Point of Contact]

Subject: Resignation as command family ombudsman

Ref: OPNAVINST 1750.1 series.

1. Per reference (a), I tender my resignation as this command's family ombudsman, effective (date), due to (e.g., transfer of my spouse, retirement of my spouse, personal reasons).
2. I appreciate the opportunity I have had to serve the command and the command family members.

Sincerely,

[Ombudsman name]

SPECIAL EDUCATION/EARLY INTERVENTION SUMMARY

PRIVACY ACT STATEMENT

AUTHORITY: 10 U.S.C. 136; 20 U.S.C. 927; DoDI 1315.19; DoDI 1342.12; and E.O. 9397 (as amended).

PRINCIPAL PURPOSE(S): Information will be used by DoD personnel to evaluate and document the special education needs of family members. This information will enable: (1) Military assignment personnel to match the special education needs of family members against the availability of educational services, and (2) Civilian personnel officers to advise civilian employees about the availability of education services to meet the special education needs of their family members. The personally identifiable information collected on this form is covered by a number of system of records notices pertaining to Official Military Personnel Files, Exceptional Family Member or Special Needs files, Civilian Personnel Files, and DoD Education Activity files. The SORNs may be found at <http://dpclo.defense.gov/Privacy/SORNsIndex/DODComponentNotices.aspx>.

ROUTINE USE(S): DoD Blanket Routine Uses 1, 4, 6, 8, 9, 12, and 15 found at <http://dpclo.defense.gov/Privacy/SORNsIndex/BlanketRoutineUses.aspx> may apply.

DISCLOSURE: Voluntary for civilian employees and applicants for civilian employment; however, the information must be provided if you intend to enroll your child with special education needs in a school funded by the Department of Defense or a school in which DoD is responsible for paying the tuition for a space-required family member. Mandatory for military personnel. Failure or refusal to provide the information or providing false information may result in administrative sanctions or punishment under either Article 92 (dereliction of duty) or Article 107 (false official statement), Uniform Code of Military Justice. The Social Security Number of the sponsor (and sponsor's spouse if dual military) allows the DoD Education Activity and Service personnel offices to work together to ensure any special education needs of your dependent can be met at your next duty assignment. Dependent special education needs are annotated in the official military personnel files which are retrieved by name and Social Security Number.

INSTRUCTIONS

The DD Form 2792-1 is completed to identify a family member with special educational/early intervention needs.

DEMOGRAPHICS.

Items 1 - 7. Completed by sponsor or spouse.

Item 1. Request (X one):

- EFMP Registration/Enrollment Update - first enrollment application for the family member or to update a previous evaluation for the family member.
- Government Sponsored Travel.
- Change in EFMP Status.

Items 2.a. - h. Child/Student Information. Self-explanatory.

Items 3.a. - h. Sponsor Information. Self-explanatory.

Item 3.i. Child/student enrolled in DEERS under another sponsor. Self-explanatory.

Items 4.a. - d. Self-explanatory.

Item 5. Completed for children age birth to 3 who have or require an IFSP.

Item 6.a. - e. Completed for children ages 3 to 21 only who have or require an IEP. Children who have IEPs and are ages 3 to 5 should have the DD 2792-1 completed at the school the child would normally attend for kindergarten. High School graduates, students who have passed the G.E.D. and college students are not required to complete the DD 2792-1.

Items 7.a. - c. Signature of sponsor or spouse who completed the form. Self-explanatory.

Items 8.a. - f. Administrative Review. Completed by EFMP responsible for screening or enrollment in the MTF.

SPECIAL EDUCATION/EARLY INTERVENTION SUMMARY

DD Form 2792-1 is completed by the parents and school or early intervention staff. **Only this form should be provided to school or early intervention staff. Do not include medical information forms that may be used for EFMP screening or enrollment.**

Items 1.a. - d. Sponsor Information. Signature of sponsor, spouse, legal guardian, or student who has reached the age of majority is REQUIRED to authorize the school to release information.

Items 2.a. - d. Child/Student Information. Completed by sponsor, spouse, or legal guardian. Self-explanatory.

Items 3.a. - d. EIS Information. Completed by EIS or school personnel. Mark (X) Yes or No for each item. Include additional information as noted.

Items 4.a. - f. School Information. Completed by school personnel at the public school the child attends or would attend. Mark (X) Yes or No for each item. Include additional information as noted.

Item 5. Completed by school personnel. Mark (X) eligibility category. Mark only one. (Codes are for Army coding only.)

Item 6. Completed by school personnel. Mark (X) all related services provided and indicate total time services are provided.

Item 7. Completed by EIS and school personnel. Self-explanatory.

Item 8. Completed by EIS provider/school official information completing form. Self-explanatory.

| | | | |
|--|---|--|---|
| SPECIAL EDUCATION/EARLY INTERVENTION SUMMARY <i>(Page 1, Items 1 - 7 to be completed by sponsor, parent or legal guardian.)</i> <i>(Read Privacy Act Statement and Instructions before completing this form.)</i> | | | OMB No. 0704-0411 OMB approval expires Jul 31, 2017 |
| The public reporting burden for this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Department of Defense, Washington Headquarters Services, Executive Services Directorate, Directives Division, 4800 Mark Center Drive, Alexandria, VA 22350-3100 (0704-0411). Respondents should be aware that notwithstanding any other provision of law, no person shall be subject to any penalty for failing to comply with a collection of information if it does not display a currently valid OMB control number. PLEASE DO NOT RETURN YOUR FORM TO THE ABOVE ORGANIZATION. | | | |
| DEMOGRAPHICS | | | |
| 1. REQUEST <i>(X one)</i> <input type="checkbox"/> EFMP Registration/Enrollment Update <input type="checkbox"/> Change in EFMP Status: <input type="checkbox"/> Other <i>(Explain)</i> <input type="checkbox"/> Government Sponsored Travel <input type="checkbox"/> No longer requires IEP/IFSP services <input type="checkbox"/> No longer qualifies as a dependent* <input type="checkbox"/> Divorce/change in custody* <i>(*Provide documentation for change in status)</i> | | | |
| 2. CHILD/STUDENT INFORMATION <i>(To be completed by sponsor, spouse or legal guardian)</i> | | | |
| a. CHILD/STUDENT NAME <i>(Last, First, Middle Initial)</i> | | b. SPONSOR NAME <i>(Last, First, Middle Initial)</i> | c. CHILD/STUDENT CURRENT MAILING ADDRESS <i>(Street, Apartment Number, City, State, ZIP Code, APO/FPO)</i> |
| d. FAMILY MEMBER PREFIX | e. CHILD/STUDENT DATE OF BIRTH <i>(YYYYMMDD)</i> | f. CHILD/STUDENT GENDER <i>(X one)</i> <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE | |
| g. FAMILY HOME E-MAIL ADDRESS | | h. HOME TELEPHONE NUMBER <i>(Include Area Code/Country Code)</i> | |
| 3. a. SPONSOR RANK OR GRADE | | b. INSTALLATION OF CURRENT ASSIGNMENT <i>(Include City, State, Country)</i> | |
| c. SPONSOR'S OFFICIAL E-MAIL ADDRESS | | d. DUTY TELEPHONE NUMBER <i>(Include Area Code/Country Code)</i> | e. MOBILE NUMBER <i>(Include Area Code/Country Code)</i> |
| f. STATUS <i>(X one)</i> <input type="checkbox"/> Regular Active Service Member <input type="checkbox"/> Active Reserve <input type="checkbox"/> Active Guard <input type="checkbox"/> Reserves <input type="checkbox"/> National Guard <input type="checkbox"/> Civilian | | g. BRANCH OF SERVICE <i>(Military only)</i> <input type="checkbox"/> Army <input type="checkbox"/> Navy <input type="checkbox"/> Air Force <input type="checkbox"/> Marine Corps <input type="checkbox"/> Coast Guard | |
| h. DOES CHILD RESIDE WITH SPONSOR? <i>(X one. If No, explain.)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |
| i. IS THE CHILD/STUDENT ENROLLED IN DEERS UNDER A SPONSOR OTHER THAN THE ONE LISTED ABOVE? <i>(X one. If Yes, provide name of sponsor:)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |
| 4.a. ARE BOTH SPOUSES ON ACTIVE DUTY? <i>(Military only) (X one. If Yes, answer b. - d. below)</i> <input type="checkbox"/> YES <input type="checkbox"/> NO | | | |
| b. ACTIVE DUTY SPOUSE'S NAME <i>(Last, First, Middle Initial)</i> | | c. BRANCH OF SERVICE | d. RANK/RATE |
| 5. FOR CHILDREN FROM BIRTH TO AGE THREE ONLY: <input type="checkbox"/> YES <input type="checkbox"/> NO Is your child being evaluated for, or receiving, early intervention services on an Individualized Family Service Plan (IFSP)? <i>(X one. If No, sign Item 7 and return to the requesting office. If Yes, have early intervention professional complete Page 3.)</i> | | | |
| 6. FOR STUDENTS AGES 3 - 21 WHO ARE ELIGIBLE FOR ELEMENTARY AND SECONDARY EDUCATION <i>(Includes preschool-aged children):</i> <input type="checkbox"/> YES <input type="checkbox"/> NO a. Is your child being home-schooled? <i>(X one. If No, sign Item 7 and take Page 3 to your child's school. If Yes, complete the following and sign Item 7.)</i> b. Is your child being home-schooled part-time or full-time? <i>(X one)</i> <input type="checkbox"/> Part-time <input type="checkbox"/> Full-time c. When did you start home-schooling? <i>(YYYYMMDD)</i> _____ d. Name/title home school program, if known: _____ e. List any special education-related services received in the last 3 years: _____ | | | |
| 7. a. SIGNATURE | | b. PRINTED NAME <i>(Last, First, Middle Initial)</i> | c. DATE <i>(YYYYMMDD)</i> |
| 8. ADMINISTRATIVE REVIEW <i>(Completed after review of entire form by local military MTF or office receiving form)</i> | | | f. STAMP |
| a. SPONSOR SSN | b. SPOUSE SSN <i>(If dual military)</i> | c. SSN USED IN DEERS <i>(If different from sponsor's)</i> | |
| d. MILITARY MTF OR OFFICE RECEIVING COMPLETED FORM | | e. DATE <i>(YYYYMMDD)</i> | |

| VOLUNTEER AGREEMENT FOR | | | |
|---|---|---|---|
| <input type="checkbox"/> APPROPRIATED FUND ACTIVITIES | <input type="checkbox"/> NONAPPROPRIATED FUND INSTRUMENTALITIES | | |
| PART I - GENERAL INFORMATION | | | |
| 1. TYPED NAME OF VOLUNTEER <i>(Last, First, Middle Initial)</i> | | | 2. YEAR OF BIRTH |
| 3. INSTALLATION | | 4. ORGANIZATION/UNIT WHERE SERVICE OCCURS | |
| 5. PROGRAM WHERE SERVICE OCCURS | | 6. ANTICIPATED DAYS OF WEEK | 7. ANTICIPATED HOURS |
| 8. DESCRIPTION OF VOLUNTEER SERVICES | | | |
| PART II - VOLUNTEER IN APPROPRIATED FUND ACTIVITIES | | | |
| 9. CERTIFICATION | | | |
| <p>I expressly agree that my services are being provided as a volunteer and that I will not be an employee of the United States Government or any instrumentality thereof, except for certain purposes relating to compensation for injuries occurring during the performance of approved volunteer services, tort claims, the Privacy Act, criminal conflicts of interest, and defense of certain suits arising out of legal malpractice. I expressly agree that I am neither entitled to nor expect any present or future salary, wages, or other benefits for these voluntary services. I agree to be bound by the laws and regulations applicable to voluntary service providers and agree to participate in any training required by the installation or unit in order for me to perform the voluntary services that I am offering. I agree to follow all rules and procedures of the installation or unit that apply to the voluntary services I will be providing.</p> | | | |
| a. SIGNATURE OF VOLUNTEER | | | b. DATE SIGNED (YYYYMMDD) |
| 10.a. TYPED NAME OF ACCEPTING OFFICIAL <i>(Last, First, Middle Initial)</i> | b. SIGNATURE | | c. DATE SIGNED (YYYYMMDD) |
| PART III - VOLUNTEER IN NONAPPROPRIATED FUND INSTRUMENTALITIES | | | |
| 11. CERTIFICATION | | | |
| <p>I expressly agree that my services are being provided as a volunteer and that I will not be an employee of the United States Government or any instrumentality thereof, except for certain purposes relating to compensation for injuries occurring during the performance of approved volunteer services and liability for tort claims as specified in 10 U.S.C. Section 1588(d)(2). I expressly agree that I am neither entitled to nor expect any present or future salary, wages, or other benefits for these voluntary services. I agree to be bound by the laws and regulations applicable to voluntary service providers, and agree to participate in any training required by the installation or unit in order for me to perform the voluntary services that I am offering. I agree to follow all rules and procedures of the installation or unit that apply to the voluntary services that I am offering.</p> | | | |
| a. SIGNATURE OF VOLUNTEER | | | b. DATE SIGNED (YYYYMMDD) |
| 12.a. TYPED NAME OF ACCEPTING OFFICIAL <i>(Last, First, Middle Initial)</i> | b. SIGNATURE | | c. DATE SIGNED (YYYYMMDD) |
| PART IV - TO BE COMPLETED AT END OF VOLUNTEER'S SERVICE BY VOLUNTEER SUPERVISOR | | | |
| 13. AMOUNT OF VOLUNTEER TIME DONATED | | | |
| a. YEARS <i>(2,087 hours=1 year)</i> | b. WEEKS | c. DAYS | d. HOURS |
| 14. SIGNATURE | | | 15. TERMINATION DATE <i>(YYYYMMDD)</i> |
| 16.a. TYPED NAME OF SUPERVISOR <i>(Last, First, Middle Initial)</i> | | b. SIGNATURE | |
| | | c. DATE SIGNED (YYYYMMDD) | |

DD FORM 2793, MAY 2009

PREVIOUS EDITION IS OBSOLETE.

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