



UNITED STATES MARINE CORPS
MARINE CORPS RECRUIT DEPOT/EASTERN RECRUITING REGION
PO BOX 19580
PARRIS ISLAND, SC 29905-9580

DepO 1500.60
SAF

15 JUN 2021

DEPOT ORDER 1500.60

From: Commanding General
To: Distribution List

Subj: FORCE PRESERVATION COUNCIL PROGRAM

Ref: (a) MCO 1500.60
(b) MCO 5100.29C, Vol 2
(c) DoD Instruction 6025.18-R, "DoD Health Information Privacy Regulation," January 24, 2003
(d) SECNAVINST 5211.5F
(e) MCO 1752.5C
(f) MCO 5300.17A
(g) DoD Instruction 6490.08, "Command Notification Requirements to Dispel Stigma in Providing Mental Health Care to Service Members," August 17, 2011
(h) SECNAVINST M-5210.1
(i) Department of the Navy Civilian Human Resource Manual (DON CHRM)
(j) MCO 5100.29C, Vol 5
(k) 5 U.S.C. 552a
(l) Maradmin 464/20

Encl: (1) Risk Assessment Mapping Process (RAMP)
(2) Commanding General (CG) Force Preservation Council Slide

1. Situation

a. Human factors are frequently found to have played a part in a tragedy or adverse event. Leaders, special staff, peers, and subordinates are often aware of isolated events, but sometimes are not aware of the whole picture. Continuous, proactive involvement by leadership at all levels is essential to identify and mitigate the stressors that affect the daily lives and performance of Marines and Sailors.

b. This Order establishes policy for the standard organization and conduct of the Force Preservation Council (FPC) within Marine Corps Recruit Depot Parris Island/Eastern Recruiting Region (MCRDPI/ERR).

2. Mission. Establish an FPC program per references (a) through (l) that optimizes the potential of all Marines and Sailors by identifying individual risk factors and applying holistic risk management (RM) measures in order to improve individual and unit readiness.

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3. Execution

a. Commander's Intent and Concept of Operations

(1) Commander's Intent

(a) The FPC shall be guided by the Marine Corps leadership principle "know your Marines and look out for their welfare," and is intended to increase unit readiness by optimizing the potential of every Marine and Sailor through risk assessment and mitigation

(b) FPCs are conducted as prescribed to provide the Commander a better understanding of the overall well-being of unit personnel and to recommend risk mitigation measures as appropriate.

(2) Concept of Operations

(a) Commanders and officers in charge (OIC) shall have a clear, formalized FPC process to consider every member of the command and identify those Marines and Sailors requiring additional resources, risk mitigation plans and/or additional mentoring. Enclosure (1) provides a best practice tool to help commanders and OICs evaluate individual service members.

(b) Commanders and OICs have the latitude to tailor the specific construct of their FPC to their unit size, structure, location, geographic dispersion and mission as long as every service member is individually evaluated.

(c) Use engaged leadership and RM guidance per reference (a) to recognize and intervene early when stressors and potentially risky behaviors first develop in service members, in order to interrupt the chain of events that can lead to an adverse outcome. The objective is an in-depth knowledge of personnel that subsequently informs if, when, and how additional support and resources are provided.

(d) Commanders shall ensure compliance with protected health information (PHI) and personally identifiable information (PII) disclosure standards set forth in references (b) through (f) in the conduct of all FPC meetings and activities. The PHI of service members is only disclosed to, or used by, military commanders when explicitly permitted by law and current departmental directives. Reference (b) provides guidance on uses and disclosures of PHI for armed forces personnel. Additionally, enclosure (2) of reference (f) lists the appropriate occasions for provider disclosure of mental health-related PHI to commanders. Such information lawfully disclosed to a commander shall be disclosed only to FPC members who have a valid need-to-know to carry out official duties in relation to operational and risk management decisions and who are designated, in writing to receive this information.

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(e) MCRDPI/ERR will use four categories in FPC classification: "Low," "Elevated," "Medium," and "High." All personnel in MCRDPI/ERR will be automatically classified in the "Low" category of any FPC upon initial assignment. Personnel whose life events/stressors rise above "Low," but do not meet the enhanced criteria of "Medium," will be assigned in the "Elevated" category (per commander's discretion). The total of the Force Category Distribution will equal the On-Hand (O/H) total (see enclosure (2)).

b. Subordinate Element Tasks

(1) Commanding Officers

(a) FPCs shall be conducted monthly. At a minimum, council membership will consist of the CO/XO (Chairperson), SgtMaj, Company Commander, Chaplain, Legal Officer, Substance Abuse Control Officer, and section OIC/SNCOIC.

(b) For service members being transferred, ensure the gaining command is provided the necessary and relevant FPC information for all personnel in the "Elevated" to "High" categories per reference (k). Gaining commands are encouraged to contact the losing command to discuss information pertinent to personnel FPC categorization. Use of approved resource technology tools may assist in this effort.

(c) The FPC process will be codified in a policy letter or Standard Operating Procedure (SOP) that is available to all assigned personnel.

(d) Enclosure (1) outlines best practices that may be used as appropriate.

(e) Attend the CG's quarterly FPC to provide the status of your unit FPC, using enclosure (2).

(f) Branch Medical Clinic Commander provide a medical and mental health care provider for the FPC.

(2) MCRDPI/ERR Safety Manager

(a) Serve as the primary responsibility for this Order and prepare and schedule the CG's quarterly FPC.

(b) Develop an SOP to ensure that appropriate processes are in place to manage the CG's quarterly FPC.

(c) Record minutes of the CG's quarterly FPC.

(3) Assistant Chief of Staff (AC/S), Telecommunications (G-6). Provide audio/visual support as needed.

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(4) FPC Members will:

(a) Attend the CG's quarterly FPC meeting as directed.

(b) Provide advice and recommendations for the completion of enclosure (2) for each person assigned to FPC

(c) FPC is comprised of AC/S, Religious Ministries, Staff Judge Advocate, Depot Psychologist, Marine Corps Community Services (MCCS) Behavioral Health Coordinator, Sexual Assault Response Coordinator, Substance Abuse Counselor, Victims Legal Counsel, and MCCS Family Readiness

c. Coordinating Instructions. Commanding officers or other persons designated in writing by the commanding officer may receive protected health information, in accordance with reference (b), for the purposes of determining the impact of the service member's health status as related to the command's readiness and military mission.

4. Administration and Logistics

a. MCRDPI/ERR Safety Manager will report completion of FPCs monthly via the Marine Corps Safety Management Systems Tracker (MCSMS).

b. Information generated from the FPC is for the commanding officer's use and for the purpose of force preservation and risk mitigation. It shall be kept in confidence and shall not be used for disciplinary action. Commanding officers may assign a record keeper to record the proceedings of the FPC.

c. FPC minutes/memoranda and the unit/command FPC policy are Inspection General Of the Marine Corps (IGMC) inspection items. FPC minutes/memoranda shall only provide dates convened, location of FPC, and FPC attendance. These records shall be retained for a minimum of three years.

d. Records created as a result of this Order shall be managed according to the National Archives and Records Administration approved dispositions per reference (h) to ensure proper maintenance, accessibility, and preservation regardless of format or medium.

e. The generation, collection or distribution of PII and management of privacy sensitive information shall be in accordance with the Privacy Act of 1974, as amended, per references (c) and (j). Any unauthorized review, use, disclosure or distribution is prohibited.

f. Additional FPC policies, scenarios, sample meeting worksheets, templates, and other best practices can be found at <http://www.safety.marines.mil/Resources/ForcePreservationCouncil.aspx>.

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g. Recommendations concerning the contents of this Order are invited and should be forwarded to the MCRDPI/ERR Safety Manager via the appropriate chain of command.

5. Command and Signal

a. Command. This Order is applicable to assigned Marines and Sailors, and is not applicable to civilian employees. Commanding officers should familiarize themselves with the Civilian Employee Assistance Program in reference (i) as a tool to address civilian human factor concerns.

b. Signal. This Order is effective the date signed.


J. L. NETHERCOT

Distribution: A

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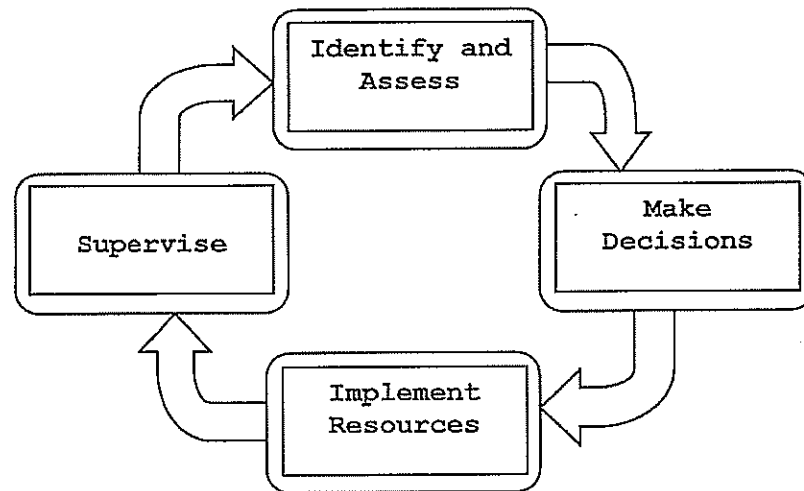
Risk Assessment Mapping Process (RAMP)

Figure 1-1 RAMP

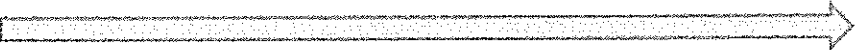
1. RAMP is a cyclic process used to continuously assess and mitigate risk and/or stress. RAMP does not replace engaged leadership. RAMP simply correlates existing assessments already in place (Risk Assessment Codes/High-Med-Low/Colors) and is used by commanders. RAMP is an additional resource to assist the commander. This optional method can help the commander and the FPC by the following:

- a. Identify a problem and assess the impact on the individual and unit readiness.
- b. Make decisions to improve the well-being of the individual.
- c. Implement appropriate resources to reduce risk or stress at an acceptable level.
- d. Supervise the individual through peers, leadership and mentoring.

2. RAMP uses basic RM principles in reference (a) as the guiding process; it is the foundation that supports the mitigation plan for the commander.

3. RAMP "maps" or ties current matrices used by the Marine Corps to ensure uniformity/standardization and to provide appropriate trend analysis.

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| Identify Assess | | | Make Decisions Implement Controls | | Supervise |
|---------------------------------------|----------|--------|---|-------------------------------|--|
| Initial Assessment Correlation Matrix | | | Combat Operational Stress Control | Marine Total Fitness Cords | Final Assessment Matrix Application of Resources (Controls) reduces level of severity and probability |
| Risks | Levels | Colors | | | |
| Critical | High | Red | Ill | Drained | |
| Serious | Medium | Orange | Injured | Depleted | |
| Moderate | Elevated | Yellow | Reacting | Stressed | |
| Minor/Negligible | Low | Green | Ready | Fit | |

Figure 1-2 RAMP Matrix Procedures4. Identify/Assess (Initial Assessment)

a. Through the FPC, identify the risk and/or stress affecting the individual and the unit's readiness.

(1) Identify the specific activity, life event, risk, or stress.

(2) There are five sample risk/stress assessment matrices (described on the following page) that commonly affect service members. These matrices are not all inclusive. Commanders have the latitude to add, adjust or modify the matrices.

b. Assess the risk and/or stress as an expression of potential harm/ severity (described below).

(1) Risks: Critical, Serious, Moderate, or Minor/Negligible.

(2) Levels: High, Medium, Elevated, or Low.

(3) Colors: Red, Orange, Yellow, or Green. Note: for uniformity and standardization across the Marine Corps, the risks/levels/colors equate to each other and mean the same.

5. Make Decisions/Implement Controls

a. Through the FPC, make the appropriate decisions to improve both the well-being of the individual and the unit's readiness.

b. Implement controls, resources or measures such as medical, chaplain, counseling, legal, substance abuse control officer (SACO), financial assistance, family services, etc.

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6. Supervise; Residual Risk/Stress (Final Assessment)

a. After controls, resources or measures are in place, identify and select appropriate risk/level/ color assessment as an expression of reduced harm/severity.

b. The assessment codes, levels or colors (Figure 1-3) are an expression of risk that combines the elements of severity (factors and stressors) and probability (likelihood of impacting individual/unit readiness over time). The assessment is a level of risk/stress for each problem expressed as a single Arabic number as portrayed in the below assessment matrices.

| Off-Duty Matrix | | | PROBABILITY | | | | |
|---|---------------------|----|--|---|--------------------------------------|--|---|
| | | | Likelihood of Occurrence Over Time | | | | |
| | | | A Likely to impact individual readiness | B Probably impact individual readiness | C May impact individual readiness | D Unlikely to impact individual readiness | |
| SEVERITY | Factors & Stressors | I | License suspended or revoke; No training or use of PPE | 1 | 1 | 2 | 3 |
| | | I | History of unsafe acts; History of traffic violations and/or alcohol related offenses; inadequate training or limited use of PPE | 1 | 2 | 3 | 4 |
| | | II | Recently purchased a motorcycle as first time owner; participates in high risk activities or sports | 2 | 3 | 4 | 5 |
| | | IV | Fully trained, wears all FPE, and skilled for off-duty activities | 3 | 4 | 5 | 5 |
| Risk Assessment Codes 1- Critical/High/Red 2-Serious/Medium/Orange 3- Moderate/Elevated/Yellow 4 & 5- Minor/Negligible/Low/Green | | | | | | | |

| Financial Matrix | | | PROBABILITY | | | | |
|---|---------------------|----|--|---|--------------------------------------|--|---|
| | | | Likelihood of Occurrence Over Time | | | | |
| | | | A Likely to impact individual readiness | B Probably impact individual readiness | C May impact individual readiness | D Unlikely to impact individual readiness | |
| SEVERITY | Factors & Stressors | I | Bankruptcy; foreclosure; collection agency | 1 | 1 | 2 | 3 |
| | | I | Past due on bills; late on payments | 1 | 2 | 3 | 4 |
| | | II | High debt load; manages to pay bills and saves or invest money | 2 | 3 | 4 | 5 |
| | | IV | No debts; pays bills on time; saves or invest money | | | | 5 |
| Stress Assessment Codes 1- Critical/High/Red 2-Serious/Medium/Orange 3- Moderate/Elevated/Yellow 4 & 5- Minor/Negligible/Low/Green | | | | | | | |

Figure 1-3 Sample Assessment Matrices

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| Relationships Matrix | | | | PROBABILITY | | | |
|--|---------------------|----|---|--|---|--------------------------------------|--|
| | | | | Likelihood of Occurrence Over Time | | | |
| | | | | A Likely to impact individual readiness | B Probably impact individual readiness | C May impact individual readiness | D Unlikely to impact individual readiness |
| SEVERITY | Factors & Stressors | I | Violence or abuse | 1 | 2 | 3 | |
| | | I | Recent divorce, separation or severely strained relationship | 1 | 2 | 3 | 4 |
| | | II | Recent breakup or family/social discord/seeking counseling services | 2 | 3 | 4 | 5 |
| | | I | | | | | |
| | | IV | Healthy family/social relationship | | | | 5 |
| Stress Assessment Codes | | | | | | | |
| 1- Critical/High/Red 2-Serious/Medium/Orange 3- Moderate/Elevated/Yellow 4 & 5- Minor/Negligible/Low/Green | | | | | | | |

| Medical/Behavioral Health Matrix | | | PROBABILITY | | | | |
|---|---------------------|----|---|---|--|---|---|
| | | | Likelihood of Occurrence Over Time | | | | |
| | | | A Likely to impact individual readiness | B Probably impact individual readiness | C May impact individual readiness | D Unlikely to impact individual readiness | |
| SEVERITY | Factors & Stressors | I | Physical Evaluation Board; Separations; Substance abuse (Drugs/Alcohol) | 1 | 2 | 3 | |
| | | I | Receiving in/out patient treatments; Taking multiple medications (Psychotropic) | 1 | 2 | 3 | 4 |
| | | II | Light or Limited Duty | 2 | 3 | 4 | 5 |
| | | I | | | | | |
| | | IV | Healthy or fit for duty | | | | 5 |
| Stress Assessment Codes | | | | | | | |
| 1- Critical/High/Red 2-Serious/Medium/Orange 3- Moderate/Elevated/Yellow 4 & 5- Minor/Negligible/Low/Green | | | | | | | |

| Performance Matrix | | | PROBABILITY | | | | |
|--|---------------------|----|--|---|--------------------------------------|--|---|
| | | | Likelihood of Occurrence Over Time | | | | |
| | | | A Likely to impact individual readiness | B Probably impact individual readiness | C May impact individual readiness | D Unlikely to impact individual readiness | |
| SEVERITY | Factors & Stressors | I | History of willful TTP/SOP violations; Pending Court martial or administrative separation | 1 | 1 | 2 | 3 |
| | | I | Inadequate skill or training; History of complacency or taking shortcuts; NJP; Competency Review Board; Adverse fitness report | 1 | 2 | 3 | 4 |
| | | II | Training failure (Training & Readiness, FFT,CFT,Rifle Range); Counseling; Derogatory Page 11 entry; Assigned to BCP | 2 | 3 | 4 | 5 |
| | | IV | On track for career progression | | | | 5 |
| | | | | | | | |
| Stress Assessment Codes | | | | | | | |
| 1- Critical/High/Red 2-Serious/Medium/Orange 3- Moderate/Elevated/Yellow 4 & 5- Minor/Negligible/Low/Green | | | | | | | |

Figure 1-3 Sample Assessment Matrices (cont'd)

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7. Example #1. Marine separates from spouse (no children) and is on limited duty for back problems. The Marine is expected to be deployed in six months.

a. Initial Stress Assessment. Based on probability and severity of the stressors: Relationship Matrix severity row is II (recent divorce, separation, or severely strained relationship). Probability column is B (will probably impact individual readiness). Severity II and Probability B equates to stress assessment of "2" (Serious, Medium, Orange).

b. Medical/Behavioral Health Matrix. Severity row is III (Light or Limited Duty). Probability column is C (may impact individual readiness). Severity III and Probability C equates to stress assessment of "4" (Minor, Low, Green).

c. The lowest score will determine the Marine's initial stress assessment, which is "2".

d. FPC determines appropriate mitigation plans (e.g., family counseling and monthly follow-up evaluations with the physician who signed the limited duty board).

e. Once mitigation plans are in place, reassess risk/stress based on severity and probability as executed from initial stress assessment procedure.

f. Final Stress Assessment. Final stress assessment is determined to be a "4".

8. Example #2. A service member just bought a sport bike and is new to riding motorcycles. The member requires motorcycle training. Previously, the member had a speeding ticket (unknown to the command) for speeding in a privately owned vehicle. The member, a social drinker on the weekends, occasionally binges on alcohol.

a. Initial Risk Assessment. Based on probability and severity of the stressors: Severity II, Probability A equates to risk assessment "1" (Off-duty Matrix). Severity I, Probability C equates to risk assessment "2" (Medical/Behavioral Health Matrix). The service member's initial risk assessment is determined to be a "1".

b. FPC determines appropriate mitigation plans (e.g., complete required training/rider mentorship in accordance with

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reference (j), counsel member for speeding, refer member to SACO and medical).

c. Once mitigation plans are in place, reassess risk/stress based on severity and probability from the matrices.

d. Final Risk Assessment. Final risk assessment is determined to be a "3".

e. Continued reassessment via the RAMP and leadership engagement is necessary to ensure the service member's continued well-being and readiness.

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Commanding General (CG) Force Prevention Council Slide



UNIT



Force Category Distribution:

| T/O | O/H |
|-----|-----|
| 700 | 800 |

| High | Medium | Elevated | Low |
|------|--------|----------|-----|
| 26 | 58 | 220 | 496 |

Concerns:

1. Increased transition to virtual/hybrid school & limited available day care options – negative impacts on recruiting mission & family operations.

Root Causes:

1. Child care coverage have increased the demands of parenting.
- 2.

Challenges:

1. Balancing rigorous duty with familial commitments in personnel life.
2. Maintaining healthy relationships at home despite increased family and financial pressures.

Success Stories:

1. Marine had issues was placed on FPC (med) and is now off FPC

FOUO

Force category distribution shall equal your O/H