

Navy Drug and Alcohol Advisory Council (NDAAC)

1. OPNAVINST 5350.4 requires that local NDAACs be organized to support the CNO's "Zero Tolerance" initiative. The primary purpose of the NDAAC is threat assessment, e.g., determining the extent of the local and regional drug and alcohol threat, assessing the local climate for abuse and making appropriate policy recommendations to counter the threat. NDAACs are tasked to develop written plans to combat the local and regional alcohol and other drug abuse threat. (OPNAVINST 5350.4C, paragraph k. (2)).

2. NDAACs should operate as "Total Quality Leadership" (TQL) bodies in that they provide local and regional commanders with drug and alcohol program information from a variety of sources, including: the FSC, base security, family advocacy, legal, medical, chaplain, Naval Criminal Investigative Service (NCIS) and local Navy alcohol and drug abuse treatment facilities (MTF). OPNAVINST 5350.4C also levies specific NDAAC requirements.
 - a. The chairperson shall be an O-5 or above for local NDAACs..

 - b. The ADCO or command DAPA may serve as the "NDAAC Coordinator", scheduling quarterly meetings, setting agenda and ensuring that meeting minutes are prepared and distributed. However, this function is administrative and should not be confused with chairing council meetings. For clarification, the term "NDAAC Coordinator" shall only be used when referring to the individual tasked with logistical support and not with council chairmanship.

3. NDAACs should function at the "executive" level, capable of "on the spot" decision-making and policy changes in response to identified drug/alcohol problems in the area. **Because NDAAC meetings should be strategic in nature, those that operate without high level participation are normally ineffective and commands gradually discontinue regular attendance as a result of the council being viewed as "non-productive."** Also, NDAACs comprised primarily of command DAPAs have historically been ineffective in that they are not able to adequately assess local threat conditions, do not have the "horsepower" required to make appropriate policy changes and merely serve as information passing bodies as opposed to a threat assessment group. **Local and tenant command representation should be comprised of executive level leadership, e.g., commanding officers, officers in charge, or executive officers.** NDAACs can easily be combined with other established meeting schedules such as Tenant Command meetings or Department Head meetings and do not necessarily require the scheduling of an additional commitment.

4. The failure of a local NDAAC can generally be traced to a lack of understanding of the precise purpose of the council, inappropriate membership, or failure of individual council members to provide information critical to effective threat assessment. OPNAVINST 5350.4C provides guidance regarding membership and operation of the local NDAAC. Examples of specific information that council members should be tasked to bring to NDAAC meetings are listed below. This list is not all inclusive and should not limit the resources which are otherwise available to the NDAAC:

a. Base Security:

- Number of DUI/DWI cases on/off base since the last meeting/quarter.
- Number of drug/alcohol related incidents (other than DUI/DWIs) since last meeting/quarter.
- Number of drug and alcohol Incident Complaint Reports (ICRs) generated since last meeting/quarter.
- Comparison of above information with same time frame last year/previous years.
- Number of gate searches conducted since last meeting/quarter and the results.
- Number of barracks/building/shipboard searches involving drug dogs conducted since last meeting/quarter and results.
- Significant substance abuse trends detected/noted.

b. Base Legal:

- Number of administrative separations/courts martials involving alcohol and other drugs since last meeting/quarter.
- Comparison of these numbers with same time frame last year/previous years.

c. Local law enforcement representative (sheriff, police, constable, etc.):

- List of incidents involving military personnel detained/involved in "courtesy turnovers" since last meeting/quarter. The list should be broken down by name, SSN, rank/rate, command, etc.
- Significant problems noted in the local community involving military personnel and alcohol/other drugs.

d. Family Advocacy/FSC:

- Number of new cases since last meeting/quarter involving alcohol/other drugs.
- Number of referrals made to CAAC/MTF or local DAPAs for suspected alcohol/other drug abuse problems.
- Comparison of above data with same time frame last/previous years.

e. Morale, Welfare, and Recreation:

- Ongoing "deglamorization efforts."
- Designated Driver Programs and policies currently in effect.
- Server Training Programs and policies currently in effect, including: the total number of servers employed base-wide; the number currently trained with approved curriculum; the number needing training/scheduled to attend and the projected training dates for upcoming server training sessions.
- Trends and problems noted in clubs due to alcohol, e.g., fights, altercations, underage drinking, etc.
- Ongoing efforts to limit underage drinking, e.g., positive identification checks, arm bands, hand stamps, etc.

f. Chaplain:

- Number of cases/referrals involving alcohol and other drugs since last meeting/quarter.
- Comparison and trends from last/previous years.
- Significant trends noted.

g. NCIS:

- Significant substance abuse trends noted in ongoing/completed investigations.
- List of local establishments with alcohol/drug abuse "reputations".
- Extent of alcohol involvement in criminal investigations involving service members.

h. Medical:

- Number of cases seen in emergency room/treatment involving alcohol abuse during past quarter and apparent trends.
- Number of referrals made to CAAC/MTF.
- Comparison of these numbers with same time frame last year/previous years.

i. CAAC/MTF Representative:

- Number of drug and alcohol screenings conducted since last meeting/quarter. (Should be broken down into separate "alcohol" and "drug" categories).
- Number of dependency recommendations since last meeting/quarter and significant trends noted, e.g., "60 percent increase in dependency recommendations over this time last year" and the significance, e.g., "appears that local commands are not practicing early intervention and waiting too late to refer personnel for assistance."
- Significant substance abuse trends noted.
- Comparison of all information to same time last year/previous years.
- Comparison of security incident information with CAAC/MTF screening records (e.g., how many personnel involved in drug/alcohol related incidents, as documented by security, were screened? Who were not screened? What commands are they from?).
- Attendance statistics from monthly/quarterly DAPA meetings, e.g., which commands are not routinely represented at DAPA meetings?
- ADAMS and PREVENT classes scheduled for the next quarter.
- Outreach activities conducted for the last quarter and planned for the next.

j. PREVENT Representative:

- Number of PREVENT classes convened since last meeting/quarter by commands.
- Number of PREVENT graduates since last meeting/quarter and comparison from last/previous years.
- Outreach activities conducted in last quarter.

6. In addition to threat assessment and appropriate policy making to deal with the local/regional drug/alcohol abuse threat, every NDAAC meeting should emphasize and/or publicize the following:

- a. The need for a 100 percent submission rate of Drug and Alcohol Abuse Reports (DAARs) on personnel screened/entering the program as required by OPNAVINST 5350.4C.
- b. The requirement for a CAAC/MTF screening for personnel involved in an alcohol related incident .

- c. DAPA meetings scheduled for the next quarter and future topics of discussion.
- d. ADAMS and PREVENT class schedules for the next quarter.
- e. Changes in NADAP policies, including urinalysis policies.

7. The NDAAC is one of the most effective and important base organizations charged with evaluating substance abuse problems in the local/regional area. Without definitive guidance on the operation of the council and more importantly, "executive level" membership to make timely policy decisions, the council cannot deal with the identified drug/alcohol threat and it will cease to provide effective deterrence.

8. The NDAAC concept can easily be adapted at the command level, especially for large afloat commands. A command advisory council would consist of Department Heads, Command Master Chief, Command Ombudsman, Medical, Chaplains, etc..

9. Regardless of the level at which it operates, Local or Command, the NDAAC is the cornerstone of an effective prevention program. Major claimants are encouraged to support the NDAAC concept via any means available. The guidelines listed above for participation and contributions should provide the chairman at any level with the tools required to implement and conduct a proactive, effective program.