MILPERSMAN 1910-122

SEPARATION BY REASON OF CONVENIENCE OF THE GOVERNMENT - PERSONALITY DISORDER(S)

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<th>Responsible Office</th>
<th>NAVPERSCOM (PERS-832)</th>
<th>NAVPERSCOM (PERS-913)</th>
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References
(a) Diagnostic and Statistical Manual of Mental Disorders, 4th Ed. (DSM IV), 1994; Text Revision DSM-IV-TR, 2000
(b) NAVMED P-117, Manual of the Medical Department
(c) DoDI 1332.14 of 28 Aug 2008
(d) SECNAVINST 6320.24A

1. Separation Authority (SA). Commanding officers (COs) with Special Court-Martial Convening Authority (SPCMCA), unless member has served in a war zone. In such cases, SA resides with the General Court-Martial Convening Authority (GCMCA) or Navy Personnel Command (NAVPERSCOM).

2. Policy

   a. Servicemembers returning from deployment in a hostile fire/imminent danger war zone area diagnosed with Post Traumatic Stress Disorder (PTSD) or a Traumatic Brain Injury (TBI) may not be separated based on a personality disorder. Members with PTSD/TBI should be referred to a Physical Evaluation Board (PEB) for possible disability determination.

   b. Per references (a) through (d) and MILPERSMAN 1910-120, members may be processed for separation based on a clinical diagnosis of a personality disorder when

      (1) the disorder is so severe that the member’s ability to function effectively in the Navy environment is significantly impaired; and
(2) the impairment interferes with the member’s performance of duty, or poses a threat to the safety or well-being of the member or others, and the member has not responded to leadership and counseling.

c. Separation processing may not be initiated until the member has been counseled formally concerning deficiencies and has been afforded an opportunity to overcome those deficiencies as reflected in appropriate counseling or personnel records. For personality disorders, the member will also be counseled that the diagnosis of a personality disorder does not qualify as a disability.

d. Separation on the basis of personality disorder is authorized only if a diagnosis by a psychiatrist or PhD-level psychologist utilizing reference (a), and per procedures established by the Navy, concludes that the disorder is so severe that the member’s ability to function effectively in the military environment is significantly impaired. For servicemembers who have served or are currently serving in imminent danger pay areas, a diagnosis of personality disorder as addressed in the previous sentence must be corroborated by a peer or higher-level mental health professional and endorsed by the Surgeon General of the Navy. The diagnosis must address post-traumatic stress disorder (PTSD) or other mental illness co-morbidity. The onset of personality disorder is frequently manifested in the early adult years and may reflect an inability to adapt to the military environment as opposed to an inability to perform the requirements of specific jobs or tasks or both. As such, observed behavior of specific deficiencies should be documented in appropriate counseling or personnel records and include history from sources such as supervisors, peers, and others, as necessary to establish that the behavior is persistent, interferes with assignment to or performance of duty, and has continued after the servicemember was counseled and afforded an opportunity to overcome the deficiencies.

e. Separation for personality disorder is not appropriate nor should it be pursued when separation is warranted on the basis of unsatisfactory performance or misconduct. In such circumstances, the member should not be separated under this paragraph regardless of the existence of a personality disorder. Unless found fit for duty by the disability evaluation system, a separation for personality disorder is not authorized if service-related PTSD is also diagnosed.
f. Nothing in paragraph 2 of this article precludes separation of a servicemember who has a personality disorder or other designated physical or mental conditions under any other basis set forth in MILPERSMAN 1910-120 or for any other reason authorized by this article.

g. Prior to involuntary separation under this provision, the notification procedure in paragraph 6 shall be used. Documentation must include evidence that the servicemember is unable to function effectively because of a personality disorder.

3. Procedures for Requesting a Mental Health Evaluation (MHE).

Use the following sample letter to schedule a member for a referral to an inpatient/outpatient MHE (use proper letter format):

NOTE: In the event compliance with any of the rights or procedures in this letter is not practicable due to the need for emergency referral, operational commitments, or other circumstances, prepare a memorandum signed by the CO, citing the reasons. Provide copies of the memorandum to the member and to the mental health professional (MHP) for inclusion in the member’s medical record.

From:   Commanding Officer
To:     (Rate/Rank, Name, Branch)
Subj:   REFERRAL FOR MENTAL HEALTH EVALUATION AND PATIENT RIGHTS
Ref:    (a) MILPERSMAN 1910-122

1. You are being referred for a mental health evaluation (MHE). You are directed to report to (point of contact) at (location), no later than (time and date) to undergo an MHE.

2. The following behavior(s) or verbal expression(s) were considered in determining the need for this MHE: (brief but clear description; e.g., your verbal expression of an inability to perform your duties and responsibilities, a fear of committing a self-destructive act, etc.)

3. Prior to making this referral, (rank/title/name), a mental health professional (MHP), was consulted. Or: No mental health professional (MHP) has been consulted prior to making this referral because (list reason).

4. Per reference (a), you are entitled to the following rights. Initial in the space provided those rights you desire:
The right to meet with a military judge advocate (MJA) (or civilian attorney employed by the Department of Defense (DoD)) who is available to advise you of your rights regarding redress should you question this referral.

The right to submit to the Inspector General (IG) for investigation any allegation that your MHE referral was a reprisal for making or attempting to make a lawful communication to a member of Congress, appropriate authority in your chain of command, an IG, or members of an audit, inspection, investigation, or law enforcement organization.

The right to a second MHE by an MHP of your own choosing, provided reasonably available. Reasonably available means MHP must be available to conduct the evaluation within 10 working days of this letter. Evaluations by an MHP of your own choosing will be at your own expense. You will not be charged for any DoD professional fees; however, ancillary costs such as travel to the site of the evaluation will be at your own expense.

The right to communicate lawfully, without restriction, with an IG, attorney, member of Congress, or others about your referral for an MHE.

The right, except in emergencies, to 2 working days to meet with an attorney, IG, chaplain, or other appropriate party prior to a scheduled MHE. If your condition requires the MHE to be conducted earlier than 2 working days, the reason will be stated in writing as part of the request for the MHE.

If your assignment to a naval vessel or unit or your military duties cause the above to be impractical, I will provide you with a separate memorandum which states the reasons for our inability to comply with such procedures.

The following personnel can assist you regarding this referral:

a. Military attorney: (name/location/telephone number/hours available).

b. Inspector General: (name/address/telephone number/hours available).

Signature of Commanding Officer

4. **Member’s Endorsement to CO’s Letter.** Prepare the member’s endorsement in the following format (use proper endorsement format):

   (Date)

   FIRST ENDORSEMENT on

   From: (Rate/Rank, Name, Branch)
   To: Commanding Officer

   1. I hereby acknowledge receipt of this referral and have indicated above my elections. I understand that failure to make my scheduled appointment may result in disciplinary and/or administrative action.

   Member’s signature
NOTE: Provide copy to the member, retain the original pending completion of the referral and use in case of further administrative separation (ADSEP) action, if appropriate.

5. **MHP Assessment**

   a. An MHP is a medical officer specializing in psychiatry, or is a clinical psychologist as described in paragraph 2d of this article. The MHP will assess the circumstances surrounding the request for evaluation to ensure the evaluation does not appear to have been used as a reprisal for any type of whistle-blowing attempts or actions by the member. The MHP will consider information provided both by the member and the command. Evidence, which indicates the evaluation may be in violation of this article, will be reported by the MHP to member’s CO for possible referral to an IG, if applicable.

   b. The diagnosis of a personality disorder should be made only when the characteristic features are typical of the person’s long-term functioning and are not limited to discrete episodes of illness.

   c. The MHP will ensure the member is advised of the purpose, nature, and likely consequences of this evaluation and ensure the member understands that this evaluation lacks confidentiality.

NOTE: When an MHP performs both evaluative and therapeutic roles, the possible conflict of loyalties will be explained to the member at the outset of the therapeutic relationship.

6. **Notification Procedures**

   a. The Notification Procedure (MILPERSMAN 1910-402) will be used.

   b. Member may be processed when

      (1) the MHE is made by a competent MHP and concludes that the member’s personality disorder is so severe that member’s ability to function effectively in the naval environment is significantly impaired. Information and recommendations of the MHP are for command use in determining a proper course of action; however, they will not be used as the total justification for processing the member for separation; or
(2) there is documented evidence that the diagnosed
personality disorder interferes with the member’s performance of
duty. Evidence may be in the form of documented reduction in
performance marks, minor disciplinary infractions, work
disruptions, etc., which persist in spite of reasonable attempts
by the command in correcting deficiencies through leadership and
non-medical counseling. Appropriate disciplinary action may be
used to document interference with performance of duty.

c. Member must receive a NAVPERS 1070/613 (Rev. 7-06),
Administrative Remarks counseling/warning (MILPERSMAN 1910-204),
and be given an opportunity to overcome his/her deficiencies in
performance and conduct prior to any ADSEP action for a
personality disorder. Per reference (c), there are no
exceptions.

NOTE: (1) Recommendation by the MHP for immediate discharge
when the member is either not diagnosed as a threat to
him/herself or others, or, not diagnosed as having a personality
disorder, will not be processed under this article.

NOTE: (2) Per MILPERSMAN 1910-514, if an administrative board
is required prior to a separation determination, the
administrative board may not disregard or change the approved
diagnosis of a medical officer. Members can introduce evidence
as to the impact that such a diagnosis may have on their
potential for productive future Naval Service.

d. Required enclosures when processing for personality
disorder include

(1) copy of the MHE by the MHP;

(2) copy of the notification letter (MILPERSMAN
1910-402);

(3) a completed, legible, and signed copy of the MHE
referral letter (if applicable); and

(4) a copy of the NAVPERS 1070/613 counseling/warning.
e. Forward all complete cases by letter of transmittal to

- NAVPERSCOM, Enlisted Performance and Separations Branch (PERS-832) for active duty; or
- NAVPERSCOM, Reserve Enlisted Status Branch (PERS-913) for Reserves;

for review and/or final determination.

7. **Characterization of Separation.** Honorable (HON), unless an Entry Level Separation (ELS) or General (Under Honorable Conditions) (GEN) is warranted per MILPERSMAN 1910-300 to 1910-308.
ADMINISTRATIVE REMARKS
NAVPERS 1070/613 (REV. (7-06))
S/N: 0106-LF-132-8700

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(DATE): ADMINISTRATIVE COUNSELING

1. You are hereby being counseled regarding your condition. You were diagnosed with (explain briefly the circumstances). Your present condition has not been considered a physical disability; however, it may be a disqualifying factor in determining your suitability for further Naval Service.

2. You are being afforded any and all assistance as required by your condition. You will adhere to any and all of the recommendations of your attending physician and/or medical board.

3. Further assistance is available through: LPO, DEPARTMENT HEAD, COMMAND MASTER CHIEF, CHAPLAIN, XO, CO, AND OFFICERS OF THE MEDICAL CORPS.

4. This counseling is made to afford you an opportunity to undertake the recommended corrective action. Any failure to adhere to the guidelines cited above will make you eligible for administrative separation.

________________________________________
SIGN AND DATE

________________________________________
WITNESS

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<th>NAME (Last, First, Middle)</th>
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NOTE: If the member refuses to sign, document such and have a commissioned officer sign NAVPERS 1070/613 as a witness.