



DEPARTMENT OF THE NAVY
COMMANDER
NAVAL EDUCATION AND TRAINING COMMAND
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NETCINST 1500.13D
N00X
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NETC INSTRUCTION 1500.13D

From: Commander, Naval Education and Training Command

Subj: NAVAL EDUCATION AND TRAINING COMMAND HIGH AND MODERATE-RISK TRAINING SAFETY PROGRAM

Ref: (a) OPNAVINST 1500.75D
(b) NAVEDTRA 135D of 10 August 2018
(c) OPNAVINST 5450.336D
(d) OPNAV M-5102.1/MCO 5100.29C of 27 September 2021
(e) MIL-HDBK 1027/1B
(f) NFPA 1403
(g) OPNAVINST 3500.39D
(h) NETCINST 5100.1B
(i) NETCINST 1500.16A
(j) OPNAVINST 1720.4B
(k) SECNAV M-5216.5 of 16 May 2018
(l) NETCINST 1500.5D
(m) MILPERSMAN 1306-953
(n) OPNAV M-5100.23 of 23 August 2021
(o) DoD Instruction 1010.09 of 28 June 2018
(p) UFC 4-179-02 of 5 March 2020
(q) CNO WASHINGTON DC 101338Z May 19 (NAVADMIN 108/19)

1. Purpose. This instruction amplifies Office of the Chief of Naval Operations (OPNAV) policy and procedures to abate or minimize mishaps during high- and moderate-risk training.

2. Cancellation. NETCINST 1500.13C.

3. Background. Reference (a) establishes Department of Defense (DoD) policy for High-Risk Training Safety (HRTS). Reference (b) establishes guidance on the management of Navy Schools under Naval Education and Training Command (NETC) purview. Reference (c) establishes Mission, Functions, and Tasks of NETC. Reference (d) establishes safety investigation and reporting policy for all Navy and Marine Corps activities, commands, personnel, and contractors. Reference (e) prescribes design criteria and technical and environmental requirements for firefighting school facilities. Reference (f) establishes National Standards for live fire training evolutions. Reference (g) establishes policy, guidelines, procedures, and responsibilities to standardize the operational risk management process across the Navy. Reference (h) establishes amplifying policy and procedures for the NETC Safety and Occupational Health (SOH) Program. Reference (i) provides amplifying guidance for the NETC firefighting training program. Reference (j) establishes guidance for the Navy Suicide Prevention Program. Reference (k) details the uniform standards for the management and preparation of correspondence throughout the Department of the Navy (DON). Reference (l) provides execution guidelines for the qualification, certification, and sustainment of Navy instructors (i.e., officer, enlisted, and federal service). Reference (m) provides guidelines for personnel selected to be DON instructors. Reference (n) establishes policy guidance for the management of

the DON SOH Program. Reference (o) establishes policy, assigns responsibilities, and prescribes procedures for establishing and maintaining a drug-free workplace program. Reference (p) provides requirements for DoD small arms range facilities. Reference (q) alerts all personnel of the importance of universal training precautions to reduce the risk of exercise-related collapse and death.

4. Discussion

a. Aggressive training programs prepare personnel to perform mission essential high and moderate-risk tasks required to fulfill assigned duties. References (a) through (c) recognize NETC as a Training Agency, to ensure training is conducted in a realistic manner, while maintaining a safe learning environment. To comply with references (a) through (q), NETC has developed this policy that outlines roles and responsibilities for high- and moderate-risk training safety within the NETC domain.

b. High-Risk Training (HRT) is basic or advanced, individual or collective training in a traditional or non-traditional environment which exposes the crew, staff, students, and assets to the potential risks of death, permanent disability, or loss during training.

(1) For the purpose of this instruction, an assignment of any initial Risk Assessment Code (RAC) of 1 or 2, as well as an assignment of RAC 3 in severity level I (death or loss of asset) or severity level II (severe injury or damage), although the "probability" of an injury or loss is "unlikely (E)" or "seldom (D)," must be considered HRT.

(2) A RAC 3 in severity level III (minor injury or damage) or severity level IV (minimal injury) should receive NETC review to confirm the assessment and reduce any ambiguity about the subjectivity of the assessment (i.e., an event scored as a D, II is a RAC 3 and is a high-risk event, while an event scored as B, III is also a RAC 3, not high-risk by definition, but should be closely reviewed, due to the frequency of minor injuries or minimal threats, to ensure that the proper "severity level" assigned is not really an A, III - RAC 2 due to the interpretation of "likely" versus "probable" by the assessor during the risk assessment).

(3) Some examples of HRT include, but are not limited to: Visit board search and seizure; survival (aviation, water, land); firefighting; damage control; small arms; law enforcement; physical security; diver; explosive ordnance disposal; basic underwater demolition; improvised explosive device defeat; aircrew; survival escape and resistance; aviation water survival; and rescue swimmer schools, etc.

c. Reference (a) allows NETC to change the high-risk classification of a formal course, with OPNAV N09F concurrence, based on an assessment of risks following an evaluation of hazards and a review of historical data. NETC shall determine the command's ability to meet the requirements of HRT as outlined in this instruction, and make informed risk decisions to change the high-risk classification based on an assessment of risks following evaluation of the hazards and historical data by a NETC-assigned HRTS professional. Formal high-risk courses may be lowered to moderate-risk by NETC. Roles and responsibilities for moderate-risk courses are listed in paragraph 7.

d. Moderate-risk training is that which has been identified as moderate risk by NETC N00X, and in which a lack of stringent controls could lead to degraded mission capabilities in terms of the necessary standard and reduced mission capability if exposure occurs during training. It is training that contains hazards in practical application laboratories that require compliance with Occupational Safety and Health Administration (OSHA), American National Standards Institute, National Fire Protection Administration, or OPNAV requirements. These labs could include, but are not limited to, fall protection, machine guarding, Hazardous Materials (HAZMAT), use of Personal Protective Equipment (PPE), and electrical safety controls.

5. Scope. This instruction applies to all NETC activities and personnel (military, civilian, and contractors), and non-NETC activities and personnel involved in assisting with, conducting, or teaching NETC controlled high- and/or moderate-risk curricula.

6. Action. All levels of command are responsible for implementing and maintaining an effective HRTS program per references (a) and (b), and a moderate-risk training safety program per this instruction.

7. Roles and Responsibilities. Implementation of the HRTS program for all NETC traditional and non-traditional (contractor) training provides a safe training and working environment for staff and students.

a. NETC:

(1) Issue amplifying policy, and provide guidance and support to all subordinate commands conducting HRT.

(2) Designate all courses that meet the threshold for HRT as defined in reference (a).

(a) Maintain a list of these courses by title and Course Identification Number (CIN).

(b) Provide an updated list of all formal HRT courses to Commander, Naval Safety Center (COMNAVSAFECEN).

(c) If a course is being considered for removal from HRT, forward the risk assessment and supporting historical data to OPNAV N09F for concurrence.

(d) When reviewing high-risk classification, consider all submissions from activities and make informed risk decisions, based on available or provided assessments of risk, evaluation of the hazards, and any historical data available.

(3) Use Enterprise Safety Applications Management System (ESAMS) HRTS Module executive summary as well as results of Learning Site (LS) triennial HRTS Evaluations (HRTSE) to provide a HRTS self-assessment, if requested by higher authority. This should not be confused with the Safety and Occupational Health (SOH) Self-Assessment referred to in other OPNAV and NETC safety policy documents.

NOTE: LS used throughout this instruction is a generic term that means any activity that conducts HRT.

(4) Pursue a HRTS program that minimizes the probability of mishaps and related injuries to students, staff, and Training Equipment (TE) during formal training.

(5) Schedule and lead, as applicable, on-site HRTSEs of all traditional and non-traditional high-risk courses, required by reference (a), at least once every 36 months.

NOTE: The NETC HRTSE Team is authorized to observe all HRT scenarios, including firefighter training, without completing NETC 1500/5.

(a) Conduct HRTSEs immediately after modifications to high-risk course platforms are completed, or when changes to existing high-risk courses introduce additional risk. This will be on a case-by-case basis as determined by NETC N00X.

(b) Conduct HRTSEs of newly developed high-risk courses prior to, but no later than, the first pilot course being taught. HRTSEs must be conducted at each site that desires to teach a high-risk course that they are not currently approved to teach.

NOTE: If an excessive amount of deficiencies or Immediately Dangerous to Life or Health (IDLH) deficiencies are identified, which cannot be corrected during the HRTSE, the team lead will discuss the situation with NETC N00X. A determination will be made of whether to change the HRTSE into a technical assist visit. If a technical assist visit occurs, NETC will schedule another HRTSE (90 to 180 days out). The Learning Center (LC) will be required to fund all travel requirements to conduct another HRTSE. Status updates for all identified deficiencies will be required at a frequency determined by NETC N00X.

(c) Develop and promulgate an annual evaluation schedule by 1 September.

(d) Ensure all team members are trained and qualified as outlined in the "NETC Training Safety Evaluator & Mishap Investigator Job Qualification Requirement (JQR)."

(e) Evaluate the performance of the supporting HRTS Administrator (HRTSA) during LS HRTSEs.

(6) Implement a process that ensures a complete review of all new training evolutions identified as high-risk, high-risk mobile training team courses, major modifications to previously identified high-risk platforms, and elements that introduce additional risk to all courses of instruction.

(7) Initiate a Safety Investigation Board upon notification of a Class A on-duty mishap, per reference (d). All reportable mishaps shall be

entered into the Risk Management Integration Streamlined Incident Reporting (RMI SIR) database.

(8) Interpret standards, regulations, policies, and procedures. Provide guidance when they are lacking clarity or conflict exists.

(9) Ensure policy for HRTS processes and procedures is standardized across LCs and Naval Service Training Command (NSTC), when practical.

(10) Ensure all training platforms, Technical Training Equipment (TTE), devices, training areas, and equipment used to conduct HRT (small arms ranges, firefighter trainers, swimming pools, confidence courses, etc.) are periodically evaluated to ensure they are safe to operate, comply with manufacturer's instructions and OPNAV, NETC, Naval Facilities Engineering Command, and Commander, Navy Installations Command directives, as applicable.

(a) Ensure HRTS Officers (HRTSO) conduct annual internal inspections of HRT platforms and record it in ESAMS.

(b) Ensure a preventative maintenance system is established and includes spot-checks for all HRT equipment, devices, and PPE.

NOTE: If preventative maintenance is performed by contractors, it will be evaluated during the HRTSE.

(11) Designate, in writing, a HRTSA in areas that contain multiple LSs with different LCs. Also designate a HRTSA where HRT course(s) and HRTSOs are remotely located from the HRTSA. The following are prerequisites:

(a) HRTSAs must have skills in hazard and risk recognition, HRTS, and knowledge of referenced instructions.

(b) HRTSA must be an SOH professional (Occupational Series 0018), and have successfully completed the following courses (or equivalents approved by OPNAV/COMNAVSAFECEN):

NOTE: Course information is located at: <https://navalsafetycenter.navy.mil/Learning/NAVSAFENVTRACEN/Course-Schedule/>

1. Introduction to Navy Occupational Safety and Health (Ashore), A-493-0050 or A-493-0550 (online).

2. General Industry Safety Standards, A-493-0061.

3. Mishap Investigation (Ashore), A-493-0078.

4. Electrical Safety Standards, A-493-0033.

5. Introduction to Hazardous Materials (Ashore), A-493-0331 or A-493-0331 (online).

6. Introduction to Industrial Hygiene for Safety Professionals, A-493-0035, or A-493-0335 (online).

7. Navy Ergonomics Program, A-493-0085 (online).
8. Machinery and Machine Guarding Standards, A-493-0073.
9. NAVOSH Assessment Tools and Strategies, A-493-0889 or A-493-0889 (online).
10. OSHA online course #6008 Intro to OSHA for Other Federal Agencies.

(c) Must complete NETC N00X Domain Safety JQR. Prospective HRTSAs should contact NETC N00X to secure current Domain Safety JQR.

(12) Determine a Course of Action (COA) for a training event when HRTSA or HRTSO has determined that the established controls, within a course of instruction or training platform, are ineffective to mitigate the known hazards and an immediate threat to personnel safety, equipment, property, or the environment could exist. The COA determined by NETC N00X includes, but is not limited to:

- (a) Event cancellation pending HRTSE.
- (b) Implementation of additional mitigating controls to continue training.

(13) Evaluate all course risk assessments and make final determination on whether a course is to be high or moderate risk.

b. HRTSA. All SOH Professionals within the NETC domain have a vital role in assisting with the management of the NETC HRTS Program. They may be designated, in writing, as an HRTSA per paragraph 7c(3)(c). They may also be assigned to committees, mishap investigation boards, or other tasks identified within this instruction. No HRTS Program is complete without the effective utilization of these personnel.

(1) Serve as the central point of contact for HRTS-related matters within their Area of Responsibility (AOR).

(2) Assist HRT activities within assigned AOR to identify and define mission unique HRTS requirements.

(3) Assist NETC in the development of HRTS policy and procedures, as requested.

(4) Develop an email distribution list of all assigned activity HRTSOs within their AOR to aid in distribution of HRTS related materials received from NETC Headquarters.

(5) Ensure all reportable HRT-related mishaps are entered into RMI SIR, validated, and closed (within 30 days). If the circumstances of the mishap (i.e., prolonged medical treatment and follow-up care, delays in receiving official reports or documentation, etc.) prevent closure of the report within 30 days, request an extension from the convening authority in RMI.

(6) Ensure that student HRT-related mishaps are entered under the student Unit Identification Code (UIC) vice staff UIC.

(7) Monitor training and qualifications of area HRTSOs.

(8) Upon notification of a Class A training-related mishap at an assigned activity, contact the Commanding Officer (CO) or Officer in Charge (OIC), provide assistance in developing the 72-hour profile, and immediately begin the mishap investigation per reference (d).

(9) Assist or lead mishap investigation teams, as requested by NETC N00X.

(10) Offer assigned activities assistance in conducting an analysis of training-related mishaps.

(11) Ensure the appropriate Chain of Command (COC) and NETC N00X are promptly notified when issues arise affecting the safety of HRT within assigned AOR.

(12) Ensure that student UICs are accurately entered into RMI for all assigned LSs.

(13) Conduct a HRTSO Safety Committee meeting within assigned AOR.

(a) Meetings will be conducted biannually.

(b) Meetings may be conducted face to face, through conference calls, or electronic media.

(c) Meetings will be documented in ESAMS using ESAMS Class Module and course ID 4956 - High-Risk Training Safety Committee.

(d) A copy of the meeting minutes shall be provided to the committee members.

(14) Assist with the conduct of HRTSEs, when requested by NETC N00X.

(15) Monitor HRT at all activities within assigned AOR. At a minimum, this shall consist of:

(a) Ensure Emergency Action Plan (EAP) monthly reviews, quarterly walkthroughs, and annual drills are conducted.

(b) Review instructor qualifications.

(c) Review all course risk assessments (initial and annual reviews).

(d) Conduct periodic observations of HRT.

(16) Assist LSs within assigned AOR to develop a HRTSO JQR.

(17) Assist HRTSOs, within assigned AOR, with annual evaluation of all HRT Equipment, devices, training areas, and platforms, if requested.

c. LCs (Includes NSTC and Naval Education and Training Security Assistance Field Activity (NETSAFA))

NOTE: Establishment of more stringent requirements by LCs shall be coordinated with NETC N00X. LCs shall not duplicate reference (a) or this instruction as a LC instruction. Modification of NETC or OPNAV forms is not authorized.

(1) Curricula Related Responsibilities

(a) Validate and update the Special Course Indicator Code within Corporate enterprise Training Activity Resource Systems (CeTARS) whenever high-risk courses are developed, modified, or when elements of risk are introduced into courses not previously considered high-risk courses.

(b) Ensure all curricula and Standard Operating Procedures (SOP) for each HRT course are clearly annotated with identified risks.

(c) Ensure LSs conduct formal training and high-risk evolutions following only approved course curricula and only to the extent required to meet Terminal Objectives or graduation criteria.

(d) Provide Subject Matter Experts (SME) to assist NETC in the evaluation of the LS HRTS program and curricula, if requested.

(e) Ensure safety requirements, control measures, and lessons learned are incorporated into the appropriate HRT curricula.

(f) Identify student prerequisites for HRT courses that reflect physical, academic, and performance standards required for successful completion of courses. Ensure these standards are reflected in the Catalog of Navy Training Courses (CANTRAC) along with the requirement for parent commands to complete any required medical screening of prospective students.

(g) Update HRT curricula, as necessary, to comply with controlling technical directives.

(h) Develop and approve a Core Unique Instructor Training (CUIT) plan for the high-risk course being taught. Distribute to appropriate LSs. CUIT plans will include:

1. All requirements of the high-risk course screening and certification process. This shall include, at a minimum, online service record review, medical and psychological screening, and CO interview.

2. Completion of command safety indoctrination.

3. Cardiopulmonary Resuscitation (CPR) training from a recognized training moderate such as the American Heart Association, American Red Cross, National Safety Council, etc.

- training.
4. Requirement for initial blood borne pathogen awareness
 5. First aid training, unless exempt per paragraph 7d(7)(d).
 6. Universal Training Precautions (UTP) - Annual training on Sudden Cardiac Arrest (SCA), Exertional Collapse Associated with Sickle Cell Trait (ECAST), and heat stroke signs, symptoms, prevention and response protocol as per reference (q).
 7. Requirement for Operational Risk Management training.
 8. Familiarization with:
 - a. All safety controls.
 - b. EAP.
 - c. TE.
 - d. PPE.
 - e. Daily Operation Readiness Test (DORT), as applicable.
 - f. Site specific hazardous operations and training platforms.
 - g. Applicable safety policies, directives, precautions, technical manuals for training platforms, and lessons learned from fleet mishaps.
 - h. Other subject matter deemed appropriate by the command.
 9. Definitions of and procedures for reporting mishaps, near-misses, and unsafe/unhealthy working conditions.
 10. Guidance on Training Time Out (TTO) and Drop on Request (DOR) policies and procedures (as applicable).
 11. Instructor's full understanding of the training platform operation, identified risks, and control measures necessary to identify and prevent HRT mishaps.
 12. Completion of Instructor Training or a civilian equivalent school prior to teaching students. Equivalent instructor training courses from other services is acceptable.
 13. Attending only the high-risk portions of a high-risk course as a student.
 14. Personalize instructor guide.

15. Requirement to receive, at a minimum, two evaluations assessing both technical knowledge of subject matter and instructional delivery skills (lab evaluations shall be in high-risk topics).

16. Thorough understanding of the EAP.

NOTE: All CUIITS must be approved by the appropriate LC, NSTC, or NETSAFA. All high-risk instructors shall complete it before commencing any pilot course(s).

(i) Distribute CUIT plans to all appropriate LSs.

(j) Review/update the CUIT when a course is changed, or revised. Also, ensure the CUIT is reviewed during all Formal Course Reviews.

(k) Approve HRT course schedule variations and sequencing of evolutions for all HRTS curricula.

(l) Submit recommendations to add or delete a course as a high-risk course to NETC N00X, with a copy to NETC N7. A risk assessment must be included with the recommendation.

(m) Ensure NETC N00X is notified, as soon as possible, when new high-risk courses are being developed, or existing high-risk courses are being modified, and additional risk is anticipated. No new, or modified high-risk course that introduces additional risk, shall convene without NETC N00X concurrence. Additionally, NETC N00X must be notified prior to new trainers, training platforms, or training facilities being used.

1. HRTSEs of new courses, modifications of existing HRT platforms, and/or new elements that introduce additional risk to existing courses shall be conducted at the earliest stage possible by NETC N00X. This must be completed no later than the pilot phase for new courses and prior to implementation of modifications to existing training. LCs are responsible for funding NETC travel costs associated with observing/approving newly developed high-risk courses.

2. Decisions to conduct a HRTSE due to modifications of existing courses will be made by NETC N00X on a case-by-case basis.

NOTE: If an excessive amount of deficiencies or IDLH deficiencies are identified, which cannot be corrected during the HRTSE, the team lead will discuss the situation with NETC N00X. A determination will be made of whether to change the HRTSE into a technical assist visit. If a technical assist visit occurs, NETC will schedule another HRTSE (90 to 180 days out). The LC will be required to fund all travel requirements to conduct another HRTSE. Status updates for all identified deficiencies will be required at a frequency determined by NETC N00X.

(n) Ensure all safety risks and HAZMAT exposures are identified and mitigated in the curriculum per the applicable curriculum development manual.

(o) Ensure safety policies, procedures, and awareness training are part of all curricula per the Navy School Management Manual (reference (b)).

NOTE: Afloat directives may be incorporated into curricula when used to teach specific processes to students (i.e., follow the Afloat Safety Instruction (OPNAVINST 5100.19 series), appropriate Naval Ships Technical Manual, Naval Sea Systems Command Technical Manual, and Tag-out User Manual) when teaching how to conduct preventive maintenance on shipboard equipment. However, at a minimum, Ashore safety directives must be followed when conducting procedures outside of formal training (i.e., follow the Navy Safety and Occupational Health Program Manual (reference (n)) when performing maintenance on the same piece of equipment).

(p) Obtain NETC N00X and Deputy for Training Operations approval if providing high-risk course curricula to any non-NETC activity. Inform the receiving activity of the requirement that they comply with all OPNAV and NETC HRTS requirements.

(2) Instructor Qualifications Related Responsibilities

(a) At a minimum, ensure that Statements of Work (SOW) for contract instructors teaching high-risk courses:

1. Clearly define instructor qualifications and requirements, including completion of Personnel Qualification Standards, JQRs, certificates of course completion in desired subjects, (i.e., basic instructor, small arms instructor, crew served weapons instructor, emergency medical technician, CPR, basic first aid, explosives driver, swim, firefighter, rigid hull inflatable boat), and other assigned qualifications as applicable to the course of instruction and the CUIT.

2. Include a requirement to provide proof of initial and recurring medical and psychological evaluation every 3 years by a licensed health care provider, drug screening, a statement of understanding on physical fitness criteria, National Criminal Investigative Check, Lautenberg compliance and/or other such desired elements as applicable to assigned duties. NETC reserves the right upon reason of belief to request a new urinalysis screening on instructor(s) to determine "fitness for duty." All urinalysis will be provided by the contractor at no additional cost to NETC.

3. Provide for NETC, through the Primary Contracting Officer, to have "Right of Refusal" of any instructor considered unqualified or unsafe.

4. Require compliance with safety policies established by the OSHA, and contained in Navy directives (i.e., references (a), (h), (i), (n), and this instruction).

5. Contain a provision for the contractor to provide PPE, medical support, and medical surveillance to its employees.

6. Contain a requirement for the contractor to have a safety plan for its employees that includes implementation of recommendations from Industrial Hygiene Surveys (i.e., enter contract instructors into medical surveillance program).

7. Provide provision for the LC or LS to pre-screen individuals proposed by the contractor for instructor duties.

8. Require that if a mishap involving services under this contract occurs, the contractor shall promptly report the incident within 1 hour to the LS Leadership, or others, as appropriate. If the Navy conducts an investigation of the mishap, the contractor shall cooperate and assist Navy personnel until the investigation is complete.

9. Provide guidance for contract renewal. Upon renewal, all requirements in the SOW must be re-certified and completed as stipulated in this instruction, to include updated medical and psychological screening and drug testing by the appropriate licensed health care provider for each contracted high-risk instructor.

(b) Establish policy on content and format for Instructor Training Jackets (ITJ) for subordinate activities.

(3) HRTSO and HRTSA Related Responsibilities

(a) Ensure the supporting HRTSA is informed during the pre-planning phase when a new high-risk course is developed, a course is relocated to a new site, equipment is moved to a new location, an existing platform is modified, or new equipment, trainers, training platforms, or training facilities are planned for use.

(b) Ensure an HRTSO is appointed for HRT that is conducted at non-traditional training sites. The HRTSO can be military, civilian, or a contractor. If a contractor is used, then they must be hired through a contract separate from the training delivery contract.

(c) Appoint an HRTSA in writing when the HRTSA and LS are within the LC COC and are both within the same geographical area. For example, a Safety Professional is assigned to Navy Diving and Salvage Training Center (NDSTC), and both the Safety Professional and NDSTC are within the Center for Explosive Ordnance Disposal and Diving COC. In this instance, the LC would appoint the Safety Professional as the HRTSA for NDSTC. Provide a copy of all HRTSA appointment letters to NETC N00X. The following are prerequisites:

1. HRTSA must have skills in hazard and risk recognition, HRTS, and knowledge of referenced instructions. HRTSAs are strongly encouraged to complete the HRTSO JQR for the courses they support.

2. HRTSAs must be SOH Professionals (Occupational Series 0018) that have successfully completed the following courses (or equivalents, approved by OPNAV/COMNAVSAFECEN):

NOTE: Course information is located at: <https://navalsafetycenter.navy.mil/Learning/NAVSAFENVTRACEN/Course-Schedule/>

a. Introduction to Navy Occupational Safety and Health (Ashore), A-493-0050 or A-493-0550 (online).

b. General Industry Safety Standards, A-493-0061.

c. Mishap Investigation (Ashore), A-493-0078.

d. Electrical Safety Standards, A-493-0033.

e. Introduction to Hazardous Materials (Ashore), A-493-0331 or A-493-0331 (online).

f. Introduction to Industrial Hygiene for Safety Professionals, A-493-0035, or A-493-0335 (online).

g. Navy Ergonomics Program, A-493-0085 (online).

h. Machinery and Machine Guarding Standards, A-493-0073.

i. NAVOSH Assessment Tools and Strategies, A-493-0889 or A-493-0889 (online).

j. OSHA online course #6008 Intro to OSHA for Other Federal Agencies.

3. Must complete NETC N00X Safety Domain JQR. Prospective HRTSAs should contact NETC N00X to secure current Domain Safety JQR.

(4) Risk Assessment Related Responsibilities

(a) Request supporting HRTSA perform/review risk assessments with appropriate SME whenever new courses are developed or existing courses are modified.

(b) Ensure the NETC-established risk assessment format is employed (form can be found on ESAMS, under "resources") when new courses are developed or when an existing course is modified. An assignment of an initial RAC of 1, 2, or RAC 3 in Severity Level I or II requires the course be considered high-risk and reported to NETC N00X.

1. A RAC 3 in Severity Level III or IV, although not high-risk by definition, shall be reviewed by the supporting HRTSA prior to commencement of formal training.

2. It is widely accepted that administrative training (classroom only) does not pose a reasonable element of risk to the staff and/or students; thus a risk assessment may not be necessary. However, if the classroom environment introduces equipment or items that will be handled by students, then this process must be included as a step (or steps) in the course risk assessment.

3. Ensure each step of the operation has been thoroughly evaluated in the risk assessment. Utilize approved curricula job sheets, or other similar curricula documents, while developing, revising, or reviewing

HRT course risk assessments. Include, among other things, student-to-instructor ratios, contained in the CetARS Course Master Schedule, as a control for mitigating known risks.

NOTE: Reference (a) allows NETC to change the risk determination RAC based on an evaluation of the hazards and historical mishap data.

(c) If an LC determines that a course is RAC 1, 2, or RAC 3 in the Severity Level of I or II during development or review of the course risk assessment, then NETC N00X must conduct a careful re-evaluation of hazards and historical mishap data.

(d) The LC CO or Director (if designated by CO) must approve (sign and date) all risk assessments for newly developed or modified high-risk courses that require the risk assessment to be revised. These risk assessments must be forwarded to NETC N00X so an HRTSE can be scheduled. Annual reviews of high-risk course risk assessments that have not been revised may be approved by the LS CO/OIC.

(5) TTO and DOR Related Responsibilities

(a) Include DOR procedures in the curricula of all voluntary courses. See "Drop on Request Procedures" located in Resources/Instructions/NETC HRTS Instruction Addendum subdirectory on ESAMS.

(b) Include TTO procedures in all applicable curricula, using the "Training Time Out Procedures" located in the Resources/Instructions/NETC HRTS Instruction Addendum subdirectory on ESAMS. Add evolution-specific TTO procedures, standardized if feasible, to conform to established fleet distress indicators (e.g., standard small arms range procedures or diving distress signals, etc.). Some specialized training requires scenarios where effectiveness could be reduced by the application of traditional TTO procedures. In these instances, alternative TTO procedures should be developed to protect the student and staff without jeopardizing the training objectives. These alternative procedures must be reviewed and approved by the Curriculum Control Authority.

(6) EAP-Related Responsibilities. In the event of a Class A HRT mishap, immediately suspend training and notify the NETC Duty Officer. Training may resume at the LC CO's discretion.

NOTE: NETC N00X will initiate a Safety Investigation Board per reference (d).

(7) Other Responsibilities

(a) Forward and endorse formal safety correspondence (evaluation results, mishap investigations, and material marked official correspondence for distribution) per reference (1).

NOTE: LCs conducting on-site safety inspections or evaluations do not meet the oversight criteria of OPNAV or NETC. NETC N00X retains that responsibility to ensure consistency throughout the NETC

domain. The supporting Area Safety Professional (see reference (h)) should be contacted to conduct any on-site safety reviews to reduce cost of safety program management.

NOTE: NETC N00X encourages LCs, especially the Training Directorate, to participate in the NETC HRTSEs of their subordinate activities.

(b) Ensure NETC N00X is promptly notified of issues affecting the safety of staff (military, civilian, and contractors), students, or HRT platforms.

d. LSs, Recruit Training Command (RTC), Officer Training Command (OTC), and Other NETC subordinate activities conducting HRT:

(1) Curricula-Related Responsibilities

(a) Conduct training with approved curricula, ensuring safety precautions are in place, and that instructors adhere to established safety procedures and protocol.

(b) Forward recommendations to modify curricula to substitute or replace an element of risk with a less-hazardous element of risk to NSTC, LC, or Course Curriculum Model Manager (CCMM), as applicable.

(c) Recommend changes, via the appropriate LC or NSTC, to the Special Course Indicator Code within CeTARS when new courses are developed that potentially introduce an element of risk or whenever an existing course is modified to include an element of risk not previously considered and/or mitigated.

(d) Conduct HRT utilizing approved curricula, and following the policy and procedures outlined in this instruction and references (a) through (q).

(e) Advise appropriate LC, when new trainers, training platforms, or training facilities are planned for use.

(f) When a new or revised CUIT is received from the LC, ensure it is compared with the current CUIT to identify additional qualifications required. This is commonly referred to as "cross-walking" the CUIT. Qualifications in the CUIT that were previously completed prior to the new or revised CUIT do not have to be repeated. Document the new or additional requirements via a memorandum that will be placed in the qualified instructor's ITJ.

(g) If a non-NETC activity requests high-risk course curricula, forward request to applicable LC.

(2) Instructor Qualification Related Responsibilities

NOTE: The instructor screening and certification process must be completed prior to any high-risk instructor teaching Navy students without another qualified instructor present. Additionally,

instructor certification and qualifications (to include the CUIT) shall be maintained in the ITJ by the LS. If the CUIT is too large, then it may be maintained in another location, but the entire CUIT must be maintained.

(a) Ensure all HRT instructors receive HRTS indoctrination applicable to site specific hazardous operations and training platforms.

(b) Upon receipt of a prospective military HRT instructor's orders, coordinate with the detaching command to initiate instructor screening.

NOTE: For courses that have both high-risk and non-high-risk training segments (Recruit Basic Military Training, Explosive Ordnance Disposal, Expeditionary Combat Skills, and Master-At-Arms "A" school, etc.), an instructor does not need to be screened to teach a high-risk course if they will only be teaching non-high-risk segments of the course.

(c) Ensure every instructor is properly screened prior to teaching students, per reference (a). The military instructor screening process must include:

1. Service record reviews and personal interviews at the training command conducted by the CO. The CO may delegate interviewing authority, in writing, to a designated subordinate within the command. This requirement may be waived if the training command can provide documentation that the prospective instructor was screened by the detaching command. The service record, which is a portion of the Official Military Personnel File, can be viewed by approved command personnel via Navy Standard Integrated Personnel System.

2. Medical and psychological screening conducted by competent medical authority (i.e., Medical Officer or credentialed Physician Assistant (PA), Nurse Practitioner (NP) (family practice), or Independent Duty Corpsman (IDC)). Medical and psychological screening must be conducted and documented every 3 years. The "High-risk Instructor Screening Guide," "Medical Officer's Interview Guide," "Sample Request for Medical Screening" for a high-risk instructor, and "Commanding Officer's Interview Guide" can all be located in reference (a). The "High-risk Instructor Medical Questionnaire (OPNAV Form 1500/53)" can be found on ESAMS in the Resources tab. If the training command is depending on the medical and psychological screening to be completed by the detaching command, the LS must have documentation from the detaching command showing that the appropriate high-risk guides and forms mentioned above were completed.

3. Document completion of service record review, personal interview, and medical and psychological screening via a NAVPERS 1070/613 (Page 13) service record entry indicating the member was screened and found suitable/unsuitable for high-risk instructor duty. Page 13 entries shall be signed by the CO or designated representative. If the training command is depending on the medical and psychological screening to be completed by the detaching command, Page 13 entries should not be signed by the CO or designated representative without documentation to show that the appropriate

high-risk medical and psychological screenings were completed. "Sample Page 13 Entries, High-risk Instructors" can be located in the NETC HRTS Instruction Addendum subdirectory in ESAMS.

NOTE: The page 13 entries must state that a service record review, personal interview, and medical and psychological screening was accomplished.

4. Submit Special Screening Deficiency Report per reference (n) in regards to instructor candidates transferred and received by the command who have been improperly screened or do not meet the criteria, with an information copy to Navy Personnel Command, Shore Special Programs Assignment Branch (PERS-4010), and applicable detailer.

5. The Health Insurance Portability and Accountability Act (HIPAA) of 1996 prohibits the filing of medical and psychological screening results in the local ITJ. Those results are to be safeguarded to ensure the confidentiality of the information.

NOTE: Examples can be located in the Resources/Instructions/NETC HRTS Instruction Addendum subdirectory on ESAMS under "Sample Page 13 Entries, High-Risk Instructor."

6. COs may conduct additional screening as they deem necessary.

(d) The screening process for civilian employees serving as high-risk instructors shall include:

1. Personnel record reviews and personal interviews at the training command conducted by the CO. The CO may delegate interviewing authority, in writing, to designated subordinate within the command. The CO shall consult with the servicing Human Resources Office (HRO) for access to civilian personnel records. COs should contact the supporting HRO Labor Relations Specialist via email for a review of past or present adverse actions (for current civilian employees only).

2. Medical and psychological screening conducted by competent medical authority (i.e., Medical Officer or credentialed PA, NP (family practice), or IDC). The "High-risk Instructor Screening Guide," "Medical Officer's Interview Guide," "Sample Request for Medical Screening" for a high-risk instructor, "Commanding Officer's Interview Guide," and "High-risk Instructor Medical Questionnaire" can all be located in reference (a).

NOTE: Civilian employees teaching high-risk courses shall receive medical and psychological screening every 3 years unless directed more frequently by other directives such as the National Fire Protection Administration (NFPA) 1582 requirement for annual physicals for firefighters.

3. Document completion of personnel record review, personal interview, and medical and psychological screening via a memorandum indicating the member was screened and found suitable/unsuitable for high-

risk instructor duty. This memorandum shall be signed by the CO or designated representative and placed in the ITJ.

4. The HIPAA of 1996 prohibits the filing of medical and psychological screening results in the local ITJ. Those results are to be safeguarded to ensure the confidentiality of the information.

5. COs may conduct additional screening as they deem necessary.

(e) The screening process for contractors serving as high-risk instructors must be renewed every 3 years and during contract re-compete or renewal, and shall include:

1. A medical screening conducted by a civilian medical doctor or credentialed PA or NP (family practice) must be documented and indicate that the instructor is physically capable of working to the desired standards associated with the duty assignment. The medical screening shall be renewed more frequently than listed above if required by other directives such as the NFPA requirement for annual physicals for firefighters.

2. Drug screening. Contract instructors must meet the requirements contained in reference (p). The Government reserves the right upon reason of belief to request a new urinalysis screening on instructor(s) to determine "fitness for duty." All urinalyses will be provided by the contractor at no additional cost to the Government.

3. Psychological screening conducted by a qualified practitioner. The screening must indicate that the instructor has completed psychological screening per this instruction, or a commercially available screening guide (such as the Minnesota Multiphasic Personality Inventory, or other available screening processes and procedures). The method employed must be indicated on the evaluation.

4. Contractors will prepare a letter (on company letterhead) reporting successful completion of the screening. The letter should include the date of completion, the name of the screener (including mailing address, telephone number, and email address), and a brief statement regarding the results (i.e., the requested screening and interview have been completed; information does/does not indicate that there are potentially disqualifying factors in the instructor's medical history; the candidate is/is not suitable for high-risk instructor duty). This letter will be filed in the contract instructor's training jacket and retained at the LS to denote screening and interview have been completed and the individual is found suitable. The HIPAA of 1996 prohibits the filing of medical and psychological screening results in the local ITJ. Those results are to be safeguarded to ensure the confidentiality of the information.

5. Upon contract award/renewal, all requirements in the SOW must be re-certified and completed as stipulated in this instruction to include updated medical evaluation, psychological screening, and drug testing by the appropriate licensed health care provider for each contracted high-risk instructor.

(f) Ensure high-risk instructors are certified for the courses they are instructing. One of the first steps in the certification process is completion of the CUIT, which includes:

1. All requirements of the high-risk course screening and certification process.
2. Completion of command safety indoctrination.
3. CPR training from a recognized training moderate such as the American Heart Association, American Red Cross, National Safety Council, etc.
4. Requirement for initial blood borne pathogen awareness training.
5. First aid training, unless exempt per paragraph 7d(7)(a).
6. UTP training per reference (q) on SCA, ECAST, and heat stroke signs, symptoms, prevention, and response protocol (annually).
7. Requirement for Operational Risk Management training.
8. Familiarization with:
 - a. All safety controls
 - b. EAP
 - c. TE
 - d. PPE
 - e. DORT, as applicable
 - f. Site specific hazardous operations and training platforms
 - g. Applicable safety policies, directives, precautions, technical manuals for training platforms, lessons learned from fleet mishaps
 - h. Other subject matter deemed appropriate by the command
9. Definitions of and procedures for reporting mishaps, near-misses, and unsafe/unhealthy working conditions.
10. Additionally, the CUIT must include guidance on TTO and DOR policies and procedures (as applicable).
11. Ensure all approved CUIT processes place an emphasis on an instructor's full understanding of the training platform operation, identified risks, and control measures necessary to identify and prevent HRT mishaps.

12. Completion of Instructor Training or a civilian equivalent school, prior to teaching students. Equivalent instructor training courses from other services is acceptable.

13. Attend high-risk portions of course as a student.

14. Personalize instructor guide.

15. Requirement to receive, at a minimum, two evaluations assessing both technical knowledge of subject matter and instructional delivery skills (lab evaluations shall be in high-risk topics). Duplicate lesson topics may be waived by the LC.

16. Thorough understanding of the EAP.

Note: The two initial instructor evaluations required to become certified as a high-risk instructor shall not be removed from the ITJ, as they document a step in the initial certification process.

(g) Develop an ITJ for compiling all required instructor qualification documentation as set forth by this instruction and your LC.

(h) Ensure all required instructors, safety observers, and other support personnel are present whenever HRT is conducted. Assign additional instructors and/or safety observers to mitigate risks, as applicable.

(i) Ensure personnel have been properly trained to perform their duties in instances where non-instructors are required to fulfill a role in training (i.e., safety swimmers, observers, line handlers, etc.). Safety swimmers, observers, and other non-certified instructors shall not instruct or remediate students. Safety swimmers and observers must complete annual UTP training per reference (q) on SCA, ECAST, and heat stroke signs, symptoms, prevention and response protocol.

NOTE: Establish a clear set of written procedures for use of NETC swimming pools/aquatic facilities or for NETC personnel using other aquatic facilities for physical conditioning that is not associated with a formal course of instruction. This shall include developing a risk assessment and mandatory use of a pool deck safety observer. Although a full EAP is not required, activities shall have a list of emergency phone numbers on the pool deck in the event of a mishap.

(3) Training Safety Officer Related Responsibilities

(a) Designate a sufficient number of HRTSOs for each high-risk course or group of high-risk courses that are taught by the LS.

(b) Appoint the HRTSO(s) in writing. The appointment letter shall list all high-risk courses under the HRTSO's responsibility, as well as the course observation periodicity (no less than once per year). This letter shall be loaded into the applicable course in the HRT module of ESAMS.

1. Ensure all assigned HRTSOs are knowledgeable of their responsibilities prior to assuming the duties and responsibilities for assigned HRT.

2. HRTSOs shall be in pay grade E-5 or above, if military, or civilian equivalent, and are required to complete a LS specific HRTSO JQR developed by the SME and reviewed by the HRTSA. An HRTSO cannot be a civilian Safety Specialist (0018 series) unless a waiver is submitted via their COC to NETC N00X for approval. Any waiver submittals must contain a thorough justification.

3. HRTSO JQRs shall include, at a minimum:

a. Familiarization with HRTS instructions.

b. HRTSO responsibilities.

c. All applicable curricula and associated CUIT plans.

d. Familiarization with all high-risk evolutions, associated training platforms, and devices to the extent necessary to properly evaluate assigned training.

e. Familiarization with ESAMS, RMI, and other appropriate reporting and recording methods.

4. LSs shall use the JQR provided on ESAMS (go to the Resources/Instructions/HRTS Instruction Addendums link in ESAMS) and modify it to reflect additional LS unique requirements.

5. Ensure HRTSOs conduct annual inspections, at a minimum, of all HRT TTE, devices, training areas, and/or platforms to ensure proper operation, maintenance, and compliance with applicable directives. These inspections shall be recorded in ESAMS, under the Inspection sub tab (IDATS); inspection category: High-risk, and Internal inspection type: Annual.

6. Ensure the HRTSO(s) attend HRTSA safety committee meetings.

7. Ensure HRTSOs (or other designated personnel) enter and maintain data in the HRTS module of ESAMS to include instructor evaluations, observation notes, risk assessments, and EAP information.

(4) Student Related Responsibilities

(a) Develop and implement student indoctrination that includes discussion of safety requirements, precautions, and safeguards incorporated into the curricula, and the definitions of and procedures for reporting mishaps, near-misses, and unsafe/unhealthy working conditions.

(b) Ensure students participating in HRT complete NETC 1500/5 prior to reporting for HRT. This form may be downloaded from the Resources/Forms, Checklists, and Documents link in ESAMS, Naval Forms Online (see paragraph 8), and is available in CANTRAC and Fleet Training Management Planning System and shall be reviewed and signed by the student's medical

department. If a course requires medical screening different from NETC 1500/5 (i.e., Navy Diving Courses; Chemical, Biological, Radiological Defense Specialist Course; Survival, Evasion, Resistance, Escape Course; Recruit Training), then the LS must request authorization to deviate from NETC N00X.

NOTE: Activities that have students attending back-to-back high-risk courses and find the 45-day limit for the Student Medical Screening Form a challenge, may request an exemption to the 45-day limit. The request must be submitted to NETC N00X in writing, via the COC, and include a detailed explanation of the problem and the relief requested.

1. Part I - Answering "YES" to any of questions 1-26 on NETC 1500/5 requires a decision regarding suitability for participation in HRT by a medical provider (supplying command physician or authorized command health care professional to include MD, PA, NP, or IDC) before allowing the student to continue the screening process. If all questions are answered "NO," a HM may sign Part I.

2. Part II - Any "YES" answers or issues may be cleared at the discretion of the Training Site Authority (TSA). The TSA is any individual at the LS who the CO/OIC appoints in writing to make the final determination if an individual is approved to attend training. The intent is for a senior staff member to be the TSA.

3. All Student Medical forms shall be destroyed no later than 30 days after trainee has graduated.

NOTE: Students from NETC accession points (RTC/OTC) and Midshipmen will not have NETC 1500/5 when reporting to their respective "A" Schools or HRT events, as screening does not occur during the Sailor transition process. In those cases, NETC 1500/5 may be completed prior to the HRT by an authorized command health care professional such as one provided by a military medical clinic or civilian contract.

(c) Establish a process to ensure students meet course prerequisites that reflect physical requirements and assess the student's medical status and fitness for training prior to participation in HRT. Procedures must include a system to ensure instructors are informed of students who were previously "set back" due to medical conditions that might cause future problems. These procedures must not rely solely on students informing instructors of changes in their medical status.

1. Students evaluated as unfit for duty or not suitable for training shall be removed from training immediately until medically cleared.

2. Use tags, rings, or other appropriate methods for identifying students with specific medical conditions or concerns. For example: Students with known allergies may be identified by a color-coded tag or ring clipped to their uniform during evolutions that may expose them to a particular allergen. Students with Sickle-cell trait should be identified by a different color-coded tag or ring attached to their uniform.

These methods may not be appropriate at all training sites and during evolutions or under certain conditions.

(d) Authorized Students for High-Risk Courses.

1. DoD (military or civilian).
2. U. S. Coast Guard.
3. National Oceanographic and Atmospheric Administration.
4. International Military Students.
5. Naval Reserve Officer's Training Corps (NROTC), or Applicants, if they have signed a DD-4 and taken the oath of enlistment.
6. Individuals who are not members of the organizations listed above (e.g., non-DoD civilians, NROTC, etc.) may be allowed to attend specific high-risk courses under certain circumstances. However, prior written approval is required by NSTC for courses under their cognizance (courses for which they are the CCMM), and NETC N00X for all other courses. All such requests must be submitted via the applicable LC or NSTC. All individuals approved must meet the same requirements for attendance as outlined in this instruction. In no case, may Navy Junior Reserve Officer Training Corps students or Naval Sea Cadets attend a high-risk course. NSTC shall provide NETC N00X a copy of all correspondence related to authorizations to attend their high-risk courses. NSTC is not authorized to delegate this authority to subordinate activities.

a. A "Hold Harmless Agreement" must be signed prior to attending NETC High-Risk courses. A sample "Hold Harmless Agreement" can be found on the Resources/Forms, Checklists, and Documents link on ESAMS.

b. VIPs, media, historians, film crews, and other interested parties often request to observe portions of high-risk courses. These requests must be in writing, and routed to NETC Public Affairs Office for staffing. If approved, NETC N00X will provide additional controls beyond those found in this instruction, as appropriate. A "Hold Harmless Agreement" must be signed prior to attending NETC High-Risk courses. A sample "Hold Harmless Agreement" can be found on the "Forms, Checklists, and Documents" link on ESAMS.

(e) Ensure all students who are participating in intense physical training receive a briefing on heat stress signs and symptoms and the UTPs contained in reference (q).

(5) Risk Assessment Responsibilities

(a) Ensure the NETC-established risk assessment format (form can be found on ESAMS, under "resources") is employed when new courses are developed or when an existing course is modified. An assignment of an initial RAC of 1, 2, or RAC 3 in Severity Level I or II, requires that the course be considered high-risk and reported to NETC N00X.

1. A RAC 3 in Severity Level III or IV, although not high-risk by definition, shall be reviewed by the supporting HRTSA and LC prior to commencement of formal training.

2. It is widely accepted that administrative training (classroom only) does not pose a reasonable element of risk to the staff and/or students; thus, a risk assessment may not be necessary. However, if the classroom environment introduces equipment or items that will be handled by students, then a risk assessment must be conducted for this portion of the training.

3. Ensure each step of the operation has been thoroughly evaluated in the risk assessment. Utilize approved curricula job sheets while developing, revising, or reviewing HRT course risk assessments. Include student-to-instructor ratios, contained in the Training Course Control Document, as a control for mitigating known risks.

NOTE: Reference (a) allows NETC to exempt activities from complying with HRT requirements if certain elements are met. It also allows changing the risk determination RAC based on an evaluation of the hazards and historical mishap data.

(b) If a LC/LS determines that a course is RAC 1, 2, or RAC 3 in the Severity Level of I or II during development or review of the course risk assessment, then NETC must conduct a careful re-evaluation of hazards and historical mishap data.

(c) Forward all risk assessments for newly developed or recently revised high-risk courses to the supporting HRTSA for review, and to NETC N00X, via the appropriate LC CO.

(d) Ensure all HR course risk assessments are reviewed annually, documented in writing, and uploaded into the ESAMS HRTS Module. If there are changes to the risk assessment that add additional risk, then the LC CO must approve/sign, and the updated RA must be loaded into ESAMS HRTS Module.

(e) Ensure a risk assessment is performed and that controls are in place to mitigate hazards for all locations that conduct physical fitness training as part of the curricula, or as part of preconditioning efforts. Navy Physical readiness protocols and additional guidance can be obtained from the following web site: <https://www.mynavyhr.navy.mil/Support-Services/21st-Century-Sailor/Physical-Readiness/>.

(f) Ensure a risk assessment is conducted for all non-CIN events (i.e., swim testing, physical fitness), controls are in place to mitigate identified hazards, and a HREAP is developed and available.

(6) TTO and DOR Responsibilities

(a) Ensure all students are briefed on DOR policy and procedures in voluntary high-risk courses. The "Drop on Request Procedures" document

can be found in the Resources/ Instructions/NETC HRTS Instruction Addendum subdirectory in ESAMS. A DOR briefing shall be given prior to commencing the course (e.g., during course indoctrination, welcome aboard brief, etc.) and will be repeated in the event of a long break in the course (e.g., holiday periods, etc.).

(b) If a student elects to DOR from a voluntary high-risk course, the following Page 13 entry must be prepared for inclusion in the member's electronic service record:

_____ SNM elected to "Drop on Request" from the following
_____ high-risk course of instruction:
_____ (Name of course and CIN)

(c) Students dropped from voluntary HRT, whether by request or involuntarily, shall be monitored during the DOR interview process. Personnel assigned to conduct DOR interviews shall be familiar with suicide risk factors and prevention resources available in reference (k). Sufficient attention and consideration must be given to the student's stressors and the effects on the mental health of the individual as defined and outlined in reference (k) (Suicide Prevention Program). Students indicating verbal threats and/or mannerisms indicative of an aggressive and/or agitated state, as well as those individuals exhibiting any of the warning signs characterized in reference (k), shall be referred to medical for a psychological screening.

1. Students referred to medical for psychological screening must be monitored.

2. Commands must take an active role in safeguarding individuals who fail to screen or are removed from training for psychological, academic, or physical problems, including aggressive behavior, self-imposed injury, and other undesired actions. If a student is considered at risk and is released from the hospital, actions shall be taken to ensure sufficient monitoring of the individual per reference (k).

(d) Ensure students are thoroughly briefed on TTO policy and procedures prior to the start of a training event. For all-day or multi-day evolutions, a statement prior to training such as "TTO policy and procedures still in effect" will suffice. Evolution-specific TTO procedures shall also be added where needed. These procedures shall be standardized to conform with established fleet distress indicators where appropriate (e.g., standard small arms range procedures, diving distress signals, etc.). Instructors should emphasize to students that calling a TTO for themselves or others will not reflect negatively on them or their class performance.

(7) Medical Related Responsibilities

(a) A Hospital Corpsman (HM)/Emergency Medical Technician (EMT) or other qualified medical representative and emergency oxygen is required on scene during all swimming, diving, and firefighter training. Personnel administering emergency oxygen must have completed formal training such as Emergency Medical Responder, Tactical Combat Casualty Care Combat Lifesaver (TCCC CLS) Certification (or comparable), American Red Cross Administering

Emergency Oxygen, any American Red Cross course that has the Emergency Oxygen module added, or other comparable formal course approved by the LC.

(b) An HM, EMT, or other qualified medical representative is required to be on-site during any HRT event conducted either on or off a military reservation if the training is located more than 10 minutes away from emergency response services.

(c) LSs that do not have a HM or EMT can use other medical support personnel (emergency medical responder, TCCC CLS etc.) to provide medical response. The LS must ensure the medical personnel have received training, have current certification, and are able to perform the procedures listed below. If the LS does not have a qualified HM, EMT, or medical support personnel on-site, they must have a Memorandum of Agreement (MOA) with the local medical responders to provide the below on-site services:

- Assess patients
- Take vital signs
- Provide first aid treatment for trauma and medical emergencies
- Perform CPR
- Use an automated external defibrillator
- Immobilize bone fractures and spinal injuries
- Administer oxygen and maintain an open airway through suctioning and airway adjuncts
- Package, move, and transport patients (as applicable)

NOTE: An MOA cannot be used to procure services from a commercial local medical clinic.

(d) All high-risk training events that have HM, EMT, or other qualified medical personnel on-site during HRT are exempt from the instructor basic first-aid training requirement.

(e) When an HM, EMT, or other medical support person is required, they must be present throughout the entire HRT evolution and may not simultaneously serve in the role of an instructor during their assignment as medical support/emergency responder. Additionally, the HM, EMT, or medical support person must also be positioned in an area sufficiently close (within 2 minutes), but not within the danger zone.

(f) Medical personnel assigned must have a fully inventoried and appropriate medical response bag on-hand and ready for use during HRT evolutions. The list of "Recommended Emergency Medical Equipment" can be located in the Resources/ Instructions/NETC HRTS Instruction Addendum subdirectory on ESAMS. Other items may be needed dependent upon the training platform, training environment, and reasonable injury anticipation (i.e., burns, spinal injuries, etc).

(8) EAP Responsibilities

(a) Develop an EAP for response to potential mishaps. All EAP data (e.g., dates of walk-through, exercises, and remarks) must be entered in ESAMS by the HRTSO.

(b) The EAP shall cover initial emergency actions for instructors, students, and personnel directly supporting high-risk training to follow in the event of a mishap (medical emergency, inadvertent weapon firing or explosive mishap, TTE catastrophic failure, fire, earthquake, etc.). Every effort shall be made to anticipate all reasonable scenarios, and plans developed to cope with associated hazards. The EAP should be a checklist of actions to be taken by personnel to mitigate the mishap and provide medical care to any victims. The EAP shall include the following, at a minimum:

1. Primary and alternate communications
2. Telephone numbers of emergency response activities and immediate COC, etc.
3. Applicable radio channels and call signs
4. Locations of emergency response personnel
5. Locations of emergency equipment
6. Equipment emergency shutdown procedures
7. Muster location(s)
8. Methods to maintain control of the scene and any non-affected personnel
9. All immediate emergency procedures for each potential scenario

(c) The EAP shall include a monthly review, quarterly walk-through, and an annual exercise.

(d) The EAP shall be reviewed with all personnel prior to commencing a high-risk event. The review shall consist of a safety brief that advises students, instructors, and support personnel (safety observers, safety swimmers, medical personnel, etc.) what to do in the event of a mishap.

(e) EAPs must be at the training site and readily available to the instructors for use in the event of an emergency.

(f) If multiple courses use the same trainer, such as a pool or firefighting trainer, one EAP may suffice for that device or location. However, there must be sufficient personnel available to implement the EAP.

(g) Any exercise of the EAP (for training only) shall be preceded by thorough planning. An "Example EAP Drill Package" guide is located in the Resources/Instructions/NETC HRTS Instruction Addendums in ESAMS. The

exercise plan, which must be documented in writing, will include, at a minimum:

1. Overall briefing of drill
2. Listing of participants/evaluators
3. Sequence of events
4. Plan review and approval signature lines
5. Evaluator critiques

(h) Ensure all reportable HRT related mishaps, are investigated, entered into RMI SIR, validated, and closed. If the circumstances of the mishap (i.e., prolonged medical treatment and follow-up care, delays in receiving official reports or documentation, etc.) prevent closure of the report within 30 days, request an extension from the convening authority in RMI SIR.

(i) In the event of a Class A mishap, immediately suspend training and notify the LC and the supporting HRTSA. Assist the supporting HRTSA in conducting a 72-hour profile.

(9) Environment Related Responsibilities

(a) Ensure training that is conducted in an environment that subjects students and/or staff to extreme temperatures includes controls to mitigate the hazard. Heat or cold injury prevention programs, when properly implemented and adhered to, are highly effective and shall be included as part of mitigation efforts. NAVMED P-5010-3 provides the basic requirements of heat or cold injury prevention. "Heat Stress Prevention Protocol Examples" and "Heat and Cold Stress Prevention General Guidelines" documents can be located in the Resources/Instruction/NETC HRTS Instruction Addendums in ESAMS. LSs located in colder temperatures should consider adding hypothermia training to the annual UTP training for heat injuries/illnesses.

(b) Ensure students/staff arriving to a new geographical area/region during periods of extreme temperature, humidity, cold, etc., are provided the opportunity to acclimate to the environment prior to being subjected to conditions of heavy work and/or physical exertion.

1. An appropriate acclimation period may not always be possible for courses of a short duration. In that event, acclimation difficulties should be closely monitored. This situation should also be captured within the risk assessment as part of the mitigation process.

2. Regular exercise of gradually increasing intensity and duration in the heat is the most effective acclimatization method. However, some degree of acclimatization occurs even when individuals engage in little activity. Significant acclimatization can be expected in 7-10 days; however, maximum heat tolerance should not be expected until 21 days of consecutive heat-work exposure.

(10) Other Responsibilities

(a) Per reference (a), conduct a safety review of all high-risk courses at least annually, and after major course revisions. The safety review will be conducted using the Annual Safety Review checklist that can be found on ESAMS under the Resources/Forms, Checklists, and Documents link. The triennial HRTSE conducted by NETC can be used as an acceptable substitute for the activity annual safety review. Therefore, the activity will only need to conduct a safety review for the 2 years between the HRTSE.

(b) Analyze student critique information to identify and act on potential safety problems. Corrective actions must be documented in writing.

(c) Analyze mishap data for all formal training courses. Ensure that courses with adverse trends are evaluated to determine if additional hazard mitigation is warranted.

(d) Ensure a preventative maintenance system is established and includes spot-checks for all HRT equipment, devices, and PPE.

NOTE: If preventative maintenance is performed by contractors, then the HRTSO shall communicate with the Contracting Officer's Representative to ensure that it is being performed properly.

(e) Ensure the appropriate LC and the HRTSA are promptly notified of issues affecting the safety of staff (military and civilian) and contractors, students, or HRT platforms.

(f) To the extent feasible, ensure HRT is conducted during the triennial HRTSE.

(g) Ensure a formal agreement is made that captures safety responsibilities, including mishap reporting, between the NETC activity and any other training activity outside of the NETC domain when NETC students attend non-NETC high-risk courses as part of pipeline training. Provide a copy of the formal agreement to the supporting HRTSA.

(h) Route any requests for Naval Safety Center assist visits or safety audits via the appropriate LC and NETC N00X.

e. HRTSOs

(1) For each course that is assigned, observe HRT evolutions and assess compliance with approved training procedures, safety precautions, risk mitigation, emergency procedures, and the safety posture at a minimum of once every year. The CO/OIC may require more frequent observations, but this must be spelled out in writing. All results of the HRTSO observations must be documented in ESAMS as "Observation Notes" under the HRTSO tab. The following items must be recorded:

(a) Verify that all recommended curriculum changes have been incorporated.

(b) Verify that student-to-instructor ratios are accurate and reflected on the risk assessment as a mitigation factor.

(c) Annually review all course risk assessments with supported LSS to ensure they are accurate.

(d) Verify TTO (and DOR, as applicable) processes are in place and that students are thoroughly briefed on TTO (and DOR, as applicable) policies prior to commencement of training.

(e) Verify condition of the training platform, training devices, equipment, and PPE, ensuring safe to use.

(f) Verify compliance with approved training procedures, safety precautions, risk mitigation efforts, and EAP procedures.

(g) Highlight observed safety issues noted during training.

(h) Ascertain if SOPs are up to date and reflect any changes in processes.

(i) Observe instructor and student interaction to ensure proper instructor supervision of students throughout all course events.

(2) Conduct an annual inspection of all HRT TTE, devices, training areas, and/or platforms to ensure proper operation, maintenance, and compliance with applicable directives. HRTSOs should strongly consider requesting the supporting HRTSA assist in the inspection. Upon completion of the inspection, record in ESAMS under the Inspection sub tab (IDATS); inspection category: High-risk, and Internal inspection type: Annual.

(3) Monitor assigned HRTS courses to ensure the responsibilities in this instruction are properly executed. The HRTSO may not be actively participating as an instructor while performing HRTSO duties.

(4) Ensure all training-related mishaps are investigated and recorded in RMI SIR. Ensure all mishaps are opened, reviewed, and closed within 30 days. If the circumstances of the mishap (i.e., prolonged medical treatment and follow-up care, delays in receiving official reports or documentation, etc.) prevent closure of the report within 30 days, request an extension from the convening authority in RMI SIR. Also, assist mishap investigation teams in conducting investigations of Class A and B HRT-related mishaps, as requested.

(5) Compile and maintain an HRTSO binder, or other type of turnover file, that includes copies of fleet messages, training-related lessons learned, SOPs, copies of completed JQR and certificates of related training, high-risk instructions, or any other relevant data that would facilitate a smooth transition upon transfer of duties.

(6) Ensure that the following is entered into the ESAMS HRTS module:
NOTE: An HRTS Module guide can be found in the ESAMS help section.

(a) HRTSO letter of designation. If multiple courses are assigned to the same HRTSO, the letter of designation shall contain multiple CIN's and shall be uploaded into all courses that have been assigned to the HRTSO.

(b) The documentation of EAP quarterly walk-through and annual drill/exercise.

(c) The risk assessment sheets for corresponding high-risk course(s).

(d) The required frequency of the HRTSO observation for each high-risk course.

(e) The documentation of HRTSO observations, including comments and any associated recommendations.

(7) Ensure the NETC-established risk assessment format (form can be found on ESAMS, under "resources") is employed when new courses are developed or when an existing course is modified. An assignment of an initial RAC of 1, 2, or RAC 3 in Severity Level I or II requires the course be considered high-risk and reported to NETC N00X.

(a) A RAC 3 in Severity Level III or IV, although not high-risk by definition, shall be reviewed by the supporting HRTSA and LC prior to commencement of formal training.

(b) It is widely accepted that administrative training (classroom only) does not pose a reasonable element of risk to the staff and/or students; thus a risk assessment may not be necessary. However, if the classroom environment introduces equipment or items that will be handled by students, then a risk assessment must be conducted for this portion of the training.

(c) Ensure each step of the operation has been thoroughly evaluated in the risk assessment. Utilize approved curricula job sheets, or other curricula related documents, while developing, revising, or reviewing HRT course risk assessments. Include student-to-instructor ratios, contained in the Training Course Control Document, as a control for mitigating known risks.

(8) Ensure the required number of instructors and safety observers are present whenever training is conducted.

(9) Ensure an HM, EMT, or other qualified medical representative is on-site during any HRT conducted, either on or off a military reservation, if the training is located more than 10 minutes away from emergency response services.

(10) Ensure an HM, EMT, or other qualified medical representative, and emergency oxygen is available on scene during all swimming, diving, and firefighter training.

(11) Ensure all instructor training records are maintained and contain qualifications and certifications as set forth by this instruction.

(12) Ensure the CO/OIC of the LS and supporting HRTSA are promptly notified when issues arise affecting the safety of HRT.

(13) Review all HRTS student critiques for student-identified safety issues and assist the LC/LS/HRTSA in developing a means for correction.

(14) Attend supporting HRTSA safety committee meetings.

f. HRT - Mobile Training Team (HRTMTT). There are circumstances when HRT courses are requested to convene at locations other than permanent "approved to train" LSs that have an assigned Course Data Processing Codes (CDP). These HRTMTTs enhance NETC's ability to train the fleet.

NOTE: This section applies only to training determined to be high-risk by completion of a risk assessment. Non-HRTMTT policies fall under the purview of NETC N7. No high-risk waivers are available for HRTMTTs.

(1) NETC N00X

(a) Upon notification of a HRTMTT request from the LC, notify NETC's executive office.

(b) Notify the LC of NETC N00X ability to support the HRTMTT.

(c) Assign a Safety Professional (GS-0018) to participate in the HRTMTT. For recurring HRTMTTs, like Rota and Sasebo Firefighting, NETC will only participate once per fiscal year, unless the situation dictates more frequent participation.

(d) Provide the LC with documentation that the HRTMTT is safe to train after reviewing risk assessment, EAP, and completing the advanced site evaluation.

(e) Enter HRTMTT documents (risk assessment, EAP, and safe-to-train documentation) into ESAMS (under MTT Documents link) for LC and LS use on future HRTMTTs.

(2) LC

(a) Ensure any activity requesting a HRTMTT submits a formal request to the LC with a copy to NETC N7. This request must be submitted at least 60 days prior to any anticipated overseas HRTMTT in order to comply with Country Clearance Request requirements (CONUS requests should be submitted at least 45 days prior). The requesting activity must also include the following:

1. Location of training.
2. Type of training/CIN.
3. Type of platform and operational status.

4. Primary and alternate dates.
5. Number of students to be trained.
6. PPE on hand.

7. Two Lines of Accounting (LOA) in Defense Travel System (DTS) for supporting HRTMTT requirements (one for NETC N00X and one for the assigned LS). Establishing a Cross-Organizational LOA in DTS is also acceptable but requesting activity must agree to liquidate HRTMTT travel vouchers within 7 working days.

(b) Within 3 days of receiving a request for a HRTMTT, LCs shall notify NETC N00X and the supporting LS.

NOTE: An advance on-site visit by LS personnel and NETC appointed Safety Professional must occur prior to obligating HRTMTT assets.

(c) Ensure the LC written response to the request for an HRTMTT includes any specific travel requirements, safety responsibilities, including mishap reporting and investigation between the LS and the activity requesting training, and requirements for liquidation of travel vouchers. This is also the time to ensure the requesting activity makes arrangements for an HM to be on scene during HRT, if applicable. Provide copies of this agreement to NETC N00X and the LS.

(d) Retain documentation generated by the HRTMTT for a period of 5 years.

(e) If notified of a Class A training mishap during the HRTMTT, notify the NETC Duty Officer immediately.

(f) Ensure the HRTMTT includes a Safety Professional assigned by NETC N00X. For recurring HRTMTTs, like Rota Firefighting, NETC will only participate once per fiscal year. An LS HRTSO must be assigned for other HRTMTTs.

(g) Develop a CDP if HRTMTTs will be recurring at the site.

(3) Supporting LS

(a) Contact the requesting activity to determine if the HRTMTT site training platform is substantially the same type, series, and configuration as the platform on which the instructors are certified.

(b) Verify that the instructors scheduled to conduct the HRTMTT are certified to conduct training on the HRTMTT site platform. The platform at the HRTMTT site must be substantially the same in type, series, and configuration as the platform that the instructor received their training and qualifications at their primary activity/site, or additional training must be conducted at the HRTMTT site prior to convening the HRTMTT. The LC/LS must add a formal addendum to the instructors CUIT to document all areas of training that are different from the original CUIT.

(c) Conduct an on-site visit with assigned Safety Professional (or LS HRTSO for recurring HRTMTTs where NETC will not attend) and provide the results to the LC. The on-site visit will include:

1. Validating the operational status of the training area/device.
2. Drafting and/or updating the EAP and risk assessment. Development of the risk assessment is the sole responsibility of the LS; however, the LS should work with the requesting activity host installation to develop an acceptable EAP. Ultimately, it is the responsibility of the LS to have an EAP to execute in the event of an emergency.
3. Validating all prior material for accuracy, if applicable.
4. Verifying the training platform is available during the requested dates.
5. Verifying availability of classroom and computers/projectors.
6. Verify that PPE for staff and students is available, serviceable, and is the correct type for the training being conducted.
7. Providing blank student medical questionnaires and a briefing on the requirement for completing them prior to the start of training.

(d) Ensure HRTMTT instructors are familiar with the risk assessment, HRT EAP, site operating areas, and environmental concerns.

(e) Ensure all paperwork associated with the HRTMTT site is provided to the appropriate LC for retention.

(f) Ensure all HRTMTT requests that are submitted directly to the LS are immediately forwarded to the appropriate LC for scheduling and coordination.

(g) Ensure the NETC assigned Safety Professional is on scene prior to conducting the HRTMTT (or LS HRTSO for recurring MTTs where NETC will not attend).

(h) Validate the availability of the HRTMTT and submit recommendations to the LC.

(i) Assist with the coordination of travel.

(j) If a Class A training mishap occurs, the HRTMTT will immediately suspend training, notify the leadership of the activity being trained and the LC.

(4) NETC N00X Assigned Safety Professional(s) or LS HRTSO

NOTE: A SOH Professional will be appointed to support all HRTMTTs,

except as noted in paragraph 7f(3)(c).

NOTE: Paragraphs 7f(3)(a) through 7f(3)(f) pertain to HRTMTTs that have been conducted previously at the site.

(a) If a previous HRTMTT has been conducted, request the appropriate LC provide all prior HRTMTT material.

(b) Conduct an on-site visit with assigned HRTMTT to determine feasibility to provide training. In addition to assisting the HRTMTT with the requirements listed in paragraph 7f(3)(c), the Safety Professional shall:

1. Coordinate correction of any training area/device deficiencies identified with the appropriate owner prior to the start of training.

2. Make arrangements with host installation or closest medical facility for medical support.

3. Assist the HRTMTT to validate all prior HRTMTT material for accuracy.

4. Ensure that the HRTMTT assessment check sheet, located on Resources/Forms, Checklists, and Documents subdirectory on ESAMS, is complete prior to dispatch of the HRTMTT.

(c) Be on scene while the HRTMTT is conducted.

(d) If a Class A training mishap occurs, immediately notify NETC N00X or NETC Duty Officer if after normal work hours.

(e) Provide all safety-related modified documents, and any newly generated documents pertaining to the HRTMTT site to the HRTMTT LCs.

(f) Complete all but the mishap investigation section of the NETC HRTSE and Mishap Investigator JQR and have experience with type of HRT being conducted (small arms training, firefighting, etc.). The JQR is available from NETC N00X.

NOTE: Paragraphs 7f(3)(g) through 7f(3)(i) pertain to new requests for HRTMTTs (when HRTMTTs have never been conducted at the site).

(g) Conduct an on-site visit with assigned HRTMTT LS. Refer to paragraphs 7f(3)(c)1 through 7f(3)(c)7 for specific requirements.

(h) Make arrangements with the host installation for medical support.

(i) Complete all but the mishap investigation section of the NETC HRTSE and Mishap Investigator JQR and have experience with the type of HRT being conducted (small arms training, firefighting, etc.).

8. Moderate-Risk Training. Reference (a) allows NETC to change the high-risk classification of a formal course, with OPNAV N09F concurrence, based on an assessment of risks following an evaluation of hazards and a review of

historical data. For ease of tracking, these courses will be classified as moderate-risk.

a. NETC Responsibilities

(1) Designate courses as moderate-risk if it is determined the activity is unable to meet the requirement of HRT as outlined in reference (a), a review of all hazards identified in the risk assessment and careful review of historical data indicate it should not be classified as high-risk, and OPNAV N09F concurs with NETC's determination.

(2) Maintain a list of all moderate-risk courses by title and CIN, and provide annually to COMNAVSAFECEN. Update this list when new courses are developed or discontinued.

(3) Schedule and lead, as applicable, on-site Moderate-Risk Course Evaluations (MRCE) of all moderate-risk courses at least once every 36 months.

(4) Develop and promulgate an annual evaluation schedule by 1 September.

(5) MRCEs will be limited to:

(a) Observations of laboratory portions of the course.

(b) Review of risk assessment controls established to reduce probability of a mishap.

(c) Review of EAP.

(d) Inspection of equipment used during training.

(e) First aid and CPR qualifications and/or other requirements established by applicable LC.

b. LC Responsibilities

(1) Validate and update the Special Course Indicator Code within CeTARS whenever moderate-risk courses are developed, modified, or when elements of risk are introduced into courses not previously considered moderate-risk.

(2) Provide a recommendation to NETC N00X if an existing course, or one being developed, should be classified as moderate-risk.

(3) Notify NETC N00X of any changes to moderate-risk courses that may impact the moderate-risk designation.

(4) Ensure subordinate LSs are aware of their responsibilities for moderate-risk courses.

c. LS Responsibilities

(1) Develop an EAP for response to potential mishaps.

(a) Review the EAP monthly, conduct quarterly walkthrough and an annual drill.

(b) Enter all EAP quarterly walk-through and annual drill data and lessons learned into ESAMS.

(2) Conduct an annual review of the risk assessment and upload the file into ESAMS.

(3) Ensure all new instructors receive any additional training mandated by the LC prior to teaching a moderate-risk course.

(4) Conduct and document an annual inspection of equipment and training platforms used to conduct moderate-risk courses.

(5) Designate a moderate risk POC if designee is someone other than the HRT POC. The moderate-risk POC will be responsible for all designated moderate-risk CINs.

9. Records Management

a. Records created as a result of this instruction, regardless of format or media, must be maintained and dispositioned per the records disposition schedules located on the Department of the Navy Assistant for Administration, Directives and Records Management Division portal page at <https://portal.secnav.navy.mil/orgs/DUSNM/DONAA/DRM/Records-and-Information-Management/Approved%20Record%20Schedules/Forms/AllItems.aspx>.

b. For questions concerning the management of records related to this instruction or the records disposition schedules, please contact the local records manager

10. Review and Effective Date. Per OPNAVINST 5215.17A, NETC will review this instruction annually around the anniversary of its issuance date to ensure applicability, currency, and consistency with Federal, Department of Defense, Secretary of the Navy, and Navy policy and statutory authority using OPNAV 5215/40 (Review of Instruction). This instruction will be in effect for 10 years, unless revised or cancelled in the interim, and will be reissued by the 10-year anniversary date if it is still required, unless it meets one of the exceptions in OPNAVINST 5215.17A, paragraph 9. Otherwise, if the instruction is no longer required, it will be processed for cancellation as soon as the need for cancellation is known following the guidance in OPNAV Manual 5215.1 of May 2016.

11. Forms


a. The following form is available for download from the NETC Public Web Site (www.netc.navy.mil): NETC 1500/5 (High-risk Student Medical Screening)

14 Jul 2022

b. The following forms are available for download from Naval Forms Online (<https://forms.documentservices.dla.mil/order>):

(1) OPNAV 1500/53 (High-risk Instructor Medical Questionnaire)

(2) NAVPERS 1070/613 (Administrative Remarks)



K. BECK
Chief of Staff

Releasability and distribution:

This instruction is cleared for public release and is available electronically on the NETC Public Web Site (www.netc.navy.mil), via the NETC Reference Library in DON TRACKER, or by e-mail at netc_directives@navy.mil.