



DEPARTMENT OF THE NAVY

UNITED STATES NAVAL ACADEMY
121 BLAKE ROAD
ANNAPOLIS, MARYLAND 21402-5000

USNAINST 1734.1B
1/MDC

MAR 30 2000

USNA INSTRUCTION 1734.1B

From: Superintendent

Subj: MIDSHIPMEN DEVELOPMENT CENTER

Ref: (a) Middle States Association of Colleges & Schools, Standards for Accreditation (NOTAL)
(b) BUMEDINST 6320.66 Series (NOTAL)
(c) BUMEDINST 6320.67, (NOTAL)
(d) SECNAVINST 6320.23
(e) DOD Directive 6025.13
(f) OPNAVINST 6320.7
(g) DOD Directive 6490.1
(h) SECNAVINST 5211.5D

1. Purpose. To publish policy, mission, procedures, and responsibilities regarding the operation of the Midshipmen Development Center (MDC), Naval Academy.

2. Cancellation. USNAINST 1734.1A. No special markings appear in this instruction since changes are extensive.

3. Background. Reference (a) requires that all accredited institutions of higher learning provide personal counseling and related clinical services. Midshipmen typically experience a variety of normal challenges and difficulties while they are at the Naval Academy. These experiences provide the opportunity for positive development, learning, and increased maturity. Some midshipmen may choose to consult with a professional counselor as they face these experiences to improve their responses and decisions. Faculty and staff responsible for the development of midshipmen may refer an individual to a counseling center when they believe the midshipman would benefit from personal counseling. Members of the faculty and staff may also wish to consult with psychologically trained professionals on how to respond to midshipmen problems they encounter. Additionally, there are times when the faculty and staff of the Naval Academy benefit from specialized training on psychological, emotional, and developmental issues. The existence of a designated center within the Naval Academy staffed by professionally trained counselors with the sole purpose of providing these services is imperative.

4. Policy. The MDC is a nonmedical, student-services unit designed to support the development of midshipmen and the mission of the Naval Academy. The MDC provides clinical, consultation, and training services on request by a midshipman or by a member of the Naval Academy faculty or staff. The population eligible for clinical services from the MDC is restricted to

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current midshipmen. This instruction directs the organizational structure and operational guidelines of the MDC.

5. Mission. The MDC exists to promote and enhance the adjustment, well-being, and professional development of midshipmen, and to provide psychological consultation and training to the Naval Academy staff responsible for midshipmen development. A wide variety of training, educational, and clinical services are provided to the midshipmen and staff to support the mission of the Naval Academy and to respond to the individual needs and goals of the midshipmen while respecting their diversity in terms of gender, race, and culture.

6. Chain of Command. The MDC Director reports directly to the Commandant of Midshipmen of the Naval Academy who is responsible for all oversight functions, including submission of all fitness reports. It is crucial that the MDC maintain a credible degree of privacy and be able to advocate for midshipmen. The Commandant of Midshipmen evaluates the functioning of the MDC with the aid of independent accreditation organizations and the MDC Performance Improvement Committee. At the end of each academic year, the MDC Director submits to the Superintendent, U.S. Naval Academy (USNA), via the Commandant of Midshipmen, an annual report detailing the activities of the MDC during the academic year. This report includes information on the level and nature of services provided, significant trends noted, and a chronology of important events.

7. Appointment of a Medical Liaison Officer (MLO). The Commanding Officer, Naval Medical Clinic (NMCL) Annapolis, shall appoint a privileged mental health provider as the MLO to the MDC. The presence of the MLO is not directive but supportive in nature and represents an occasion for an enhanced relationship between the staff of the MDC and NMCL. The role of the MLO will be to:

- a. Establish and maintain open communications between the NMCL and the MDC;
- b. Meet with the MDC staff on a regular basis to discuss cases and other common issues, and to provide a presence for medical referral concerns;
- c. Participate in the medical review of MDC cases to assess the appropriate referral of clients designated as "medical referrals" versus those retained within the MDC for counseling;
- d. Assume medical management of cases, after referral to NMCL Mental Health Department, that are beyond the scope of care of the MDC;
- e. Review cases when there is a question of a midshipman's suitability for commissioning, and assist with further evaluation and appropriate disposition, as needed;

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f. Serve on the MDC Performance Improvement Committee.

8. Credentials and Clinical Privileges of MDC Providers

a. The Superintendent, USNA, grants defined privileges to healthcare providers at the Naval Academy in compliance with references (b) through (d). The Superintendent may rely on peer evaluations and recommendations regarding granting of privileges from the USNA Credentials Committee.

b. The MDC Director is appointed the Chairperson of the USNA Credentials Committee. The USNA Credentials Committee consists of the USNA Credentials Committee Chairperson and at least one additional privileged provider at the discretion of the Superintendent.

c. The maintenance of the Individual Credential Files will comply with references (b) and (d) as delineated in a Memorandum of Understanding (MOU) with Naval Medical Clinic, Annapolis. Specifically, the NMCL Professional Affairs Coordinator will provide administrative and technical support to the USNA Credentials Committee to ensure that all health care providers assigned to the Naval Academy are privileged in accordance with existing standards.

d. If a provider's competence is questioned, the USNA Credentials Committee, at the Superintendent's request, will review his/her performance. If further professional review is required, the Superintendent may request the assistance of the Commanding Officer, NMCL, or the Bureau of Medicine and Surgery (BUMED).

e. Any adverse credentials actions, Fair Hearing, Peer Review, or appeal process will comply with reference (c).

f. Military health care providers assigned to USNA will apply for clinical privileges at USNA and NMCL, as directed. If approved, the Commanding Officer, NMCL, will confer the appropriate staff membership with accompanying clinical privileges. Once granted staff membership at NMCL, the military mental health providers assigned to MDC will participate in the NMCL Duty Mental Health Watch, and will be privileged to provide mental health services at NMCL.

9. Performance Improvement

a. The MDC Performance Improvement Committee is tasked by the Commandant of Midshipmen to ensure that all MDC providers and MDC services to the Brigade of Midshipmen and the USNA faculty and staff meet the highest professional standards and comply with all relevant directives.

b. The MDC Performance Improvement Committee's activities will comply with applicable Secretary of the Navy and BUMED guidelines as defined in references (e) and (f).

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c. The MDC Director is appointed the MDC Performance Improvement Committee Chairperson. The MDC Performance Improvement Committee consists of the MDC Performance Improvement Chairperson, the MLO, all MDC staff members, and other healthcare providers assigned to the Naval Academy, as directed.

d. The Performance Improvement Committee will conduct appropriate research to measure and improve the effectiveness and quality of services. At a minimum, the Committee will review MDC activities at least three times a year: following Fourth Class Regiment, and after fall and spring semesters. The Committee will conduct prospective monitoring (e.g., peer reviews, record reviews, sentinel events, and review of long-term cases) and retrospective oversight (e.g., focused reviews) as are needed to ensure high-quality service. After each meeting, MDC Performance Improvement Meeting Minutes will be forwarded to the Commandant of Midshipmen for review. The results of the Performance Improvement monitoring activities will be used in the periodic renewal of privileges for MDC providers.

10. MDC Accreditation. To verify that the activities, procedures, and services of the MDC meet the accepted standards of practice for college counseling centers, the MDC will comply with the standards for college counseling centers published by the International Association of Counseling Services, Inc.

11. Emergency Mental Health Evaluations. If there is known or suspected suicidal behavior, emergency medical services must be activated immediately. MDC will be notified after the fact. Otherwise, all midshipmen needing emergency Mental Health Evaluations will be referred to MDC, or NMCL if it is more expedient, for initial screening and disposition. MDC providers receiving emergency referrals will notify the MLO to obtain medical guidance and facilitate coordination of services. The Duty Healthcare Provider, NMCL, receives emergency referrals occurring outside of normal working hours or when a MDC provider cannot be contacted. The Duty Healthcare Provider will then contact the Mental Health Watch Officer in accordance with NMCL directives.

12. Command Directed Mental Health Evaluations

a. Reference (g) affords certain rights to active duty personnel who are ordered by their Commanding Officer for a Mental Health Evaluation. When circumstances suggest the need for an emergency evaluation, the referral is made and documentation as to the basis for the referral is provided after the fact.

b. All Command directed referrals shall be discussed with MDC staff for initial screening and disposition. The actual evaluations will be conducted at MDC or referred to Mental Health, depending on the nature and circumstances of the problem.

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13. Medical Referrals from MDC. If a MDC staff member determines that a midshipman is in need of medical evaluation or services, a referral is made to an appropriate medical treatment facility. All significant mental health disorders will be referred to Mental Health, NMCL, and the results become a part of the midshipman's permanent health record and the MDC client file. A significant mental health disorder is one that results in impairment to such a degree that a midshipman's ability to adhere to the demands of academy life is jeopardized. Once a referral to a medical treatment facility is made, the responsible medical treatment facility staff determines the need for ongoing medical care of the midshipman.

14. Continuity and Coordination of Care Policy. Every midshipman seen at the MDC is assigned to a primary provider. The MDC client file documents the current primary provider responsible for the overall coordination and provision of services provided by the MDC. When the primary provider is not privileged for independent provision of mental health services, the MDC Director designates a fully privileged supervisor with overall responsibility for clinical services provided. When a midshipman is either participating in a Command-directed medical treatment program; such as, for alcohol dependence or is deemed to require medical referral, the MDC primary provider will coordinate medical services.

15. Management of Information. In general, information about MDC clients may not be shared with persons, offices, or organizations outside of the MDC that are not directly involved with the client's care and/or have an official need to know the information. However, there are a number of obligations and limitations on privacy and confidentiality of client information and records that are imposed by Department of Defense policies.

a. Privacy Act. Reference (h) outlines the Department of the Navy Privacy Act Program. Consistent with reference (h), each interaction between a midshipman and a provider at the MDC is recorded in a MDC client file. This client file is considered property of the United States Government and may represent privileged communication. Access to this file by third parties is allowed when required by law, regulations, or judicial proceeding. Clients will sign a Privacy Act Statement prior to receiving services at MDC to indicate their understanding of the laws.

b. Limits to Confidentiality. There are also other limits to confidentiality. These limits will be discussed with every midshipman who seeks clinical services at MDC, and they will sign a Confidentiality Statement prior to receiving such services to indicate their understanding of these limits:

(1) When a provider believes a midshipman intends to harm self or others or when there is reasonable suspicion of physical abuse, it is their duty to disclose and act upon that information.

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(2) Concerns about a midshipman's suitability for commissioning will be discussed with the MLO. Midshipmen will be referred to Mental Health for further evaluation, as needed.

c. Peer Review. It is also important to note that other medical professionals will routinely review some records to ensure the highest standards of professional care are being maintained. These professionals will respect the confidentiality of the records.

d. Handling of Case Files and Retention of Records. Client records may not be allowed to leave the MDC, and adequate safeguards must be taken in the MDC to ensure that the privacy of clients is maintained. All case files will be kept in locked, central file cabinets with routine access restricted to the MDC staff and the MDC Performance Improvement Committee members. As cases are closed, summary records of midshipmen's contact with the Midshipmen Development Center will be developed and retained for 7 years. As midshipmen leave the Academy, medically relevant information will be incorporated into their permanent health records at NMCL Annapolis. The remainder of their case files will be destroyed 2 years after their last appointment at MDC, or when they leave the Academy, whichever is later.

e. Medical Referrals. When midshipmen are referred for evaluation and/or treatment at a medical facility, documentation of these visits will become a part of their permanent health record. Similarly, when beneficiaries are evaluated and treated by MDC providers when they are serving as Mental Health Watch Officers, documentation will comply with medical charting guidelines. All original documentation will be forwarded to the Mental Health Clinic, and copies will be maintained in MDC files as needed.

16. Psychological Consultation

a. Direct Consultation to USNA Staff. MDC privileged staff serve as consultants on the psychological, emotional, and developmental issues of midshipmen. They specifically serve as consultants to the faculty, the Commandant, the Commandant's staff and special assistants, and particularly the Battalion and Company Officers.

b. Coordination of USNA Services. MDC staff will also maintain liaison and coordinate services with other support services available to midshipmen at the Naval Academy, including Mental Health, Chaplains, the Academic Center, Alcohol and Drug Education Officer, and Character Development Department.

c. Coordination of External Resources. To expand the range of available services provided at MDC, MDC staff may access a variety of mental health and social services outside of the Naval Academy, including the Family Service Center and other community agencies. When these resources are used, the services will be provided on a consultant basis under the aegis of MDC. Consultant personnel will comply with all pertinent MDC and USNA policies and

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procedures regarding the management of midshipmen (e.g., limits of confidentiality, disclosures to the media, etc.). Similarly, all referrals by MDC consultants for further services for midshipmen must be approved by the MDC Director.

d. Support to Families of Midshipmen. MDC staff will be available to the families of the midshipmen for general information and consultation, within the MDC limits of confidentiality.

e. Outreach. MDC will provide training and outreach as needed.

17. Action

a. Commandant of Midshipmen shall oversee and evaluate all activities of the MDC.

b. Director, Midshipmen Development Center:

(1) Is responsible for program implementation, the coordination of clinical, consultation and training services, and the routine operation of the MDC.

(2) Will ensure that the MDC complies with standards set forth by the International Association for Counseling Services, Inc.

(3) Will establish and maintain liaison with the Superintendent, Commandant of Midshipmen, Academic Dean, Registrar, Command Chaplain, Division Directors, Brigade Medical Officer, and their respective staffs.

(4) Will ensure that all midshipmen seen at the MDC are psychologically fit and suitable for duty prior to commissioning.

(5) Will serve as the Chairperson of the USNA Credentials Committee and the MDC Performance Improvement Committee Coordinator.

c. Senior Academic Psychologist will supply privileged psychologists to serve on the USNA Credentials Committee and MDC Performance Improvement Committee as directed.

d. Commanding Officer, NMCL, Annapolis:

(1) Will appoint a MLO and will ensure participation and cooperation of the MLO with the MDC.

(2) Will assist in the credentialing of clinical providers at USNA as defined in a separate MOU with the Superintendent.

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e. Medical Liaison Officer:

(1) Will facilitate open communication and coordination between NMCL and MDC.

(2) Will review cases with medical concerns and assume medical management of midshipmen seen at MDC as appropriate.



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