MEMORANDUM FOR RECORD

SUBJECT: Approval of Report of Investigation into the Facts and Circumstances Pertinent to the Shooting Incident at Fort Hood, Texas, on 2 April 2014.

1. I have reviewed the Report of Investigation (ROI) prepared in accordance with Army Regulation 15-6, Procedure for Investigating Officers and Boards of Officers by LTG Joseph E. Martz into the facts and circumstances pertinent to the shooting incident at Fort Hood, Texas, on 2 April 2014. The ROI is complete and addresses the matters identified in my appointment memorandum dated 10 April 2014.

2. The evidence is well documented and supports the findings and recommendations, which are hereby approved without exception.

3. I direct the Director of the Army Staff to develop an action plan to implement the recommendations contained in this ROI; and, present the plan to me for approval within 90 days from the date of this memorandum.

John M. McHugh

[Signature]
MEMORANDUM FOR SECRETARY OF THE ARMY

SUBJECT: Investigation into 2 April 2014 Shooting at Fort Hood, Texas

1. Enclosed please find the Report of Investigation pertaining to the 2 April 2014 Shooting at Fort Hood, Texas.

2. The enclosed report was produced pursuant to Army Regulation 15-6 and in accordance with your Appointment Memorandum, dated 10 April 2014.

3. Point of contact for this memorandum is the undersigned at [b] (6) [b] .

Encl

JOSEPH E. MARTZ
Lieutenant General, U.S. Army
Military Deputy for Budget
Part I – Administrative Matters.

1. Appointment. On 10 April 2014, the Secretary of the Army, John M. McHugh, directed me to investigate and document the facts pertinent to the shooting incident at Fort Hood, Texas, on 2 April 2014.\(^1\) In turn, I appointed a team of Assistant Investigating Officers to participate in the investigation.\(^2\)

2. Overview of investigation. The investigation was comprised primarily of witness interviews and reviews of documents gathered by the investigation team.\(^3\)

   a. During the course of the investigation, the team visited Fort Hood, Fort Bliss, and Fort Leonard Wood, where we interviewed and obtained sworn statements from 169 witnesses. We also recorded twenty-five interviews into Memoranda for Record. Finally, we also considered the materials and statements gathered as part of the U.S. Army Criminal Investigation Command (CID) investigation.

   b. Further, the team interviewed another six witnesses via video- and tele-conference, and we received briefings from nine subject matter experts in a variety of fields relevant to the investigation.\(^4\)

   c. To address the questions presented by Secretary McHugh, I divided the specified tasks into four lines of effort: Recruit/Assess/Retain; Installation Support; Information Sharing; and Medical.\(^5\) I then appointed a lead for each of the four lines of effort. By breaking the questions into these four lines of effort, each lead had a logical and manageable grouping of questions to address. In doing so, the team was able to draw from our collective areas of expertise to identify the nature and location of the data needed to address the questions by line of effort. Finally, we were able to collaborate and synchronize our findings and develop particularized and actionable recommendations.

   d. The investigation required travel to Fort Hood, Fort Bliss, and Fort Leonard Wood. We also called witnesses at Fort Carson, Fort Stewart, Fort Hood, Fort Drum, and Killeen, Texas for video and telephonic interviews. The support we received at each installation and unit was remarkable. From coordinating office space, to locating troops in the field, and making video teleconference suites available, this logistical

---

\(^1\) Exhibit A-1 IO Appointment Memo 10 April 2014.

\(^2\) Exhibit A-2 AIO Appointment Memo 16 April 2014.

\(^3\) See Appendix 2, Tab C for a list of witnesses interviewed and Appendix 4 for a list of exhibits.

\(^4\) See Appendix 2, Tab B for a list of briefings.

support allowed us to overcome many obstacles that might have limited our ability to complete the task.

e. The investigation team was able to interview every witness we deemed relevant to the investigation. We also conducted follow-up interviews as needed. Many of our interviews built on statements taken by CID, FBI, and Texas Rangers during the criminal investigation. Their work proved invaluable in providing context for this investigation.

f. During the investigation, we conducted an in-person Initial Progress Report (IPR) to the Secretary of the Army (SA) and provided weekly e-mail updates. My team and I met at least once each day to discuss our progress and the way ahead.

3. Organization of this report.

a. Part I discusses the investigation and how it was conducted.

b. Part II contains a narrative of relevant events in Specialist (SPC)(E-4) Lopez-Lopez’s background leading up to the 2 April 2014 shooting. It further discusses in more detail the events of 2 April. Part II provides a broad backdrop and context for the findings and recommendations in Part III and IV. Each event discussed in Part II is included in the annotated master timeline at Appendix 1.

c. Part III addresses several key findings and recommendations of the investigation. These include broad themes and conclusions which inform and influence findings and recommendations on tasks discussed in more detail in Part IV.

d. Part IV addresses the twelve tasks specified by Secretary McHugh. A separate paragraph covers relevant background, discussion, findings, and recommendations for each task, which is shown at the beginning of each paragraph in italics.

e. Appendices.

(1) Timelines

   (a) Tab A – 7 December 1998-2 April 2014

   (b) Tab B – 2 April 2014

(2) Investigation Team, Timeline, and Materials

   (a) Tab A – Investigation Team Members

   (b) Tab B – Investigation Timeline

   (c) Tab C – Personnel Interviewed

   (d) Tab D – Non-Disclosure Agreements
Report of Investigation into the 2 April 2014 Shooting Incident at Fort Hood

(3) Acronyms and Definitions
   (a) Tab A – Acronyms
   (b) Tab B – Definitions

(4) Exhibits
   (a) Tab A – Investigation Administrative Materials
   (b) Tab B – Fort Bliss Statements
   (c) Tab C – Fort Leonard Wood Statements
   (d) Tab D – Fort Hood Statements
   (e) Tab E – Family/Friend Statements
   (f) Tab F – Miscellaneous Statements
   (g) Tab G – Personnel Records
   (h) Tab H – Medical Records
   (i) Tab I – Charts
   (j) Tab J – Installation Orders
   (k) Tab K – Briefings
   (l) Tab L – Policy Document
   (m) Tab M – Reports
   (n) Tab N – Other Evidence
   (o) Tab O – Forms

(5) Medical Treatment
   (a) Medical Personnel Consulted
   (b) Medical Chronology
   (c) Casualty List
Part II – Narrative of Events.

The narrative below is intended to provide background and context for the findings and recommendations in Part III and IV. Unless otherwise noted, the source for each event is included in the annotated timelines at Appendix 1.

1. Puerto Rico.

a. SPC Ivan Lopez-Lopez was born on 23 October 1979, in Ponce, Puerto Rico.

b. SPC Lopez-Lopez married his first wife, on 14 March 1997 and graduated from Asuncion Rodríguez De Sala High School in May 1997. He had a daughter with his first wife on 12 October 1997.

c. On 7 December 1998, SPC Lopez-Lopez took the ASVAB with an AFQT of 36 and a GT score of 93. He enlisted into the Puerto Rico Army National Guard on 4 January 1999. In August 1999, SPC Lopez-Lopez joined the Puerto Rico Police Department in Gurabo, Puerto Rico, and remained with the Police Department until he joined the Active Army on 1 April 2010.

d. On 30 November 1999, SPC Lopez-Lopez received an entry-level separation from the Army National Guard, because he could not pass the pre-BCT English language course. He subsequently obtained a waiver from The Adjutant General of Puerto Rico on 14 April 2003, and enlisted as an Infantryman (11B) on 30 April 2003. SPC Lopez-Lopez completed forty-five hours of language training on 20 June 2003 and was promoted to Private First Class (PFC) (E-3) on 14 August 2003. He was activated and attended MOS training at Fort Benning, Georgia from 18 September 2003 until 16 January 2004.

e. On 1 June 2004, SPC Lopez-Lopez and his first wife had their second child, a boy.

f. On 10 October 2006, SPC Lopez-Lopez was ordered to active duty for no more than 545 days and instructed to report to Fort Hood, Texas on 12 October 2006. He deployed to Egypt as part of the Multi-National Force & Observers from 15 February 2007 through 10 February 2008. He received an Army Achievement Medal, two Multi-National Force & Observers Medals, and a Certificate of Appreciation for his deployment.

g. Upon redeployment, SPC Lopez-Lopez divorced his first wife on 11 September 2009. His divorce created a child support obligation of $885 per month.

h. Exhibit G-3 Lopez-Lopez LES.
i. In anticipation of joining the active component, SPC Lopez-Lopez submitted his Standard Form 86 (SF 86) on 1 February 2010. SPC Lopez-Lopez’s subject interview took place on 19 February 2010. During the interview, SPC Lopez-Lopez acknowledged to the background investigator that he had accumulated approximately $14,000 in delinquent debts, which he had failed to disclose on his SF 86. SPC Lopez-Lopez explained that he incurred the debt starting in 2001 as a result of his commute from Guayanilla for his job with the Puerto Rico Police in Gurabo. Despite this omission, the investigator found “nothing in the subject’s background, conduct or lifestyle that could leave him open to blackmail or coercion[].”

2. Fort Bliss, Texas.

a. On 30 March 2010, SPC Lopez-Lopez was ordered to active duty. He enlisted as an Infantryman (11B) in the rank of PFC on 1 April 2010, and reported for active duty to 4-6 Infantry Battalion, 4th Brigade Combat Team, 1st Armored Division, Fort Bliss, Texas.

b. SPC Lopez-Lopez married on 22 June 2010.

c. He was promoted to Specialist on 1 October 2010.

d. Once he joined active duty, SPC Lopez-Lopez regularly sought medical care.

e. On 7 February 2011, SPC Lopez-Lopez and his wife, , had a girl. This child was SPC Lopez-Lopez’s third child and second daughter.


a. SPC Lopez-Lopez deployed in support of Operation New Dawn from 2 August through 18 December 2011 with stops in Kuwait on either side of his time in Iraq. He departed Kuwait for Iraq on 6 August 2011, and entered Kuwait from Iraq on 15 December 2011. He redeployed out of Kuwait on 18 December. SPC Lopez-Lopez deployed to Iraq as part of his unit’s Personal Security Detachment (PSD) and received an Army Commendation Medal for his service.

b. On or about 12 December 2011, as the unit was leaving Iraq, SPC Lopez-Lopez was in a convoy engaged by an Improvised Explosive Device (IED). Although SPC Lopez-Lopez later claimed to be near an explosion, there is no evidence he was within the blast radius of the IED.

7 Exhibit G-22 Lopez-Lopez NACLC Case 10D21022 8 JUN 10.

8 Exhibit B-23 DA Form 2823 30 April 2014.

9 See Findings at Part IV, para. 4.
4. Redeployment to Fort Bliss Through Permanent Change of Station.

a. Between SPC Lopez-Lopez’s redeployment and his reenlistment on 26 October 2012, SPC Lopez-Lopez saw the doctor. During that same period, he was counseled in June, July, and August for non-promotion.

b. SPC Lopez-Lopez attended Warrior Leader Course (WLC) on 1 November through 21 November 2012. At some point in December, he became a Team Leader but was subsequently moved to Sergeant (SGT) (E-5) team, because one of the squad’s PFCs was viewed as more qualified than SPC Lopez-Lopez.10

c. In the eight months following his graduation from WLC, SPC Lopez-Lopez was seen by medical professionals at least once per month. His complaints included

d. SPC Lopez-Lopez ultimately received a permanent profile. His company and battalion supported SPC Lopez-Lopez’s request to reclassify from Infantryman (11B) to Motor Transport Operator (88M) on 29 July. That request was approved by Human Resources Command on 23 August.

e. From July until his Permanent Change of Station (PCS) in November 2013, the frequency of SPC Lopez-Lopez’s medical appointments escalated.

f. In addition to SPC Lopez-Lopez’s medical concerns, permanent profile, reclassification, and looming reassignment, on 6 October, SPC Lopez-Lopez’s grandfather passed away. On 15 November, he received a Red Cross Message that his mother had suddenly and unexpectedly passed away as well.

g. SPC Lopez-Lopez took emergency leave to bury his mother on 20-26 November. While he was on emergency leave, his Team Leader, , out-processed SPC Lopez-Lopez so that SPC Lopez-Lopez could keep his 88M AIT date.

h. SPC Lopez signed in to Fort Bliss after emergency leave at 0035 hours on 26 November and immediately signed out on PCS leave.

5. Fort Leonard Wood, Missouri.

a. SPC Lopez-Lopez reported to AIT for 88M training at Fort Leonard Wood, Missouri, on 29 November 2013, and graduated on 4 February 2014.

b. SPC Lopez-Lopez’s time at AIT was unremarkable. His commander, Captain, said SPC Lopez-Lopez had financial troubles, but that about half of his 300

10 Exhibit B-14 DA Form 2823 Statement 30 April 2014.
Soldiers have financial difficulties.\(^{11}\) SPC Lopez-Lopez’s platoon sergeant, Staff Sergeant (SSG) \(\text{(b)} \text{(6)}\), also knew about the financial issues—specifically his recent AER loan.\(^{12}\) During 88M AIT, SSG \(\text{(b)} \text{(6)}\) learned about SPC Lopez-Lopez’s mother dying.

c. During his time at Fort Leonard Wood, SPC Lopez-Lopez attempted to purchase a weapon on two separate occasions. The first time was at the beginning of the course. The second time was as he was leaving the training. His classmate, \(\text{(b)} \text{(6)}\) ultimately persuaded SPC Lopez-Lopez not to purchase the weapon.\(^{13}\)

6. Fort Hood, Texas, 5 February through 1 April 2014.

a. SPC Lopez-Lopez reported to 21st Replacement at Fort Hood to begin in-processing on 5 February 2014. On 8 February he went to the Emergency Department \(\text{(b)} \text{(6)}\).

b. On 18 February, SPC Lopez-Lopez finished in-processing the installation and was assigned to the 49th Transportation Battalion (Movement Control) (49th Trans (MC)). He was then further assigned to the 154th Composite Transportation Company (CTC). SPC Lopez-Lopez received transient barracks the day he signed into his unit. SPC Lopez-Lopez signed out of those barracks on 3 March after leasing an off-post residence.\(^{14}\)

c. SPC Lopez-Lopez arrived to a very busy 154th CTC. As a result of the high operational tempo (OPTEMPO), manning shortages, and a Fort Hood Policy requiring an NCO in each vehicle, NCOs were regularly on missions and unable to provide adequate time to train, mentor, and lead their Soldiers.\(^{15}\)

d. Along with the high OPTEMPO, the unit experienced a significant turnover in leadership right around the same time SPC Lopez-Lopez arrived. His company commander was serving as the 297th Inland Cargo Transfer Company (ICTC) rear detachment commander in addition to commanding the 154th CTC. His first sergeant, a junior Sergeant First Class, was the rear detachment first sergeant for the 297th ICTC and the acting first sergeant for the 154th CTC. She was only there for the two weeks preceding the shooting to fill a gap between the outgoing first sergeant and the incoming first sergeant. Likewise, SPC Lopez-Lopez’s platoon leader arrived less than a month before the shooting. His team leader, \(\text{(b)} \text{(6)}\), was the acting...
squad leader because SPC Lopez-Lopez’s assigned squad leader was at the National Training Center the entire time SPC Lopez-Lopez was assigned to the 154th CTC.

e. SPC Lopez-Lopez requested Permissive Temporary Duty (PTDY) almost immediately after reporting to his company.\textsuperscript{16} He told his chain of command he needed PTDY to get his family.\textsuperscript{17} He was told that he had to wait fourteen days to fully in-process the unit before he could take PTDY.\textsuperscript{18} The battalion first started tracking his PTDY request on 24 March.

f. On 23 February, SPC Lopez-Lopez purchased a Smith & Wesson, Model M&P .45 pistol from the Army & Air Force Exchange Service (AAFES post exchange on Fort Hood. On 1 March he reported to the Killeen Police Department the 28 February theft of his weapon from his apartment at \textsuperscript{19} That same day, SPC Lopez-Lopez purchased the same model of handgun from Guns Galore in Killeen.

g. SPC Lopez-Lopez received his initial counseling on 12 March from his team leader and acting squad leader, \textsuperscript{19} counseled SPC Lopez-Lopez using the Soldier Leader Risk Reduction Tool (SLRRT) on 17 March. \textsuperscript{19} provided detailed counseling to SPC Lopez-Lopez regarding the SLRRT, including a variety of resources to address some of the issues identified in the SLRRT.\textsuperscript{19}

h. On 13 March, SPC Lopez-Lopez updated his Texas Driver’s license with an address of \textsuperscript{19}.

i. SPC Lopez-Lopez began the Driver’s Training Academy on 17 March and completed the training on 21 March.

j. SPC Lopez-Lopez’s acting first sergeant, \textsuperscript{20} learned about his PTDY request on 24 March, the same day the battalion started tracking the request.\textsuperscript{20} She told him he could not have more than ten days of PTDY, but she would give him a four-day pass, and he could get PTDY upon his return.\textsuperscript{21}

k. SPC Lopez-Lopez departed on his four-day pass Thursday, 27 March and returned on the 30th. SPC Lopez-Lopez picked up his wife and daughter in Odessa,
Texas on his way to Fort Bliss to retrieve his personal belongings. On Friday, 28 March, SPC Lopez-Lopez met his AIT classmate, at the post exchange on Fort Bliss.

I. On 30 March, SPC Lopez-Lopez returned from his four-day pass and began moving his belongings from the rented U-Haul trailer into his apartment at , completing his family’s relocation to Killeen. He reported to work on 31 March. SPC Lopez-Lopez’s PTDY form came back to the company on 31 March with errors. and SPC Lopez-Lopez made the required corrections and resubmitted it the same day. Ultimately, the company commander hand-carried the leave form to the battalion commander, who signed it on 1 April. The leave form did not have a control number, however, which led to rising tensions on 2 April.

7. Fort Hood, Texas, 2 April 2014.

a. On the morning of 2 April 2014, SPC Lopez-Lopez departed his off-post apartment, located at and entered Access Control Point (ACP) 21 at 06:00:38. SPC Lopez-Lopez arrived for morning PT/accountability formation, and shortly thereafter instructed him to go to the 49th Trans (MC) to sign out for his ten days of PTDY. SPC Lopez-Lopez then traveled to the 49th Trans (MC) Battalion Headquarters, located at Building (Bldg) 39001; however, the Staff Duty Officer informed him the DA Form 31 was not there, so he could not sign out.

b. At 07:19:39, SPC Lopez-Lopez sent a text message to informing him the DA Form 31 was not ready to be signed. SPC Lopez-Lopez then departed Fort Hood to weigh and return the empty U-Haul trailer.

c. At 12:26:49, sent a text message asking if SPC Lopez-Lopez had signed out for PTDY yet. was conducting mission on the morning of 2 April and was unaware of the status of SPC Lopez-Lopez’s PTDY request.

d. At 12:34:19, SPC Lopez-Lopez re-entered Fort Hood via ACP 21. then escorted SPC Lopez-Lopez to the 154th CTC to check on the status of the PTDY request. About 1300 hours, PAC Clerk, 154th CTC, escorted SPC Lopez-Lopez to the S-1 Section, 49th Trans (MC) to check on the status of the PTDY request. Upon arrival, Clerk, HHD, 49th Trans (MC), reviewed the DA Form 31 and noticed that , the Battalion Commander, had already signed the form; however, a control number was not yet assigned. SPC Lopez-Lopez informed he needed the PTDY to move his family into a

---

22 Exhibit E-7 MFR Telephone Interview 27 May 2014.
23 Exhibit E-13 DA Form 2823 Statement 8 May 2014.
24 Exhibit D-81 DA Form 2823 Statement 22 April 2014.
25 Exhibit D-81 DA Form 2823 Statement 22 April 2014.
26 Exhibit D-78 CID Sworn Statement of 2 April 2014.
new apartment after his first one was burglarized. Informed SPC Lopez-Lopez that he was not authorized PTDY as he already had an established household and brought the issue to the attention of, NCOIC, S-1, HHD, 49th Trans (MC). Informed SPC Lopez-Lopez he was technically not entitled to the requested PTDY since he already had an established household; however, if approved by, 49th Trans (MC), then he would process the request.

e. At 14:14:30, SPC Lopez-Lopez sent a text message to his wife informing her the PTDY request may not be approved. SPC Lopez-Lopez departed the Battalion Headquarters shortly thereafter. At about 15:00, contacted, Acting 1SG, 154th CTC, to inform her of the issue regarding SPC Lopez-Lopez’s PTDY request.

f. After told SPC Lopez-Lopez his PTDY may not be approved, SPC Lopez-Lopez left the Battalion Headquarters and went back to his off-post apartment. Upon arrival, SPC Lopez retrieved his Smith & Wesson .45 caliber pistol, placed it inside a bag, and informed his wife he was going shooting after work. At 15:26:59, sent a text message to SPC Lopez-Lopez indicating she was worried about him after he left the apartment. At 15:31:20, SPC Lopez-Lopez re-entered ACP 21 to Fort Hood using the “Phantom Express” lane.

g. Upon SPC Lopez-Lopez’s arrival at Bldg 39001, and, and SPC Lopez-Lopez began to discuss the PTDY request. During the conversation, SPC Lopez-Lopez verbally attacked because SPC Lopez-Lopez believed was disrespecting him. At some point during the argument, SPC Lopez-Lopez left the building to go outside to smoke.

h. At 15:37:58, SPC Lopez-Lopez attempted to call on his cell phone, but did not answer his cell phone because it lost power. At 15:38:21, SPC Lopez-Lopez called wife’s cell phone attempting to reach him.

27 Unbeknownst to, however, this statement was false. As discussed in the preceding paragraphs, SPC Lopez-Lopez had already moved his family and belongings into the second apartment after his first apartment was reportedly burglarized.
28 Exhibit D-78 CID Sworn Statement of 2 April 2014.
29 Exhibit D-42 CID Sworn Statement of 8 April 2014.
30 Exhibit D-42 CID Sworn Statement of 8 April 2014.
31 Exhibit E-7 MFR Telephone Interview 27 May 2014.
32 Phantom Express is an automated access control system used to expedite entry by registered personnel onto Fort Hood using a DoD-issued ID card and a bar code reader. See www.hood.army.mil/phantom_express/faq.htm.
33 Exhibit D-42 CID Sworn Statement of 8 April 2014.
34 Exhibit D-42 CID Sworn Statement of 8 April 2014.
35 Exhibit D-81 DA Form 2823 Statement 22 April 2014.
i. About 16:01, [b] departed the Battalion Headquarters to find and discuss the PTDY issue. [b] also contacted SPC Lopez-Lopez’s platoon sergeant, [b], to discuss the issue and SPC Lopez-Lopez’s conduct toward [b], noting that SPC Lopez-Lopez might receive a counseling statement for disrespect. [b] At 16:08:42, SPC Lopez-Lopez sent a text message to CPL stating he was still at the S1 section waiting on his PTDY.

j. About 16:15:00, SPC Lopez-Lopez approached open door, aimed his weapon at and began shooting. SPC Lopez-Lopez shot and wounded, and shut the door while SPC Lopez-Lopez continued to fire several more rounds through the door. During this time, several members of 49th Trans (MC) were inside the Battalion’s conference room and heard gunshots.

k. SPC Lopez-Lopez then moved toward the conference room and tried to gain entry, while SFC Ferguson and others were attempting to barricade the door. SPC Lopez-Lopez fired several rounds through the door, fatally wounding SFC Ferguson. SPC Lopez-Lopez then left Bldg 39001 and returned to his car, driving west toward 73rd Street. While inside Bldg 39001, he fired a total of eleven rounds.

l. While traveling northbound on 73rd Street, SPC Lopez-Lopez encountered standing beside the road to his left. SPC Lopez-Lopez came to a stop in the roadway, rolled down his window, and fired a total of three rounds striking once. SPC Lopez-Lopez continued north on 73rd Street and turned west on Motorpool Road.

m. After parking his car outside the fence of the 154th CTC motorpool, SPC Lopez-Lopez walked through the gate, entered Bldg 40027 through the open bay doors, and walked directly into the office located in the southeast corner of the building. SPC Lopez-Lopez fired one round in the direction of. The round missed, penetrated the wall behind her, and grazed head. SPC Lopez-Lopez then continued to fire several more rounds inside the office, fatally wounding SGT Owens and wounding. Numerous unit members were in the bay area of the building when SPC Lopez-Lopez opened fire inside the office. Several of the Soldiers reported seeing SPC Lopez-Lopez exit the office and continue firing the pistol.

36 Exhibit D-3 DA Form 2823 Statement 23 April 2014.
37 Exhibit D-3 DA Form 2823 Statement 23 April 2014.
38 Exhibit N-12 Sketch of Shell Casings 12 April 2014.
39 Exhibit D-60 CID Form 94 Statement 4 April 2014.
40 Exhibit D-7 CID Sworn Statement of 2 April 2014; Exhibit D-60 CID Form 94 4 April 2014.
41 Exhibit D-102 CID Sworn Statement of 2 April 2014; Exhibit D-6 CID Sworn Statement of PFC 2 April 2014.
42 Exhibit D-31 CID Sworn Statement of 10 April 2014; Exhibit D-87 CID Sworn Statement of 10 April 2014; and Exhibit D-94 CID Sworn Statement of 10 April 2014.
striking and wounding both (b) (6) and (b) (6). SPC Lopez-Lopez then exited Bldg 40027 through the open bay doors and attempted to fire his weapon at (b) (6). The weapon misfired and SPC Lopez-Lopez returned to his car to depart the area. While inside Bldg 40027, SPC Lopez-Lopez fired a total of nine rounds.

n. As SPC Lopez-Lopez drove east on Motorpool Road, (b) (6) and (b) were westbound in SFC (b) (6) vehicle, when they were stopped by a Soldier running from the direction of Bldg 40027. SPC Lopez-Lopez pulled alongside the stopped vehicle and fired one round through the windshield, causing glass fragments to strike and wound (b) (6). SPC Lopez-Lopez then continued east on Motorpool Road.

o. When SPC Lopez-Lopez reached the intersection of 73rd Street and Motorpool Road, he made a turn toward the north and fired three rounds at (b) (6) from the passenger-side window of his vehicle. SPC Lopez-Lopez missed both Soldiers and turned east into the parking lot of the 1st Medical Brigade (1st Med Bde) HQs, Bldg 33026.

p. While driving, SPC Lopez-Lopez fired one round from the driver-side window of his vehicle at Second Lieutenant (b) (6), who was standing in the parking lot west of Bldg 33026, wounding him in the neck.

q. SPC Lopez-Lopez parked his vehicle directly in front of Bldg 33026 and entered through the front doors. Immediately upon entering, SPC Lopez-Lopez fired his weapon at three Soldiers in the Staff Duty Office (SDO) to his right, fatally wounding SSG Lazaney-Rodriguez and wounding both (b) (6) and (b) (6). SPC Lopez-Lopez then walked past the SDO and down the main hallway to the right. He fired his weapon at (b) (6), wounding him, before exiting a doorway at the east end.
of the building and returning to his vehicle.\textsuperscript{50} SPC Lopez-Lopez fired a total of five rounds while inside Bldg 33026.\textsuperscript{51}

r. SPC Lopez-Lopez then drove south on 72nd Street to the parking lot just to the north of the 49th Trans (MC) HQs, Bldg 39001, where his vehicle was eventually discovered.\textsuperscript{52} At about 16:25, SPC Lopez-Lopez exited his vehicle and began walking toward Bldg 39001, when he was ultimately confronted by [b] (6) \underline{\text{----------}}, Military Police (MP).\textsuperscript{53}

s. The following is a detailed chronology accounting for the actions of Installation Services and Support both during and immediately after the incident itself. The following events and times were extracted from the Directorate of Emergency Services (DES) Dispatch Log (Exhibit N-23), Radio Transcripts (Exhibit N-24 and Exhibit N-25), DES Active Shooter Timeline (Exhibit N-26), Synopsis of Dash Cam Video (Exhibit N-14), and Mission Control Point Duty Log (Exhibit N-27).

(1) At 16:16:06, the Fort Hood DES received a 911 call indicating “shots fired.” At 16:18:11 the DES dispatcher sent “shots fired Bldg 39001” via radio to all patrols.

(2) At 16:19:55, [b] (6) \underline{\text{----------}} departed the DES enroute to Bldg 39001.

(3) At 16:20:55, patrol “S3” arrived at Bldg 39001, as the first unit on the scene.\textsuperscript{54}

(4) At 16:22:30, [b] (6) \underline{\text{----------}} arrived in the parking lot located north of Bldg 39001. She encountered two Soldiers, [b] (6) \underline{\text{----------}} and [b] (6) \underline{\text{----------}} standing next to the parking lot. She conducted an officer safety search of the two Soldiers and began to question them.

(5) At 16:23:52, patrols “P2” and “S8” reported they observed bullet holes in the conference room door in Bldg 39001.

(6) At 16:25:07, SPC Lopez-Lopez is observed on [b] (6) \underline{\text{----------}} dash-cam video walking from the parking lot toward the general direction of Bldg 39001. [b] \underline{\text{----------}} noticed SPC Lopez-Lopez and informed him to stop.

(7) At 16:25:22, SPC Lopez-Lopez began walking toward [b] (6) \underline{\text{----------}} and stated, “You better kill me now…I was the shooter…kill me.” [b] (6) \underline{\text{----------}} then made a tactical retreat from SPC Lopez-Lopez while drawing her assigned M9 pistol.

\textsuperscript{50} Exhibit N-13 CID Status Report 16 April 2014.
\textsuperscript{51} Exhibit N-12 Sketch of Shell Casings 12 April 2014.
\textsuperscript{52} Appendix 1, Tab B.
\textsuperscript{53} Exhibit N-14 Synopsis of Dash Cam Video 14 April 2014.
\textsuperscript{54} In this timeline, MP and DES officers are identified by their patrol call sign (e.g., “S3,” “506,” or “LID 617”).
(8) At 16:25:31, SPC Lopez-Lopez removed his pistol from inside the waistband of his ACU trousers, charged the weapon, and placed it to the right side of his head.

(9) At 16:25:37, while [redacted] attempted to transmit over her radio, SPC Lopez-Lopez shot himself in the right side of his head, and [redacted] almost simultaneously discharged a round striking an adjacent patrol vehicle behind SPC Lopez-Lopez.

(10) At 16:25:46, [redacted] reported shots fired over her radio.

(11) At 16:25:55, [redacted] and [redacted], both Medics, moved the weapon away from SPC Lopez-Lopez and began rendering aid.

(12) About 16:26, DES dispatcher reported EMS enroute to Bldg 39018, which was the building closest to the engagement with SPC Lopez-Lopez.

(13) At 16:26:12, several DES and MP patrols responded on foot to [redacted] location, and assisted with security while [redacted] and [redacted] continued to render aid to SPC Lopez-Lopez, applying pressure to the wound, continuing to check for a pulse, and attempting to maintain an open airway.

(14) At 16:27:26, patrol “A21” arrived at Bldg 33026 as the first unit on scene, reporting a broken window and hearing screaming inside.

(15) At 16:27:52, patrol “506” arrived at Bldg 39018 and requested EMS “Code 4”. The DES dispatcher asked if the area was clear for EMS, to which “506” answered in the affirmative. The DES dispatcher then confirmed EMS was enroute to Bldg 39018.

(16) About 16:29, patrol “S8” called in “one down…no pulse” while inside the conference room of Bldg 39001.

(17) About 16:31, the Installation Operations Center (IOC) was notified of the incident by [redacted]. About the same time, “P2” requested EMS at the conference room to Bldg 39001, reporting unit members were conducting CPR.

(18) About 16:33, DES was notified of four wounded inside Bldg 40027. The DES dispatch log also reflects Fire Engine 1 was enroute.

(19) At 16:33:26, patrol “C21” requested guidance from DES dispatch whether to enter into Bldg 33026, and was told to establish a perimeter instead.

(20) At 16:34:10, EMS arrived at Bldg 39018 and one of the Soldiers rendering aid to SPC Lopez-Lopez briefed EMS on his status. Shortly after the arrival of EMS, SPC Lopez-Lopez showed no signs of life, and life-saving measures were ceased.

(21) At 16:34:31, the Watch Commander assumed incident command on scene at Bldg 39001.
(22) At 16:36:02, “S3” reported Military Police Investigators (MPI) and CID were enroute to Bldg 39001.

(23) At 16:36:15, while located inside Bldg 39001, “S8” stated, “I need EMS over here what are they doing”. DES dispatch stated EMS was staged and “waiting for Code 4, I have them enroute.”

(24) At 16:36:43, patrol “LID 617” reported, “We still need someone to clear 33026.”

(25) About 16:38, the IOC was ordered to activate the Emergency Operations Center (EOC) to Tier 3.

(26) At 16:38:45, patrol “H2” reported “four down” while at Bldg 40027. He corrected his report, noting one victim remaining on scene and two others already transported via POV. He added, “Patient is out, need EMS.”

(27) At 16:42:52, patrol “D21” reported they were still maintaining a cordon of Bldg 30026 and had not entered the building yet.

(28) About 16:44, SGT Owens was pronounced deceased.

(29) About 16:44, additional units were dispatched to Bldg 33026 to assist with entry and clearing.

(30) At 16:45:39, the Watch Commander ordered all Access Control Points (ACP) to post closed.

(31) About 16:46, the “Big Voice” began shelter-in-place announcements.

(32) At 16:47:12, “M2” reported units made entry into Bldg 33026.

(33) At 16:50:13, “C21” reported EMS was on scene at Bldg 40027, but “unable to locate the other victims.”

(34) About 16:53, EMS transported the wounded from Bldg 40027.

(35) About 16:59, the shelter-in-place announcement was sent out via email, desktop alerts, Banner and TAS. About 17:00, a mass notification was sent out via telephone hotline and Facebook. At the same time, the EOC was operating at full “Tier 3” capability.

(36) About 17:01, SFC Ferguson was pronounced deceased.

(37) About 17:27, SPC Lopez-Lopez’s vehicle was located in the parking lot adjacent to Bldg 39001.

(38) About 17:33, the Fort Hood PAO conducted its initial press release.
(39) About 17:44, Incident Command was established at the corner of 72nd Street and Support Avenue.

(40) About 18:19, the LRC was contacted for logistical support (e.g., food, water).

(41) About 18:29, the Public Affairs Officer (PAO) provided an update to their original press release.

(42) About 18:30, behavioral health providers were directed to provide support to the “[Mass Casualty] MASCAL event.” By 19:00, the Chief of the Department of Behavioral Health conducted a needs assessment.

(43) About 19:15, a Chaplain was on-scene to support first responders.

(44) About 20:39, security personnel cleared the last two buildings in the vicinity of the crime scene. About 20:45, “Big Voice” announced all-clear and gates to post were reopened.

(45) About 20:50, FAP sent a team to DES to engage in immediate Traumatic Event Management (TEM) for first responders.

(46) About 21:40, III Corps Commander, conducted the first press conference regarding the incident.

(47) About 22:10, the PAO provided another update to the original press release.

(48) About 22:16, III Corps G-2 reported a preliminary assessment of no evidence to suggest any foreign nexus.

(49) About 22:19, the Chief of FAP reported DBH would continue to provide services throughout the night.

(50) About 22:40, CID and Killeen PD notified of SPC Lopez-Lopez’s death and began to interview her.

(51) About 23:00, SSG Lazaney-Rodriguez and SPC Lopez-Lopez were pronounced deceased.55

55 As discussed in sub-para. (20) above, life-saving efforts on SPC Lopez-Lopez were ceased at about 16:34 hours, after he showed no signs of life. Texas state law requires a Medical Doctor or Justice of the Peace to make an official pronouncement of death, which occurred after SPC Lopez-Lopez’s remains were released from the crime scene and taken to the hospital. Under normal circumstances, next of kin are not notified until after an official pronouncement of death is made. In this case, however, both KPD and CID sought to interview as a potential witness on 2 April, and it was not advisable under the circumstances to delay her interview.
Part III – General Findings and Recommendations.

You are directed to investigate and document the facts and circumstances pertinent to the shooting incident at Fort Hood, Texas, on 2 April 2014. You will identify any systemic deficiencies or particular noncompliance with applicable laws, regulations, programs, policies, processes or procedures that may have affected the incident. You will also make recommendations as to corrective action that should be undertaken and document any innovative programs or “best” practices you identify during your investigation.56

Before addressing the specific tasks designated by Secretary McHugh in Part IV below, it is important to highlight a number of key findings. Some cover broad themes revealed over the course of the investigation, while others influenced our findings and recommendations in Part IV.

1. Factors Contributing to the Shooting Incident.

a. Background.

(1) On 2 April 2014, at approximately 1615, SPC Lopez-Lopez opened fire on Soldiers at the 49th Trans (MC) headquarters.57 During the next ten minutes, he shot at Soldiers at five additional locations before ultimately taking his own life after being confronted by Military Police.58 Altogether, SPC Lopez-Lopez killed four Soldiers (including himself), and wounded twelve.59 Another two Soldiers were injured during the shootings while trying to reach safety.60

(2) The most immediate question confronting the investigative team—why did the events of 2 April occur—is also perhaps the most difficult to answer with any measure of certainty. In September 2012, the Defense Science Board Task Force on Predicting Violent Behavior (DSB) concluded, “[T]here is no effective formula for predicting violent behavior with any degree of accuracy.”61 Accordingly, SPC Lopez-Lopez’s military

56 Exhibit A-1 IO Appointment Memo 10 April 2014, para. 3.a.

57 Witnesses gave varying reports on when the first shots were fired, but a number of witnesses present at the 49th Trans (MC) indicated that the shooting began at 1615. See Exhibit D-47 DA Form 2823 (b) (6) Statement 2 April 2014; Exhibit D-46 CID Sworn Statement of (b) (6) 2 April 2014; Exhibit D-42 CID Sworn Statement of (b) (6) 8 April 2014; Exhibit D-12 CID Sworn Statement of (b) (6) 7 April 2014.

58 See Narrative at Part II above.

59 Exhibit I-1 Casualty Report 2 April 2014.

60 A complete list of Soldiers killed, wounded, and otherwise injured during the shooting is at Appendix 5, Tab C.

61 Exhibit M-1 DoD Defense Science Board Task Force Report: Predicting Violent Behavior, 21 August 2012, at 2. (The DSB comprised a team of experts chartered and co-sponsored by the Under Secretary of Defense for Acquisition, Technology, and Logistics (USD(AT&L)) and the Under Secretary of Defense for Policy (USD(P)). The DSB charter included a focus on indicators leading to a wide range of destructive events such as workplace violence, terrorism, and suicide.)
career and extensive medical history offer no ready explanations or clear indicators of future violent behavior.

(a) SPC Lopez-Lopez’s service records show no history of violent acts or other misconduct. Checks of Army law enforcement databases and the NCIC revealed no derogatory information.

(b) During the course of his duties, Friends and relatives said he generally seemed happy and rarely became angry.

(c) Generally speaking, SPC Lopez-Lopez’s duty performance was unremarkable. Most of his leaders described him as an average Soldier at best, lacking in initiative and potential to serve in positions of leadership. Although he did receive several awards during his time in the Army, it is notable that upon his departure from Fort Bliss, SPC Lopez-Lopez received only an Army Certificate of Achievement, an award below what we would normally expect for a Soldier of his rank and time in service.

b. Discussion.

(1) Although there were no clear warning signs, the evidence reveals many potential contributing factors to the shooting, which had they not occurred, might have led to a different result. Identifying many of these factors requires a degree of conjecture, as the one witness with the most information on the subject, SPC Lopez-
Lopez, is deceased. Rather than focusing on a single precipitating event, we can instead establish certain facts with confidence, which, taken together, led to the shooting.

(2) The evidence indicates SPC Lopez-Lopez experienced significant and increasing stress in the days, weeks, and months leading up to the shooting. These stressors fall into several interrelated categories: medical/behavioral health, financial, personal, spiritual, and career.

(a) Health. In the year prior to the incident, SPC Lopez-Lopez sought and received treatment for a number of medical and behavioral health-related issues. In July 2013, he received a permanent profile which led to his reclassification from Infantryman (11B) to Motor Transport Operator (88M). During this period, he was also treated for .

(b) Financial. SPC Lopez-Lopez was also under significant financial strain at the time of the incident. Allotments for loan repayments and child support accounted for roughly half of his monthly pay. His text messages show his money concerns continued up to the morning of the shooting.

(c) Personal. SPC Lopez-Lopez faced personal setbacks in the months prior to the shooting, including the death of his grandfather in October 2013 and the death of his mother in November 2013. His wife and others who knew him well said his mother’s death had a profound effect on his personality. Further, the evidence shows SPC Lopez-Lopez was a frequent participant in social media, using the Facebook username “Ivan Slipknot.” He also maintained a second Facebook persona—unbeknownst to many close to him—under the name “Anthony Drako,” which he apparently used to meet and carry on relationships with several women. Although

---

68 See Part IV, para. 4 for a discussion of SPC Lopez-Lopez’s medical treatment.


70 Exhibit H-1 Lopez-Lopez AHLTA, at 93, 236, 109, 140, 181, 214, and 67, 76, 243, 254.

71 Exhibit G-3 Lopez-Lopez LES.

72 Exhibit N-1 Consolidated Facebook and SMS Messages (translated).

73 Exhibit E-22 DA Form 2823 Statement 7 May 2014.

74 Exhibit G-4 Lopez-Lopez Red Cross Message 15 November 2013.

75 See statements from (Exhibit E-7 MFR Telephone Interview 27 May 2014); (Exhibit E-14 MFR Telephone Interview 15 May 2014); (E-22 DA Form 2823 Statement 7 May 2014); and (Exhibit B-28 DA Form 2823 Statement 30 April 2014) (“When she passed away Lopez was kind of depressed. I knew Lopez for almost two years. The only change I ever noticed in him was when his mom died.”).

76 Exhibit N-1 Consolidated Facebook and SMS Messages (translated). Fluent Spanish speakers on the investigation team translated postings on SPC Lopez-Lopez’s Facebook pages, as well as text messages to and from SPC Lopez-
there is no proof SPC Lopez-Lopez met these women in person, it is reasonable to conclude that concealing these relationships from his family was a source of additional stress.

(d) Spiritual. From his statements through social media and his responses to questions on administrative forms concerning his religious affiliation, it appears SPC Lopez-Lopez suffered from an existential or “spiritual” crisis. This crisis may have been precipitated or aggravated by the deaths of his grandfather and mother, and may have led him to change his religious preference to “atheist.”

(e) Career. SPC Lopez-Lopez’s professional life was also a source of considerable stress. His leaders at Fort Bliss repeatedly counseled him for non-promotion, and effectively precluded any possibility of career advancement in the Infantry. At the time of the incident, he was in the midst of completing his first PCS move, which also involved an MOS reclassification.

(3) As a husband and father, SPC Lopez-Lopez was frustrated by the difficulties he encountered in bringing his family to his new duty station. In particular, the handling of his PTDY request caused considerable stress. As noted by his squad leader, the request was returned for correction at least three times. It is significant that the first victims SPC Lopez-Lopez shot were directly involved in the processing of his PTDY request. It is also significant that the shooting immediately followed a direct, personal confrontation, during which SPC Lopez-Lopez accused the S-1 NCOIC of making light

---

Lopez, from Spanish to English. See also, “Fort Hood Shooter Ivan Lopez Had Tica Girlfriend,” Today Costa Rica, 4 April 2014, at http://todaycostarica.com/fort-hood-shooter-ivan-lopez-had-tica-girlfriend/ (reporting SPC Lopez-Lopez met via Facebook and that they planned to marry).


78 Exhibit G-5 Lopez-Lopez Unit Personnel Records 16 April 2014, at 3 (154th CTC Personal Data Sheet, listing religious preference as “atheist”).

79 Exhibit G-6 Lopez-Lopez Counseling Forms 1 February 2012-7 October 2013, at S-14.


81 Exhibit E-14 MFR Telephone Interview 15 May 2014.

82 Exhibit D-81 DA Form 2823 Statement 22 April 2014; Exhibit D-82 CID Sworn Statement of CPL 3 April 2014.
of his situation. In hindsight, the handling of his PTDY request appears to be the culminating stressor that led to the shooting.

c. Findings.

(1) Contributing Factors. We cannot reasonably conclude that any single event or stressor, in isolation, was the cause of the shooting. Nor does the evidence show that the absence of any single stressor would have prevented the shooting. From the available evidence, we find that the cumulative effect of these stressors overwhelmed SPC Lopez-Lopez’s ability to effectively cope with them, and led to his irrational, violent outburst.

(a) It is clear that the PTDY request could have been handled more efficiently. But we do not find—nor do we intend to create the perception—that personnel in the S-1 shop are to blame for the shooting. Likewise, we find that SPC Lopez-Lopez’s leaders at Fort Bliss and Fort Hood might have done more to ease his transition to Fort Hood, but they tried in good faith to accommodate his wishes and were hampered by a lack of awareness of the stressors affecting him, as discussed below.

(b) We conclude SPC Lopez-Lopez’s own decisions and actions were the proximate cause. He chose to bring onto post and into the Battalion S-1 shop a privately owned weapon, which he had not registered with Fort Hood DES. He chose to open fire on the Soldiers he believed were not supporting his PTDY request. He chose to get into his car and drive to the motor pool and the 1st Medical Brigade headquarters, shooting at Soldiers enroute and at both locations.

(c) We find the S-1 personnel were correct in their understanding that SPC Lopez-Lopez did not qualify for PTDY at the time of the shooting, since he had already secured housing in Killeen and moved his household goods into the apartment. No other Soldier could reasonably have foreseen that he would react as he did to the denial of his PTDY request, and none of them had the opportunity to stop him. He alone had the opportunity to avoid the shooting, and he chose not to do so.

(d) Finally, although SPC Lopez-Lopez might not have opened fire had the request been granted—even though it was not authorized—we cannot conclude he would not have reacted violently at some other time.

---

83 Exhibit D-42 CID Sworn Statement of [b] (6) 8 April 2014; Exhibit D-2 CID Sworn Statement of [b] (6) 7 April 2014.

84 Exhibit D-81 DA Form 2823 [b] (6) Statement 22 April 2014; Exhibit D-56 DA Form 2823 [b] (6) Statement 22 April 2014; Exhibit D-23 DA Form 2823 [b] (6) Statement 23 April 2014; Exhibit D-100 DA Form 2823 [b] (6) Statement 23 April 2014; Exhibit D-3 DA Form 2823 [b] (6) Statement 23 April 2014.

85 Exhibit B-16 DA Form 2823 [b] (6) Statement 29 April 2014; Exhibit B-49 DA Form 2823 [b] (6) Statement 29 April 2014; Exhibit B-4 DA Form 2823 [b] (6) Statement 29 April 2014; Exhibit D-81 DA Form 2823 [b] (6) Statement 22 April 2014.
(2) Non-Contributing Factors.

(a) We find no indication in his medical and personnel records suggesting SPC Lopez-Lopez was likely to commit a violent act.\(^{86}\) Likewise, we do not find sufficient evidence that he planned the 2 April shootings before that day.

(b) As discussed in Part IV, para. 4, we find that SPC Lopez-Lopez was not under the influence of psychotropic drugs at the time of the shooting, nor was the shooting a result of a drug interaction.

(c) A number of witnesses interviewed during this investigation mentioned that Soldiers were “smoked” (i.e., improperly subjected to physical “corrective training”) while assigned to 4-6 Infantry at Fort Bliss.\(^{87}\) Aside from one instance in Kuwait in 2011, however, these allegations did not appear to involve SPC Lopez-Lopez.\(^{88}\) Further, we found no evidence of Soldiers being “smoked” in the 49th Trans (MC) at Fort Hood. Thus, we conclude that these allegations did not contribute to the shootings on 2 April.\(^{89}\)

(d) The investigation revealed evidence suggesting SPC Lopez-Lopez was uncomfortable around or biased against African Americans.\(^{90}\) Although this may have affected the intensity of his reaction to the confrontation with SFC, we find insufficient evidence to conclude the shooting was racially motivated.\(^{91}\)

d. Recommendations. None.

\(^{86}\) See generally, Exhibit H-1 Lopez-Lopez AHLTA and Exhibit G-10 Lopez-Lopez AMHRR.

\(^{87}\) See Exhibit B-29 DA Form 2823 Statement 30 April 2014; Exhibit B-2 DA Form 2823 Statement 30 April 2014; Exhibit B-55 DA Form 2823 Statement 29 April 2014; Exhibit B-6 DA Form 2823 Statement 30 April 2014; and Exhibit B-67 DA Form 2823 Statement 1 May 2014. We note that some of these statements also indicate that the practice has ceased and that action was taken against Soldiers who conducted the “smoke sessions.”

\(^{88}\) See Exhibit B-29 DA Form 2823 Statement 30 April 2014 (noting that SPC Lopez-Lopez was smoked for allegedly urinating on blast barrier while the unit was in Kuwait, before entering Iraq).

\(^{89}\) After determining that these allegations did not affect SPC Lopez-Lopez’s actions on 2 April, we chose not to pursue them further as part of this investigation, as doing so would unnecessarily broaden the scope. Instead, we recommend that FORSCOM determine whether the allegations have merit, and to take appropriate action if none has been taken.

\(^{90}\) Exhibit N-1 Consolidated Facebook and SMS Messages (translated),) 9 June 2013-2 April 2014, 2 April 2014 text to “I miss [Missouri]. Too many black people here. Whitepuertorrican Power ‘\(\text{m}/\)’”, 26 February 2014 Facebook posting (“Very ghetto wow almost all of them are black dudes with hip hop supremacy. This causes me to make more appointments in”) Exhibit E-6 CID AIR detailing the interview of 2 April 2014 (noting that an “African American E-7” told SPC Lopez-Lopez his PTDY was disapproved).

\(^{91}\) Although were black, many others he shot at were not. SFC Ferguson, SGT Owens, and were white; SSG Lazaney-Rodriguez, were of Hispanic origin. See, Exhibit N-13 CID Status Report 16 April 2014 (stating race of victims).
2. **Soldier Risk Management.**

   a. **Background.** SPC Lopez-Lopez’s chain of command at Fort Bliss never identified him as high-risk. At Fort Hood, he was labeled as high-risk only because he was within 90 days of arrival. Yet, this investigation identified numerous stressors affecting SPC Lopez-Lopez, many of which were unknown to his leaders and medical providers. At both installations, his leaders faced several challenges, including information flow, leader turbulence, and a lack of interaction time, that prevented them from discovering the sources of SPC Lopez-Lopez’s stress and limited their attempts to mitigate his stress.

   b. **Discussion.**

      (1) **Barriers to Information Flow.** Leaders often face obstacles in gaining information that might be helpful in assessing and mitigating risk to their Soldiers.

         (a) A significant barrier is often the Soldier himself. Since risk assessment tools depend on self-reporting, they are subject to the Soldier’s willingness to identify risk factors accurately. For example, the Soldier-Leader Risk Reduction Tool (SLRRT) relies heavily on self-reporting, so it is difficult to use it as a measure of the Soldier’s behavior or intentions. Moreover, in many instances, leaders are often not trained to administer the SLRRT or how to address issues that arise from the SLRRT. Likewise, medical diagnostic tools like the Post-Deployment Health Assessment (PDHA) are dependent on accurate self-reporting.

         (b) A significant number of witnesses described SPC Lopez-Lopez as having a language barrier. Some witnesses believed it was genuine, while others found his English language skills were adequate, but they believed he used the alleged language barrier to avoid work. It is true he was discharged from the PRARNG because he failed to complete the Pre-BCT English Language Course, and he took college courses while at Fort Bliss in an apparent attempt to improve his English ability. Many witnesses said he tended to associate primarily with other Soldiers who spoke Spanish, and he did not enjoy speaking to his NCO leaders. Also, reported that he accompanied SPC Lopez-Lopez to meetings with his platoon sergeants and had to

---

92 Exhibit D-56 DA Form 2823 (b) (6) Statement 22 April 2014; Exhibit D-3 DA Form 2823 (b) (6) Statement 23 April 2014.

93 Information sharing is discussed further in Part IV, paras. 7.b. and 8.

94 Exhibit D-56 DA Form 2823 (b) (6) Statement 22 April 2014; Exhibit D-3 DA Form 2823 (b) (6) Statement 23 April 2014.

95 See, e.g., Exhibit B-13 DA Form 2823 (b) (6) Statement 12 May 2014.

96 G-7 Lopez-Lopez File Assessment 3 April 2014.

97 Exhibit E-7 MFR (b) (6) Telephone Interview 21 May 2014.

98 See, e.g., Exhibit E-13 DA Form 2823 (b) (6) Statement 8 May 2014.
translate for him.\textsuperscript{99} In any case, SPC Lopez-Lopez’s language ability or unwillingness to communicate with his non-Spanish speaking leaders limited their ability to gather useful information from him.

\(\text{(c) A commonly cited statutory barrier is the Health Insurance Portability and Accountability Act of 1996 (HIPAA), which protects against the unauthorized disclosure of a patient’s medical information.}\textsuperscript{100} \) In practice, the actual barrier created by the HIPAA is often overshadowed by the perception that it prohibits more disclosures than it actually does. Our investigation revealed instances in which leaders believed the HIPAA prevented them from receiving information they were entitled to receive.\textsuperscript{101}

\(\text{(d) A second statutory barrier prohibits collecting or maintaining information about weapons owned by Soldiers who reside off-post.}\textsuperscript{102} \) This information may be helpful to commanders in assessing the overall risk to Soldiers under their command.

\(\text{(e) The impact of these barriers is magnified when a Soldier PCSs to another installation. Leaders at gaining units seldom receive any information on incoming Soldiers beyond what is in their ERB and other personnel records.}\)

\(\text{(f) Like the PDHA, the SLRRT is an evolutionary process. It takes several engagements over time to really understand the subject, so it may require several months to reveal matters that might be of concern to medical personnel or the Soldier’s chain of command. This process relies on a continuity of leadership that can be a challenge to maintain in the face of high OPTEMPO and personnel turnover.}\)

\section*{(2) Unit and Leadership Turbulence.}

\(\text{(a) As briefly illustrated below, a leader’s effectiveness in identifying and mitigating risk may be limited by several conditions. Unit OPTEMPO and mission requirements, internal leader turnover and shortages, and external task organization changes have an impact on leader effectiveness.}\)

\(\text{(b) During SPC Lopez-Lopez’s time at Bliss, 4-6 Infantry deployed to Iraq, redeployed, and reset. Many of the battalion’s commissioned and non-commissioned leaders were tasked for twelve months to perform a Security Force Assistance Team (SFAT) mission in Afghanistan, to include a three-month train-up. Immediately upon redeployment, the unit was assigned Red Cycle taskings for almost nine months, during which unit cohesion and leader continuity were strained by continually changing, short-duration missions. The net result of these conditions was that SPC Lopez-Lopez}\)

\begin{flushleft}
\textsuperscript{99} \text{Exhibit E-13 DA Form 2823 (b) (6) Statement 8 May 2014.}\n\textsuperscript{100} \text{Exhibit L-136 Public Law 104-191, 110 Stat. 1936, enacted 21 August 1996.}\n\textsuperscript{101} \text{Exhibit K-9 HIPAA Briefing for Commanders 8 May 2014; Exhibit D-3 DA Form 2823 (b) (6) Statement 23 April 2014; Exhibit D-23 DA Form 2823 (b) (6) Statement 23 April 2014; Exhibit D-100 DA Form 2823 (b) Statement 23 April 2014; Exhibit D-56 DA Form 2823 (b) (6) Statement 22 April 2014.}\n\textsuperscript{102} \text{Exhibit L-119 National Defense Authorization Act for Fiscal Year 2013.}\n\end{flushleft}
experienced frequent leader turnover during his three years assigned to the battalion, leading up to the time of his departure for AIT.

(c) During the nearly two months SPC Lopez-Lopez was at Fort Hood, he spent fourteen days in-processing at the Copeland Soldier Service Center before reporting to the 154th CTC. Although SPC Lopez-Lopez generally had stable first-line leadership during the short time he was in the 154th CTC, his team leader (and acting squad leader), [redacted], was frequently on mission due to a Fort Hood policy requiring an NCO in the cab of each vehicle. [redacted], who was the acting company first sergeant for about ten days leading up to the shooting, was also serving as rear detachment first sergeant for the 297th ICTC. The 154th CTC also had a history of task organization changes, which may have created uncertainty in how SPC Lopez-Lopez’s PTDY request was handled. Several witnesses stated the 49th Trans (MC) had a policy preventing newly assigned Soldiers from taking leave or PTDY during their first fourteen days in the unit, although no such policy existed. Finally, the 154th CTC suffered from a shortage of 88M skill level 20s (32%) due, in part, to the requirement to fill other deploying units.

(3) Leader Personal Interaction.

(a) With no reliable system or indicators to identify violent behavior in advance, leaders require frequent contact with their Soldiers to assess and mitigate risk. As a general observation, many junior leaders we interviewed said they did not have enough time to learn about and develop their Soldiers.

(b) At Fort Bliss, SPC Lopez-Lopez’s leaders were experienced and involved. Although their effectiveness was strained by competing mission requirements, they generally provided regular, effective support to SPC Lopez-Lopez during his reclassification and reassignment. Of note, they took extra steps to accommodate...
his wishes regarding emergency leave for his mother’s funeral.\textsuperscript{109} After SPC Lopez-Lopez received the Red Cross Message on Friday, 15 November 2013, they supported his AER loan request and offered to put him on leave right away; however, SPC Lopez-Lopez said he preferred to wait until the following week to begin his leave.\textsuperscript{110} The command offered to delay his AIT to accommodate his travel to Puerto Rico, but he again declined.\textsuperscript{111} Although media reports implied that the command allowed him less than forty-eight hours to attend the funeral,\textsuperscript{112} the evidence shows he took six days of emergency leave.\textsuperscript{113} While SPC Lopez-Lopez was on emergency leave, his team leader out-processed SPC Lopez-Lopez from his unit and Fort Bliss so that he could depart for AIT immediately upon his return.

\textbf{(c)} At Fort Hood, SPC Lopez-Lopez’s leaders were also caring and experienced, but their impact was undermined by limited contact time and lapses in communication about his personal circumstances. SPC Lopez-Lopez filled out his SLRRT form with\textsuperscript{(b) (6)} within two weeks of reporting to the 154th CTC; however,\textsuperscript{(b) (6)} did not complete the form by marking SPC Lopez-Lopez’s risk level, and\textsuperscript{(b) (6)} did not note the deficiency. Further, it is not clear that the SLRRT was ever reviewed by a higher authority. Even though SPC Lopez-Lopez probably would not have registered as a high-risk Soldier based on the SLRRT results, the way the SLRRT was handled indicates a breakdown in leader training and oversight.

\textbf{(d)} The handling of SPC Lopez-Lopez’s PTDY request also betrays a lack of information sharing. It was clear his leaders wanted to help him get his household settled, as shown by their willingness to give him a four-day pass to bring his family and household goods to Fort Hood, but there was a gap in communication among them.

\begin{itemize}
\item \textsuperscript{109} Exhibit B-4 DA Form 2823 \textsuperscript{(b) (6)} Statement 29 April 2014; Exhibit B-16 DA Form 2823 \textsuperscript{(b) (6)} Statement 29 April 2014.
\item \textsuperscript{110} Exhibit B-40 DA Form 2823 \textsuperscript{(b) (6)} Statement 30 April 2014.
\item \textsuperscript{111} Exhibit B-4 DA Form 2823 \textsuperscript{(b) (6)} Statement 29 April 2014.
\item \textsuperscript{112} See, e.g., “Motive sought after Ft. Hood attack,” Los Angeles Times, 4 April 2014, available at http://articles.latimes.com/2014/apr/04/nation/la-na-fort-hood-shooter-profile-20140404 ("He was extremely upset that he wasn't able to spend more time with his mom," family spokesman Glidden Lopez Torres said. Lopez arrived home five days after his mother’s death and couldn't even stay two full days, he said"); “Ft. Hood Gunman 'Angry at Short Bereavement Leave',' Newsmax.com, 4 April 2014 available at http://www.newsmax.com/Newsfront/Lopez-bereavement-mother-funeral/2014/04/03/id/563618 (according to Edgardo Arlequin, the mayor of SPC Lopez-Lopez’s hometown of Guayanilla, "That was one of the reasons why he was very upset. . . They only gave him 24 hours.").
\item \textsuperscript{113} Exhibit G-20 DA-31 Lopez-Lopez Leave Form 18 November 2013; Exhibit G-17 Lopez-Lopez AER Loan Packet November 2013. (Although we could not account for all of SPC Lopez-Lopez’s activities while on emergency leave in Puerto Rico, his text message traffic indicates he arrived on 20 November 2013, attended his mother’s funeral Mass on 22 November, and departed the island on 25 November. Exhibit N-1 Consolidated Facebook and SMS Messages (translated.) 9 June 2013-2 April 2014. Also, images on his cell phone show pictures taken with his oldest daughter and son, who live in Puerto Rico, between 22 and 24 November 2013. Exhibit N-15 MFR - SPC Lopez-Lopez Cell Phone Photos).
\end{itemize}
The acting first sergeant was unaware of the issues with the request until the day of the shooting and did not know her commander had personally taken it to the battalion commander for approval. Likewise, the battalion CSM did not know her commander had already approved the request. Finally, the S-1 NCOIC did not raise the matter with the battalion S-1 but instead sought approval from the CSM, although the battalion commander had signed it. So despite their good intentions, SPC Lopez-Lopez’s leaders and others in the battalion did not share information about his PTDY effectively.

c. Findings.

(1) In sum, SPC Lopez-Lopez’s leaders at Fort Bliss and Fort Hood faced several obstacles in information flow that prevented them from gaining full awareness of the stressors affecting him. We find their effectiveness was limited in part by high OPTEMPO, personnel shortages, unit policies, and frequent leader turnover.

(2) The net result of these challenges was limited interaction time between SPC Lopez-Lopez and his leaders, particularly at Fort Hood, where they suffered from lapses in communication and a lack of information about his personal situation. Even so, we find that SPC Lopez-Lopez’s leaders were generally caring, experienced, and involved, and they were effective in helping him handle a number of issues related to his PCS from Fort Bliss to Fort Hood. Specifically, we find SPC Lopez-Lopez did take six days of emergency leave to attend his mother’s funeral, despite media reports to the contrary.

(3) Furthermore, SPC Lopez-Lopez’s weak language skills, whether genuine or not, contributed to his leaders’ limited understanding of his personal situation, both at Fort Hood and at Fort Bliss.

d. Recommendations.

(1) Continue with implementation of the Commander’s Risk Reduction Dashboard (CRRD), as discussed in Part IV, paras. 1 and 7 below. Although the CRRD would not have identified SPC Lopez-Lopez as a high-risk Soldier, it will provide more information to commanders to assess risk to their Soldiers.

(2) Evaluate ways to improve training and time available for leaders to identify and manage Soldier risk. Specifically, consider as a best practice the 3 ABCT / 3ID’s “Sledgehammer Counseling Guide,” which we find to be a thoughtful, comprehensive

---

114 Exhibit D-3 DA Form 2823 (b) (6) Statement 23 April 2014.
115 Exhibit D-43 DA Form 2823 (b) (6) Statement 22 April 2014, (even though (b) (6) signed the request, (b) (6) told SPC Lopez-Lopez he was not technically authorized PTDY, but if the CSM approved the request, then it ought to be okay).
116 Exhibit F-10 MFR (b) (6) Telephone Interview 9 JUN 14.
program to ensure leaders have the time and tools they need to counsel their Soldiers effectively.

(3) Evaluate the need to issue additional clarifying guidance on HIPAA restrictions and to provide refresher training for leaders and medical providers on the HIPAA.\(^{118}\)

(4) Evaluate procedures to improve collaboration and information sharing between commanders and behavioral health providers. Consider as a best practice the Schofield Barracks Brigade Nurse Case Manager (NCM) Collaboration Meeting.\(^{119}\)

3. **Reliability of SPC Lopez-Lopez’s Statements to Witnesses.**

   a. **Background.** See Part II above.

   b. **Discussion.** SPC Lopez-Lopez’s personal circumstances and mental state were of significant interest to this investigation. In conversations with his wife \((b) (6)\), he discussed, among other issues, his deployment to Iraq, \((b) (6)\) \(\cdots\) \(\cdots\) \(\cdots\) He also made extensive comments to friends and family members in text messages, on Facebook, and on the telephone.\(^{120}\) In these comments, SPC Lopez-Lopez frequently discussed his personal situation, highlighting his apparent frustrations with his leaders and with his medical providers. Further, many of his \((b) (6)\) \(\cdots\) \(\cdots\) \(\cdots\) were based primarily on his statements to medical providers. Finally, what SPC Lopez-Lopez told (and did not tell) his leaders determined how they assessed his issues and tried to help him address them. Thus, SPC Lopez-Lopez’s credibility and the reliability of his statements are of central importance to this investigation.

   c. **Findings.**

      (1) During the investigation, we discovered several reasons to be cautious about the weight we should give SPC Lopez-Lopez’s statements to witnesses, text messages, and Facebook postings. We found many of them to be, at best, inconsistent or incomplete, and at worst, misleading or deceptive. As a result, we find his statements to others are unreliable in many respects, and we are hesitant to take them at face value without corroboration.

      (2) The evidence shows SPC Lopez-Lopez was not forthcoming in his discussions with his chain of command concerning his personal and medical issues. He did not tell his Fort Hood supervisors about the burglary of his apartment until the day of the shooting. Likewise, he did not tell them about his cardiac events or his cardiology

---

\(^{118}\) Exhibit L-110 MEDCOM Policy Memo 12-062 - Release of PHI to Unit Command Officials 24 August 2012.


\(^{120}\) Exhibit E-6 MFR \((b) (6)\) Telephone Interview 21 May 2014.

\(^{121}\) Exhibit N-1 Consolidated Facebook and SMS Messages (translated).
appointments at Fort Bliss and Fort Hood. At best, he omitted relevant facts from his SF 86 pertaining to delinquent debt.\textsuperscript{122}

(3) Further, we find that SPC Lopez-Lopez was misleading or deceptive on a number of occasions.

(a) He maintained a second Facebook profile under the name “Anthony Drako,” which was not known to many of his friends and family members. On this profile, he claimed to be an Army sniper who had traveled to the Central African Republic, among other places.\textsuperscript{123} Apparently, SPC Lopez-Lopez used this persona to meet women, one of whom claimed on her Facebook page to be “married” to him.\textsuperscript{124}

(b) During his in-processing to 88M AIT at Fort Leonard Wood, SPC Lopez-Lopez identified himself as single, not married.\textsuperscript{125}

(c) When initially requesting PTDY at Fort Hood, SPC Lopez-Lopez did not mention that his wife and daughter were living with her mother in Odessa, Texas, implying that they were still in El Paso with his household goods, which were then in storage.\textsuperscript{126} On 2 April, he continued to request PTDY, claiming to S-1 personnel that his apartment had been broken into, so he needed to find another place to live, and claiming to his first sergeant that he had to move his belongings from storage into his new apartment.\textsuperscript{127} Neither of these justifications was true, as he had already moved his family and belongings into his second apartment in Killeen more than a month after his apartment was burglarized on 28 February 2014.

(d) SPC Lopez-Lopez told his family and acquaintances in Puerto Rico that he was given less than forty-eight hours to attend his mother’s funeral, which was not true.\textsuperscript{128}

\textsuperscript{122} Exhibit G-10 Lopez-Lopez AMHRR, at 163.

\textsuperscript{123} Exhibit N-32 Anthony Drako Facebook Profile

\textsuperscript{124} Exhibit N-33 Anthony Drako Facebook. During the investigation, we found no evidence to corroborate Ms. [redacted] claim on her Facebook page that she was married to SPC Lopez-Lopez.

\textsuperscript{125} Exhibit G-23 Lopez-Lopez AIT Inprocessing Form.

\textsuperscript{126} See Exhibit D-82 CID Sworn Statement of [redacted] 3 April 2014 (stating SPC Lopez-Lopez had left his family in El Paso and that he listed an El Paso address on his PTDY request, although his family was then living in Odessa, Texas with his mother-in-law) and Exhibit D-3 DA Form 2823 Statement 23 April 2014 (stating SPC Lopez-Lopez took a four-day pass to move his family from El Paso to Fort Hood).

\textsuperscript{127} See Exhibit D-43 DA Form 2823 Statement 22 April 2014 and Exhibit D-42 CID Sworn Statement of [redacted] 8 April 2014 (stating SPC Lopez-Lopez said he lived in a ghetto, his residence was broken into, and needed to find another place to live) and Exhibit D-2 CID Sworn Statement of [redacted] 7 April 2014 (stating SPC Lopez-Lopez said he needed to move his belongings out of storage and into his new apartment).

\textsuperscript{128} See discussion at para. 2.b(3)(b) above.
(e) In SPC Lopez-Lopez told his family and friends about an IED attack on his convoy as his unit was departing Iraq in December 2011. His account was contradicted by the Soldiers who were part of the convoy.  

(f) Although there is not sufficient evidence to conclude SPC Lopez-Lopez was faking his there are several indications that he was attempting to build justifications to receive VA disability. Further, there is no evidence that he ever received (as he claimed), and his underlying claims are not supported by the available evidence.  

(g) Taken together, these findings strongly caution against relying on SPC Lopez-Lopez’s statements without corroboration.  

4. **Prediction vs. Prevention.**  

    a. **Background.**  

    (1) As discussed in Part IV, paras. 1 and 3, there are no systems in the Army inventory capable of identifying all forms of violent behavior, and the Army is analyzing how it will implement the recently published Department of Defense Instruction (DoDI) 1438.06. Existing programs focus on insider threats and high-risk behavior.  

    (2) These existing systems may not be capable of identifying all individuals likely to commit violence because there are not any defined or measurable indicators. The DSB concluded that no single screening method, checklist, or list of behavioral indicators/criteria can reliably predict violent behavior.  

    (3) While leaders do not have the tools to predict another incident like the 2 April shooting, they can take steps to prevent or mitigate them. The Army does have means for leaders to identify their Soldiers’ stressors and resources to help them mitigate and manage stress before it overwhelms them.  

---

129 See Part IV, para. 4.  
130 See Part IV, para. 4.  
131 Exhibit L-42 DODI 1438.06, DOD Workplace Violence Prevention and Response Policy 16 January 2014  
132 Exhibit M-1 DoD Defense Science Board Task Force Report: Predicting Violent Behavior 21 August 2012, at 60. (Noting that from a scientific perspective, the network, data, and analysis capability required to detect (with low false-positive/negative) rare events with few, if any, technologically perceivable precursors, does not exist).  
133 Exhibit M-1 DoD Defense Science Board Task Force Report: Predicting Violent Behavior 21 August 2012, at 60 (“[T]he Task Force found that the goal of “predicting violent behavior” casts an extremely wide net in an effort to detect the precursors of exceedingly rare events. A more appropriate and effective goal for enhancing safety throughout the DoD community would be preventing targeted violence.”) (Emphasis added).
Report of Investigation into the 2 April 2014 Shooting Incident at Fort Hood

(4) It is an unfortunate reality that even most engaged and aware leaders may not be able to prevent all incidents of violence in their units. When an incident does occur, however, installations will need highly effective response capabilities to mitigate consequences of the event.

b. Discussion. In the absence of a system capable of identifying SPC Lopez-Lopez as a threat, and because the unit was unaware and unable to address the variety of stressors in SPC Lopez-Lopez’s life, Fort Hood was not able to prevent the shooting. Fort Hood did, however, respond immediately. As discussed in detail in Part IV, paras. 8-10, the response was complete and generally met or exceeded the standards published in DoD and Army regulations and policies.

c. Findings.

(1) See Findings at Part IV, para. 3, pertaining to expanding funding to enhance insider threat prediction capabilities currently in place.

(2) See Findings at Part IV, paras. 8-10 pertaining to Physical Security, Emergency Response, and Care.

d. Recommendations.

(1) See Recommendations at Part IV, para. 1, for tools to help leaders and commanders better address high-risk Soldier management at the unit and installation level.134

(2) See Recommendations at Part IV, para. 3, regarding information sharing and continuing Army programs focused on identifying Soldiers who may pose a threat to themselves or others.

(3) See Recommendations at Part IV, paras. 8-10, regarding privately owned weapons policy, Active Shooter Response training, designating a force modernization proponent for the 911 Domain, developing protocols to streamline Mass Warning and Notification (MWN), and Fort Hood’s use of Family Care Teams (FCTs), Physical Security, Emergency Response, and Care.

134 See Recommendations 1(d)(2), (3) and (6).
Part IV – Findings and Recommendations on Tasks Specified by SECARMY

The following paragraphs (1 through 11) correspond to the eleven tasks specified in Secretary McHugh’s appointment memo. The twelfth task was assigned verbally during my meeting with Secretary McHugh on 10 April 2014.

1. Implementation of Prior Recommendations.

Assess whether the approved recommendations from “Report of the DoD Independent Review, Protecting the Force: Lessons from Fort Hood, January 2010”; “Fort Hood Army Internal Review Team Report, Protecting our Army Community at Home & Abroad, August 4, 2010”; and “Secretary of Defense Memorandum, subject: Final Recommendations of Fort Hood Follow-on Review, August 18, 2010” were implemented as directed, and the adequacy of the implementation efforts at Fort Hood, Texas. If any of these recommendations were not implemented, in whole or in part, determine why the Army did not implement them, and assess whether such action or inaction materially affected the shooting incident at Fort Hood, Texas, on 2 April 2014, or the response to it.

a. Background.

(1) In the wake of the 2009 Fort Hood shooting, the Secretary of Defense (SECDEF) appointed the DoD Independent Review (DoDIR) to investigate the shooting. Following its examination, the DoDIR made seventy-nine recommendations to address shortcomings it found. These recommendations were grouped into four categories: Information Sharing; Force Protection; Emergency Response & Mass Casualty; and Support to Army Healthcare Providers. The SECDEF then directed the Services to assess how to implement the DoDIR’s recommendations. The Army Internal Review Team (AIRT) determined that seventy-eight of those recommendations applied at the Service level. Subsequently, the Army Protection Program (APP) determined that one task (2.13.A) could not be implemented due to constraints in information-sharing between civilian behavioral healthcare providers and the military.

(2) The Army established the management structure to address lessons learned from the 2009 Fort Hood shooting and subsequent incidents. The Army Protection Program (APP) provides Assistant Secretary of the Army for Manpower and Reserve Affairs (ASA(M&RA))-level oversight and governance for a series of individual programs...
that range from anti-terrorism to emergency management to information assurance.\textsuperscript{140} The G-34 Protection Directorate serves as the central coordinating element for the G-3/5/7. The G-34 also coordinates a HQDA-level Protection Assessment of all Army Commands (ACOMs), Army Service Component Commands (ASCCs), Direct Reporting Units (DRUs), and the Army National Guard on a triennial basis. These assessments utilize a published set of benchmark standards derived from policy and tailored to the command.

(3) At the request of the DCS, G-3/5/7, the Army Audit Agency (AAA) conducted an audit of Army Actions Taken to Implement Fort Hood Recommendations.\textsuperscript{141} The AAA completed its audit at the HQDA level and is in the process of refining its results at the installation level (Project A-2013-MTP-0224.000).\textsuperscript{142}

b. Discussion.

(1) In addressing this task, the investigation team first looked at current implementation of the seventy-seven recommendations from the 2009 Fort Hood AIRT report.\textsuperscript{143} Next, we narrowed the scope of our inquiry to those recommendations relevant to the shooting on 2 April 2014.\textsuperscript{144} Finally, we visited Fort Hood from 21-24 April 2014 to interview key individuals and to assess the efficacy of Fort Hood’s implementation of the relevant AIRT recommendations. During this visit, Fort Hood provided a detailed self-assessment of its AIRT implementation as well as an assessment of its internal AAR from the 2009 shooting.\textsuperscript{145} We considered the Fort Hood assessment in arriving at our findings and recommendations.

(a) At the installation level, eleven partially implemented recommendations were relevant to the shooting incident on Fort Hood on 2 April 2014.\textsuperscript{146}

\textsuperscript{140} Exhibit L-105 Charter – Army Protection Program Board of Directors 31 July 2013.
\textsuperscript{142} Exhibit K-1 USD VCSA Brief A-2013-MTP-0224.000 28 May 2014; 10 U.S. Code § 2801. The term “military installation” means a base, camp, post, station, yard, center, or other activity under the jurisdiction of the Secretary of a military department or, in the case of an activity in a foreign country, under the operational control of the Secretary of a military department or the Secretary of Defense, without regard to the duration of operational control.
\textsuperscript{143} Exhibit K-2 Fort Hood 05 November 2009 AAR Implementation Review.
\textsuperscript{144} Exhibit M-3 Army AIRT Status 1 June 2014. Relevant tasks included those dealing with violence in the workplace and insider attacks, to include behavioral indicators; emergency management and emergency response; active shooter response; and information sharing. Tasks assessed as not relevant to this incident included those related to self-radicalization.
\textsuperscript{145} Exhibit K-2 Fort Hood 05 November 2009 AAR Implementation Review.
\textsuperscript{146} Exhibit M-3 Army AIRT Status 1 June 2014.
(b) In the instance where a risk assessment tool could have been used more effectively, we found it would not have materially changed the outcome, because the risk assessment relied on self-reporting, and SPC Lopez-Lopez was not forthcoming with accurate information, as discussed above.

(c) In seven instances, either Installation Management Command (IMCOM) or Fort Hood took proactive and positive steps to address the recommendations.

(d) In three instances regarding emergency management equipment fielding, Fort Hood either already has the capability, was recently fielded the capability, or had a suitable substitute for the scope and scale of this incident.\textsuperscript{147}

(2) The recommendation to develop a risk assessment tool to determine whether and when DoD personnel present risks for various types of violent behavior (AIRT 2.1.C) remains in progress.

(a) At the Army level, this task was originally closed by the Health Promotion and Risk Reduction (HP&RR) Task Force after the Soldier and Leader Risk Reduction Tool (SLRRT) was developed and posted to the DCS, G-1 website for the Army’s Suicide Prevention Month in 2012. The task was recently reopened by the APP based on the AAA audit finding that “installation personnel weren’t aware of any policies or procedures to implement a risk-monitoring program and didn’t have a risk assessment tool to identify indicators for potentially violent behavior.”\textsuperscript{148}

(b) Fort Hood published an Operations Order (OPORD) establishing a requirement to implement the SLRRT and provided guidance on its use.\textsuperscript{149} The 1st Cavalry Division is scheduled to conduct the proof of concept of the Commander’s Risk Reduction Dashboard (CRRD) in FY14.\textsuperscript{150}

(c) The SLRRT was not effective in helping SPC Lopez-Lopez’s unit identify his sources of stress. Further, it appeared that members of the unit were not fully aware of how to fill out the tool or how to integrate it into their risk management process.\textsuperscript{151}

(3) Two recommendations related to healthcare information sharing and Protected Health Information (PHI) (AIRT 2.5.D and 2.12.A) remain in progress.

\textsuperscript{147} Exhibit M-3 Army AIRT Status 1 June 2014, 69.
\textsuperscript{149} Exhibit J-1 OPORD PW 12-11-1080 (SLRRT Update) 7 December 2012.
\textsuperscript{150} Exhibit K-2 Fort Hood 05 November 2009 AAR Implementation Review.
\textsuperscript{151} See discussion at Part III, para. 2.b.(3)(c) above. See also Exhibit D-81 DA Form 2823 (b) (6) Statement 22 April 2014; Exhibit D-56 DA Form 2823 (D) (6) Statement 22 April 2014; Exhibit D-100 DA Form 2823 (b) Statement 23 April 2014.
(a) OTSG assesses that these recommendations are ready for closure based on the publication of OTSG/MEDCOM Policy Memo 12-062, which requires annual PHI town hall meetings for commanders, command sergeants major, and first sergeants. The policy also requires the inclusion of PHI sharing in company commander/first sergeant courses. Additionally, the Army published an ALARACT clarifying the methods of communication between commanders and medical professionals.\textsuperscript{152} These recommendations have not been approved for closure by the APP.\textsuperscript{153}

(b) Fort Hood conducts PHI town halls with company commanders. Fort Hood Command Policy SURG-05, dated 18 June 2012, reinforces the requirement for commands to adhere to physical profiles. Fort Hood also issued OPORD PHANTOM WARRIOR 11-01-1011 (Electronic Profile), dated 10 July 2012, that implemented E-Profile in part to improve communication between commanders and medical providers with authority to issue profiles.\textsuperscript{154}

(c) As discussed in Part IV, para. 4 below, SPC Lopez-Lopez’s medical records contained \textsuperscript{(b) (6)}\textsuperscript{155} Therefore, we cannot assess whether changes to existing healthcare information sharing policies or practices would have affected this incident.

(4) Two recommendations related to preventing violence towards others in the workplace (AIRT 2.6.A and 2.16.A) remain in progress.

(a) These recommendations are pending ASA(M&RA) and Army G-1 analysis and implementation of DoD Instruction (DoDI) 1438.06, DOD Workplace Violence Prevention and Response Policy, recently published on 6 January 2014.\textsuperscript{156}

(b) Fort Hood has implemented the IMCOM-directed Prevention of Violence in the Workplace Program, IAW IMCOM OPORD 12-296, dated 21 September 2012. Fort Hood reported 100% online training complete for calendar year 2013 on 31 January 2013.\textsuperscript{157}

(c) As discussed in Part III, para. 1, SPC Lopez-Lopez did not exhibit any behaviors indicating a potential for violence. Therefore, we cannot conclude that a change to policy or an increase in training would have materially affected the outcome.

\begin{itemize}
    \item \textsuperscript{152} Exhibit L-81 ALARACT 2014-079 Command Directed Behavioral Health Evaluations 22 March 2014.
    \item \textsuperscript{153} Exhibit M-3 Army AIRT Status 1 June 2014.
    \item \textsuperscript{154} Exhibit K-2 Fort Hood 05 November 2009 AAR Implementation Review.
    \item \textsuperscript{155} Exhibit H-1 Lopez-Lopez AHLTA.
    \item \textsuperscript{156} Exhibit M-3 Army AIRT Status 1 June 2014.
    \item \textsuperscript{157} Exhibit K-2 Fort Hood 05 November 2009 AAR Implementation Review.
\end{itemize}
(5) One recommendation to provide commanders a multidisciplinary capability based on best practices to assist in predicting and preventing an insider attack (AIRT 3.2.C) remains in progress.

(a) In response to Office of the Secretary of Defense’s (OSD) recommendation to develop a centralized Threat Management capability, the Army suggested this function is best accomplished at the installation and unit level.\(^{158}\)

(b) Fort Hood addresses insider threats in their Threat Fusion Cell and using installation Threat Working Groups (TWG). The installation TWG focuses on insider attacks along with cyber threats as their top two threats.\(^{159}\)

(c) As discussed in Part III, para. 1, SPC Lopez-Lopez did not exhibit any behaviors indicating a potential for violence. Therefore, we cannot conclude that fully developing this capability would have materially affected the outcome.

(6) Two recommendations regarding information maintained throughout Service members’ careers as they change duty locations, deploy, and reenlist and who has access to that information by commanders and supervisors (AIRT 2.9.A and 2.9.B) remain in progress.

(a) These recommendations were previously closed by the HP&RR Task Force after the Army provided input to update DoD guidance (DoDI 1336.08, Military Human Resource Records Life Cycle Management, update unpublished) and published its updated guidance in AR 600-8-104, “Army Military Human Resource Records Life Cycle Management” on 2 August 2012. However, these recommendations were recently reopened by the APP based on the AAA audit of implementation at the installation level.\(^{160}\)

(b) Fort Hood implemented a Community Resiliency Initiative Database, which sends a memorandum to brigade commanders when the database identifies repeat offenders (using CCIR/SIR incidents).\(^{161}\) The DES can conduct a query of Army law enforcement services.

\(^{158}\) A variety of Army programs are available at the installation level to assist Commanders and first line leaders. These include Comprehensive Soldier Fitness, chaplain support, CID and Provost Marshal support, Periodic Health Assessments, Deployment Health Assessments, Post-Deployment Health Assessments, other mental health assessments and combat stress counseling, Army “One Source” counseling, the Army Substance Abuse Program, Family Advocacy programs, Counterintelligence iWatch, Army iSalute Program, Army Resiliency Training, and Army suicide prevention programs.

\(^{159}\) Exhibit D-39 DA Form 2823 Mr. Exhibit D-39 DA Form 2823 \(\text{(b) (6)}\) Statement 1 May 2014; Exhibit D-90 DA Form 2823 \(\text{(b) (6)}\) Statement 1 May 2014.

\(^{160}\) Exhibit M-3 Army AIRT Status 1 June 2014; Exhibit K-1 USD VCSA Brief A-2013-MTP-0224.000 28 May 2014.

\(^{161}\) Exhibit K-2 Fort Hood 05 November 2009 AAR Implementation Review.
enforcement systems on newly arrived Soldiers in accordance with the SECARMY Directive 2013-06.¹⁶²

(c) SPC Lopez-Lopez did not have any derogatory information related to accession waivers, substance abuse, minor law enforcement infractions or conduct waivers that would have identified him to his chain of command.¹⁶³ Therefore, we cannot conclude that these capabilities—even if fully implemented—would have materially affected the outcome.

(7) Three recommendations related to implementing E911, state-of-the-art Mass MWN systems and a Common Operating Picture (COP) to support installation emergency operations centers (EOCs) (AIRT 4.2.A, 4.4.A, and 4.5.A) remain in progress.

(a) These recommendations will be fully implemented upon the full funding and completion of the Emergency Management Modernization Program (EM2P), fielding of which is underway.¹⁶⁴ This program was funded at a low Rough Order of Magnitude of $225M.¹⁶⁵ To date, the product director has fielded MWN to twenty-one prioritized installations.¹⁶⁶ The selected COP solution was rejected by the combat developer (G34) on 13 July 2013 because it did not meet requirements.¹⁶⁷ Fort Drum is the pilot installation for E911 fielding.

(b) The Army’s Emergency Management Branch (VIPP MDEP) consolidated sustainment of existing locally procured “Giant Voice” on 30 July 2013, using Tank and Automotive Command as the lifecycle manager.¹⁶⁸

(c) The Army fielded Fort Hood with the new MWN solution as part of EM2P fielding in December 2013. Fort Hood also maintains secondary network and telephonic alert systems, which were all used during the shooting incident. Fort Hood uses a manually generated technique (SharePoint) to produce its COP. Fort Hood was

¹⁶² Exhibit L-61 AD 2013-06 - Providing Specified Law Enforcement Info to Commanders of Newly Assigned Soldiers 14 February 2013.
¹⁶³ Based on a check of personnel records, Army Law Enforcement systems and the National Crime Information Center Interstate Identification Index (NCIC-III).
¹⁶⁴ Exhibit M-3 Army AIRT Status 1 June 2014.
¹⁶⁵ Funding level established by RMD 700. The ASA (AL&T) selected Joint Program Executive Office –Chemical and Biological Defense (JPEO-CBD) to appoint a Product Director (PD) for an Urgent Material Release Fielding.
¹⁶⁶ Exhibit M-4 MFR Emergency Management Modernization Program (EM2P) Fielding Update 1 June 2014.
¹⁶⁸ Exhibit L-128 Memorandum of Instruction for Legacy Giant Voice Repair and Sustainment 30 July 2013.
c. Findings.

(1) The Army has made progress in implementing the AIRT recommendations. Despite lower resourcing than recommended by the AIRT, current Army implementation is at 74% (fifty-seven of seventy-seven recommendations).\(^{170}\)

(2) Implementation of the AIRT recommendations at the installation level varies as Senior Commanders and Garrison Commanders balance mission requirements, resources, and risk.\(^{171}\) Fort Hood’s implementation of recommendations exceeds the Army average, and this enhanced the installation’s response to the shooting.\(^{172}\)

(3) We did not find sufficient evidence to conclude that any of the unimplemented or partially implemented AIRT recommendations discussed above materially affected the shooting on Fort Hood on 2 April 2014 or the response to it.

(4) Fort Riley’s Insider Threat Analysis Process is a best practice to ensure that installation and unit commanders have an effective means to identify and manage high-risk personnel across the Army workforce (Soldier, Civilian, and contractor).\(^{173}\)

d. Recommendations.

(1) Add HQDA Protection Assessments of a sample number of installations each year to the HQDA Protection Assessment program to strengthen internal controls and provide a periodic feedback mechanism on implementation and challenges to implementation. (G-3/5/7 lead)

(2) Assess the effectiveness of the SLRRT in addressing high-risk behaviors and risk factors in light of ongoing work on suicide prevention, workplace violence, and other efforts. Modify the SLRRT as appropriate (e.g., add questions to determine if Soldiers know of any peers who may be at risk) and publish Army guidance on the use of the risk management tool. Ensure appropriate training is implemented for first-line leaders through commanders. (G-1 lead)

(3) Evaluate the current scope of the CRRD pilot and the information provided to commanders to determine whether it aids high-risk Soldier management. (G-1 lead)

---

\(^{169}\) See sub-para. (7)(a) above. Exhibit D-74 DA Form 2823 Statement 1 May 2014.

\(^{170}\) Exhibit M-3 Army AIRT Status 1 June 2014.

\(^{171}\) Exhibit K-1 USD VCSA Brief A-2013-MTP-0224.000 28 May 2014.

\(^{172}\) For details on the response, see Part IV, para. 9.

\(^{173}\) Exhibit K-3 Fort Riley Insider Threat Analysis Process 16 April 2014.
(4) Do not approve closure of AIRT recommendations at the HQDA level until they are reflected in Army policy and can serve as benchmarks as part of a Command Inspection Program (CIP) or Higher Headquarters Assessment (HHA). (ASA(M&RA) lead, G-3/5/7 assist)

(5) Consider the IMCOM Prevention of Violence in the Workplace Program in developing Army-level policy. (G-1 lead)

(6) Consider Fort Riley’s Insider Threat Analysis Process for Army-wide implementation.¹⁷⁴ (G-3/5/7 lead)

(7) Assess the challenges and gaps that remain in providing appropriate relevant information about Soldiers to commanders and supervisors as they change duty locations, deploy, and reenlist. (G-1 lead)

(8) Assess whether EM2P fielding is adequately resourced to ensure Army-wide implementation at the earliest opportunity. (G-3/5/7 lead)

(9) Elevate the level of oversight and supervision of the EM2P program within the Office of the Assistant Secretary of the Army for Acquisition, Logistics, and Technology (ASA(AL&T)).

2. Relevant Chronologies.

   a. Provide a chronology of the military service of Specialist Lopez, including, but not limited to, his accession into the Reserve Component and his transition to the Active Army; his record of duty performance, behavior and conduct; and any medical/behavioral health treatment provided to him.

   b. Provide a chronology of relevant events, involving or related to Specialist Lopez, preceding the shooting incident at Fort Hood, Texas, on 2 April 2014. As appropriate, include documentation of Specialist Lopez-Lopez’s personal and professional interactions with other individuals on and before 2 April 2014.

   c. Provide a chronology of relevant events related to Specialist Lopez’s reassignment from Fort Bliss to Fort Hood.

A fully annotated chronology of SPC Lopez-Lopez’s military service and other relevant events from 7 December 1998 through 1 April 2014 is included at Appendix 1, Tab A. This timeline covers SPC Lopez-Lopez’s accession into the Puerto Rico Army National Guard and transition into the Active Army; his reassignment from Fort Bliss to Fort Hood; and medical/behavioral health treatment he received. A separate timeline at

¹⁷⁴ Exhibit K-3 Fort Riley Insider Threat Analysis Process 16 April 2014.
Appendix 1, Tab B, addresses the events of 2 April 2014 in detail. A narrative chronology of SPC Lopez-Lopez’s medical treatment is included at Appendix 5, Tab B.

3. Identifying Potential Insider Threats

Identify current Army programs, policies, processes and procedures for identifying personnel (e.g., Soldiers, civilian employees, and others) affiliated with the Army, who have access to Army installations and may pose a threat to themselves or others, and for eliminating or mitigating such threats, as appropriate.

Assess whether current Army programs, policies, processes and procedures identified or reasonably should have identified, SPC Lopez-Lopez as an individual who may pose a threat to himself or others.

To the extent that deficiencies or gaps in the law or current Department of Defense or Army programs, policies, processes and procedures exist, either systematically or as applied particularly to SPC Lopez-Lopez, identify such deficiencies or gaps and make specific recommendations for corrective action.

a. Background. In response to Presidential guidance, the Army recently established an Insider Threat Program under the framework of the Army Protection Program. This initiative represents an “integrated departmental effort to deter, detect and mitigate risk by employees or service members.” As directed by the Secretary of the Army, deterring and preventing violent insider attacks, such as the 2009 Fort Hood shooting by and the 2011 attempted attack in Killeen, Texas by , remains a primary objective of the Army Insider Threat Program (AITP).

b. Discussion.

(1) The Presidential Memorandum defines an insider threat as the “threat that an insider will use her/his authorized access, wittingly or unwittingly, to do harm to the security of the United States. This threat can include damage to the United States through espionage, terrorism, unauthorized disclosure of national security information, or through the loss or degradation of departmental resources or capabilities.” The AITP incorporates this definition of an insider threat.

(2) The AITP was established to accomplish the following tasks:

(a) Ensure the security and safety of Army computer networks by establishing an integrated capability to monitor and audit user activity across all network domains to detect and mitigate activity indicative of insider threat behavior;

(b) Facilitate the sharing of counterintelligence (CI), security, information assurance (IA), law enforcement (LE), human resources (HR), and other related information to recognize and counter the presence of an insider threat;

(c) Evaluate personnel security information;

(d) Provide the workforce with training on insider threat awareness and their reporting responsibilities; and

(e) Gather information to establish a centralized analysis, reporting and response capability.\(^{179}\)

(3) Each task listed above was developed in response to the various insider threat incidents experienced by the Army since the Fort Hood shooting in 2009, including in 2010 and in 2011. The Army is implementing a number of initiatives under each task, which are in various stages of completion.\(^{180}\)

(4) Given the facts surrounding the 2 April 2014 shooting at Fort Hood, only two of the five AITP tasks are relevant to the incident: (2)(b) and (2)(d) above. The relevance of these tasks is discussed in the findings below.

(5) DoDI Instruction (DoDI) 1438.06 defines violent behavior as “[t]he intentional use of physical force or power, threatened or actual, against a person or group that either results in or has a high likelihood of injury, death, or psychological harm to self or others.”\(^{181}\)

c. Findings.

(1) Applying the definition from the Presidential Memorandum, we conclude SPC Lopez-Lopez was not an insider threat. While it is true that SPC Lopez-Lopez killed and wounded Soldiers, thereby causing “degradation of departmental resources or capabilities,” this fact alone does not support a finding that he was an insider threat. He did not commit or attempt espionage or a terrorist act, nor did he disclose national security information without authorization. His actions were not designed to do harm to the security of the United States. To interpret this shooting as the work of an insider threat, simply because Soldiers were killed and wounded, would undermine the apparent intent of the Presidential Memorandum, resulting in the diversion of focus and


\(^{180}\) Exhibit L-129 Insider Threat Implementation Plan 17 April 2014.

\(^{181}\) Exhibit L-42 DODI 1438.06, DOD Workplace Violence Prevention and Response Policy 16 January 2014.
resources away from addressing true threats to our national security. Instead, we find SPC Lopez-Lopez’s actions on 2 April 2014 are more appropriately characterized as acts of violent behavior, as defined in DoD Instruction 1438.06.

(2) The Army currently has three programs focusing on the identification of Army-affiliated personnel who have access to Army installations and may pose a threat to themselves and others. These programs are the Threat Awareness and Reporting Program (TARP), the iWatch program, and the Suicide Prevention Program. TARP training for Army personnel covers the indicators of espionage, international terrorism, and extremist activity. iWatch serves as the training program for the reporting of suspicious activity in support of the Army’s anti-terrorism awareness program. Suicide Prevention training alerts personnel to watch for behaviors that indicate the potential for suicide so that they may assist in mitigation efforts.

(3) SPC Lopez-Lopez did not exhibit behavior that would have been reported under any of the programs identified in Finding c(2) above. He exhibited no behaviors associated with espionage, international terrorism, or extremist activity, as detailed in AR 381-12 and briefed during TARP training to Army soldiers and civilians annually. SPC Lopez-Lopez did not exhibit suspicious behavior necessitating a report under the iWATCH program—a program focusing on activities normally associated with terrorism. SPC Lopez-Lopez was likewise never identified as a suicide risk according to the data gathered during this investigation.

(4) After the Fort Hood shooting in 2009, DoD tasked the DSB to study issues of violent behavior. The recommendations of the DSB’s Report on Predicting Violent Behavior are relevant to this incident, and the Army should adopt two of its three recommended strategies: (1) A threat management approach to provide effective intervention capability at the installation and command levels; and (2) Continue to improve information sharing at every echelon while recognizing privacy

---

182 By a strict application of this definition, any Soldier who unwittingly degraded Army resources or capabilities while on a military installation (e.g., by injuring another Soldier or damaging a military vehicle in a traffic accident) would be considered an insider threat. Such a conclusion makes no sense and would be contrary to the purpose of the Army Insider Threat Program.


184 Exhibit L-16 Army Regulation 381-12, Threat Awareness and Reporting Program, 4 October 2010.

185 Exhibit L-108 ALARACT 2010-110 - Amy Implementation of iWATCH (Terrorist Watch Program) 15 April 2010.

186 Exhibit L-29 Army Regulation 600-63 - Army Health Promotion 7 September 2010.

187 Exhibit L-16 Army Regulation 381-12, Threat Awareness and Reporting Program, 4 October 2010 (Please consult G2 Staff (TARP PM) for classified TARP metric reports).

Due to the lack of effective predictors, the DSB concluded that the focus should be on prevention rather than prediction.  

(a) While not directed at identifying all forms of violent behavior, the sharing of information to detect and mitigate insider threats (i.e., counterintelligence (CI), security, information assurance (IA), law enforcement (LE), human resources (HR), and other related threat information) has greatly improved since the Fort Hood shooting in 2009.  

A Memorandum of Understanding signed between DoD and the FBI improved information sharing to assist in the identification and mitigation of insider threats across the Army.  

Army Counterintelligence and the CID have increased their abilities to share investigative information and partner on investigative efforts.  

(b) Implementation of the TARP provided the Army’s workforce with training on insider threat awareness and reinforced their reporting responsibilities. The TARP has become a major component of the AITP, as it provides training on the behavioral indicators for espionage, international terrorism and extremist activity, and the reporting responsibilities for Army personnel. Starting in FY12, the first full year of TARP training, the Army has seen a 19% increase in threat reporting attributed to TARP.  

From FY11 through FY 13, the number of personnel who received TARP training either in person or on-line steadily increased. TARP training products are updated annually and the program has sustainment funding in the out years.  

(5) The AITP Implementation Plan directs full operating capability (FOC) of the Army Insider Threat Analytical Capability by the end of Fiscal Year (FY) 2015. The FY15-19 and FY16-20 Army Program Objective Memoranda (POM) do not provide the resources necessary to meet these emerging requirements. Specifically, the establishment and execution of the integrated analytical hub and associated response capabilities requires increased manpower in information assurance (IA), law enforcement (LE), human resources (HR), security, and counterintelligence (CI).
d. Recommendations.

(1) Develop policy to address violent behavior, as defined in DoDI 1438.06, incorporating a threat management approach to improve intervention capabilities and address information sharing restrictions.195 (ASA(M&RA) lead)

(2) Accelerate validation and funding of critical requirements and continue to facilitate information sharing as directed by the forthcoming AITP Implementation Plan.196 (G-3/5/7 lead)

(3) Even though they are not yet capable of identifying individuals like SPC Lopez-Lopez, recommend approving and funding initiatives that provide information for CI, security, IA, LE, and HR, and ensure that this information flows vertically and horizontally across all echelons of the Army. If the DSB or another entity a reliable set of indicators to predict violence is developed and validated, we can adjust these initiatives to include the indicators and improve the Army’s ability to predict violent acts. Execution of the AITP Implementation Plan will greatly reduce restricted channels of information and will provide commanders with more information to assess insider threat risks. (G-3/5/7 lead)

4. Medical Treatment Provided to SPC Lopez-Lopez.

Determine whether the care and treatment provided to SPC Lopez-Lopez was appropriate under the circumstances.197

a. Background.197

(1) The assessment of SPC Lopez-Lopez’s care and treatment was performed by a practicing forensic psychiatrist who is qualified to conduct such assessments. Conducted an independent review of the records of medical and behavioral health care and treatment provided to SPC Lopez-Lopez. His review conformed to AR 40-68 and did not incorporate quality assurance records into his findings and recommendations.198

(2) At the time of his death, SPC Lopez-Lopez carried a permanent profile for

196 Exhibit L-129 Insider Threat Implementation Plan 17 April 2014.
197 Unless otherwise specifically stated, Exhibit H-1 Lopez-Lopez AHLTA serves as the basis for the facts outlined in this section.
198 A list of personnel and records consulted, along with a narrative chronology of SPC Lopez-Lopez’s medical history are included at Appendix 5, Tabs A and B.
b. **Discussion.** The most pertinent question was whether a lack of appropriate medical intervention led to the events on 2 April 2014. Assessment of appropriateness of medical care and treatment was conducted by [REDACTED] in accordance with AR 40-68 (Clinical Quality Management) dated 22 May 2009.  

After 20 June 2013, almost every medical note with a medical history Please see the list of providers under Appendix 5, Tab A and their notes after 20 June 2013. In addition, many witnesses stated that SPC Lopez-Lopez [REDACTED]. Some examples include the statements of [REDACTED] and [REDACTED]. He also reported it on his AIT in-processing questionnaire and for the SLRRT at Fort Hood.

199 After 20 June 2013, almost every medical note with a medical history [REDACTED]. Please see the list of providers under Appendix 5, Tab A and their notes after 20 June 2013. In addition, many witnesses stated that SPC Lopez-Lopez [REDACTED]. Some examples include the statements of [REDACTED] and [REDACTED]. He also reported it on his AIT in-processing questionnaire and for the SLRRT at Fort Hood.


(2) Access to care met MEDCOM standards at all three posts of interest. Fort Bliss had more than adequate access to care through the 4 ABCT/1 AD Embedded Behavioral Health (EBH) clinic. Fort Leonard Wood had an EBH clinic for 88M AIT students that SPC Lopez-Lopez did not access (discussed below at Part IV, Paragraph 7). Fort Hood had a same-day walk-in system for anyone needing a first-time BH appointment. The amount of time between follow-up appointments was adequate at all three posts.

(3) On 10 March 2014,

(4) On 26 March 2014,

(5) The diagnosis and referral to the MOS Administrative Retention Review (MAR2) for was appropriate and did not directly cause any, as discussed below under Task 5 (Reclassification).

SPC Lopez-Lopez expressed discomfort with continuing as an 11B.

204 B-21 DA Form 2823 Statement 29 April 2014.
205 C-3 MFR Email Summary 3 June 2014.
206 Exhibit H-2 OTSG Access to Care Summary.
207 Exhibit H-1 Lopez-Lopez AHLTA, dtd 21 March 2014.
208 Exhibit D-95 Telephone Interview 3 June 2014.
209 This diagnosis and MAR2 referral was verified by the overseeing physician, who co-signs the permanent profile. This original document was not available, because the permanent profile was modified later.
210 Exhibit B-61 DA Form 2823 Statement 28 April 2014.
An abundance of evidence showed that was in SPC Lopez-Lopez’s vehicle when the IED exploded. He stated that the explosion occurred four to five trucks ahead and caused no reaction within their vehicle. was in the vehicle that was nearest the explosion and said no one was injured. He stated the convoy was twelve vehicles long and that SPC Lopez-Lopez was about one mile away. Stated that the IED was 700 meters away from SPC Lopez-Lopez’s vehicle. SPC Lopez-Lopez also related a story of falling down a hill and losing consciousness while in Iraq. At face value, it is unlikely that a squad would not hear or notice a teammate roll down a hill, in full combat equipment, and be absent for a few minutes. Data from teammates in that squad, including , indicated that no

---

211 Exhibit H-1 Lopez-Lopez AHLTA note, dtd 6 December 2010.
212 Exhibit B-34 DA Form 2823 Statement 30 April 2014.
213 Exhibit B-55 DA Form 2823 Statement 29 April 2014.
214 Exhibit D-63 MFR Email Summary 3 June 2014.
215 Exhibit H-1 Lopez-Lopez AHLTA note dated 8 August 2013.
216 Exhibit B-34 DA Form 2823 Statement 30 April 2014.
217 Exhibit B-31 DA Form 2823 Statement 29 April 2014.
218 Exhibit B-56 DA Form 2823 Statement 30 April 2014.
219 Exhibit B-31 DA Form 2823 Statement 29 April 2014.
220 Exhibit H-1 Lopez-Lopez AHLTA note dtd 8 August 2013.
night patrols were conducted on large hills.\textsuperscript{221} \textsuperscript{(b) (6)} stated that no one could have fallen down a hill except during PT.\textsuperscript{222} The platoon sergeant likewise had no memory of anyone falling down a hill.\textsuperscript{223} \textsuperscript{(b) (6)}

\footnotesize{\textsuperscript{221} Exhibit B-34 DA Form 2823 \textsuperscript{(b) (6)} Statement 30 April 2014.\textsuperscript{222} Exhibit B-56 DA Form 2823 \textsuperscript{(b) (6)} Statement 30 April 2014.\textsuperscript{223} Exhibit B-23 DA Form 2823 \textsuperscript{(b) (6)} Statement 30 April 2014.\textsuperscript{224} Exhibit H-3 Lopez-Lopez PDHA 3 January 2012.\textsuperscript{225} Exhibit H-4 Lopez-Lopez PDHRA 6 July 2012.\textsuperscript{226} Exhibit B-28 DA Form 2823 \textsuperscript{(b) (6)} Statement 30 April 2014.\textsuperscript{227} Exhibit B-28 DA Form 2823 \textsuperscript{(b) (6)} Statement 30 April 2014.\textsuperscript{228} Exhibit B-23 DA Form 2823 \textsuperscript{(b) (6)} Statement 30 April 2014.\textsuperscript{229} Exhibit D-63 MFR \textsuperscript{(b) (6)} Email Summary 3 June 2014; Exhibit E-7 MFR \textsuperscript{(b) (6)} Telephone Interview 21 May 2014.\textsuperscript{230} Exhibit H-5 OTSG BHDP Summary 4 April 2014.}
There was evidence that SPC Lopez-Lopez suffered from [redacted].

SPC Lopez-Lopez had a diagnosis of [redacted].

[Redacted]

[Redacted]

[Redacted]

[Redacted]


Exhibit H-5 OTSG BHDP Summary 4 April 2014.

Exhibit E-7 MFR (b) (6) Telephone Interview 21 May 2014.

Exhibit B-28 DA Form 2823 (b) (6) Statement 30 April 2014.


Exhibit E-7 MFR (b) (6) Telephone Interview 21 May 2014.


(14) There was no evidence that alcohol abuse was a factor in the events leading to the incident on 2 April 2014. Numerous witnesses reported that SPC Lopez-Lopez rarely drank, and when he did it was well within moderation. The autopsy report after his death showed no traces of alcohol.

(15) There were two reports from and that SPC Lopez-Lopez arrived at Fort Hood.

---

238 Exhibit E-7 MFR Telephone Interview 21 May 2014; Exhibit B-28 DA Form 2823 Statement 30 April 2014; Exhibit B-27 DA Form 2823 Statement 29 April 2014; Exhibit E-18 DA Form 2823 Statement 23 April 2014.


240 Exhibit D-56 DA Form 2823 Statement 22 April 2014; Exhibit D-56 DA Form 2823 Statement 22 April 2014.


242 Exhibit B-60 MFR Email Summary 3 June 2014.

243 H-7 FDA Label – Celexa.
(17) (b) (6)

(b) (6)

(18) (b) (6) 245

(b) (6)

(19) (b) (6)

(b) (6)

(20) Of the other prescribed medications, (b) (6)

244 H-8 FDA Label — (b) (6)
245 H-9 FDA Label — (b) (6)
246 Exhibit E-7 MFR (b) (6) Telephone Interview 21 May 2014.
247 Exhibit E-7 MFR (b) (6) Telephone Interview 21 May 2014.
249 Exhibit D-43 DA Form 2823 (b) (6) Statement 22 April 2014; Exhibit D-81 DA Form 2823 (b) (6)
Statement 22 April 2014; Exhibit E-6 CID AIR detailing the interview of (b) (6) (wife) 2 April 2014.
250 Exhibit E-7 MFR (b) (6) Telephone Interview 21 May 2014.
251 Exhibit H-10 FDA Label — (b) (6)
252 This information may be found on the FDA Labels at http://labels.fda.gov/.
(22) The autopsy results did not reveal any illegal drugs or the abnormal presence of any other medications in SPC Lopez-Lopez’s blood.\textsuperscript{256} The cause of death was a gunshot wound to the head, and the manner of death was suicide. His blood was

\textsuperscript{255} Exhibit E-7 MFR \(\text{(b)} \quad \text{(6)}\) Telephone Interview 21 May 2014; Exhibit B-28 DA Form 2823 \(\text{(b)} \quad \text{(6)}\) Statement 30 April 2014. \textsuperscript{256} Exhibit H-6 ME14-0107 Lopez-Lopez OAFME Final Autopsy Report 23 April 2014. \textsuperscript{257} Exhibit F-8 MFR \(\text{(b)} \quad \text{(6)}\) Telephone Interview 4 June 2014. \textsuperscript{258} Exhibit B-61 DA Form 2823 \(\text{(b)} \quad \text{(6)}\) Statement 28 April 2014.
(24) By many accounts, SPC Lopez-Lopez was unable or unwilling to perform at a level necessary to make Sergeant (E-5). Unless he was promoted, as a Specialist (E-4) he would have been subjected to involuntary separation in June 2016. Even if he left the Army before 20 years, however, he had potential future income through VA disability. Obstructive usually earns no disability percentage through Army disability channels, but usually garners 50% through VA channels. Obtaining benefits through the VA requires proof of service-connected illness. SPC Lopez-Lopez’s electronic medical record supplied ample proof of service connection if he were to seek VA compensation at a later date. In addition, his cousin and a friend, were both receiving VA benefits and were in a position to give him information on how to document conditions and obtain benefits. In fact, reported that SPC Lopez-Lopez asked him questions about VA disability, such as how much disability percentage he received for his medical conditions.

Transition of BH Care During In- and Out-Processing

(25) SPC Lopez-Lopez arrived at Fort Leonard Wood and Fort Hood without either installation’s BH operations being alerted of his arrival by the losing BH operation. This is evidenced by the following: no provider at Fort Bliss documented such information handover in a note; stated that SPC Lopez-Lopez did not know where to go for medication refills at Fort Leonard Wood; and, AIT students do not fall under the general out-processing policy of the local hospital (GLWACH). Finally, as there were

---

259 Exhibit E-7 MFR Telephone Interview 21 May 2014.
260 Exhibit B-61 DA Form 2823 28 April 2014.
261 Exhibit B-2 DA Form 2823 Statement 30 April 2014; Exhibit E-13 DA Form 2823 Statement 8 May 2014.
262 Exhibit E-22 DA Form 2823 Statement 7 May 2014; Exhibit E-14 MFR Telephone Interview 15 May 2014.
263 Exhibit E-22 DA Form 2823 Statement 7 May 2014.
264 The final BH note on 15 November 2013 and previous notes state only that SPC Lopez-Lopez was PCS-ing and nothing about scheduling him with an appointment at Fort Leonard Wood or Fort Hood.
265 Exhibit E-13 DA Form 2823 Statement 8 May 2014.
266 Exhibit C-3 MFR Email Summary 3 June 2014.
no documented BH or EBH encounters at Fort Leonard Wood, there was no provider in a position to receive or forward such information, and according to the Chief of Psychological Health at Fort Hood, SPC Lopez-Lopez was never scheduled for an appointment during his in-processing period.\textsuperscript{267}

(26) The Office of the Surgeon General (OTSG) established a system for hand-off of BH care during PCS or other transitions\textsuperscript{268} but there is “substantial variance” in aspects of its implementation across the Army.\textsuperscript{269} The policy establishes that all out-processing Soldiers, for PCS, ETS, or retirement, receive screening through BH. In this case, this policy only applied to Fort Bliss’s Embedded BH (EBH) operation. SPC Lopez-Lopez was at Fort Leonard Wood AIT on TDY enroute status, so the OTSG policy would not have applied there. Nonetheless, specific aspects of BH information handover at all three posts is described below.

(27) The OTSG policy is summarized here. It directs that the installation shall forward a list of all out-processing Soldiers to BH, where they are screened for any Soldiers with a BH appointment, including Family Advocacy Program (FAP) appointments, within the past 180 days.\textsuperscript{270} All Soldiers meeting that criteria must physically out-process through BH. The BH/FAP clinic screens the record and schedules Soldiers with a BH Provider based on symptom acuity and safety risk. The provider follows local procedures if the Soldier is deemed high-risk or not stable on medication, such as issuing a profile and/or contacting command. For a PCS-ing Soldier, the provider would use a central database of BH point-of-contact email addresses to schedule an appointment at the receiving post’s BH clinic. The provider would also educate the Soldier regarding the InTransition program, which uses a telephonic advisor to assist the Soldier in seeking care at any phase of the transition. The provider would also provide the Soldier with the contact information at the next BH clinic, as well as the Installation Sponsorship LNO at the next post, whose name should also appear on the central email database mentioned above. Assuming no high-risk status, the provider documents in the electronic medical record whether an appointment was scheduled or if no follow-up care was indicated. The OTSG policy states that follow-up at the next post is a shared responsibility between the losing post’s BH clinic and the Soldier. The gaining installation will also take down contact information for the Soldier, and may attempt to contact command if the Soldier is a no-show for the appointment. While the policy specifically details an out-processing procedure, there is no specified in-processing procedure.

\textsuperscript{267} Exhibit D-36 DA Form 2823\textsuperscript{(b) (6)} Statement 23 April 2014.

\textsuperscript{268} Handoff of BH information between posts is guided by Exhibit L-56 DODI 6490.10, Continuity of Behavioral Health Care for Transferring and Transitioning Service Members 26 March 12; and Exhibit L-98 MEDCOM Policy Memo 13-007 - Procedures for Transferring Care 20 February 2013, para. 7f.

\textsuperscript{269} Exhibit F-6 MFR\textsuperscript{(b) (6)} Email 5 June 2014.

\textsuperscript{270} Exhibit L-98 MEDCOM Policy Memo 13-007, Procedures for Transferring Care 20 February 13, paragraph 7f.
(28) Fort Bliss’s Behavioral Health services, including EBH and William Beaumont Army Medical Center, did not consistently follow this policy. This is evidenced by the fact that no appointment was scheduled at Fort Hood for SPC Lopez-Lopez, or if it was, it was never documented in the medical record.\(^{271}\) reported verbally that she informed SPC Lopez-Lopez about the *inTransition* program, but this was never documented in her notes. Individual providers could follow the OTSG policy if they felt it was medically prudent. The situation was complicated here because SPC Lopez-Lopez did not out-process himself—did it for him.\(^{272}\) documentation was placed in the electronic medical record as to any follow up at Fort Hood being scheduled.\(^{275}\)

(29) Fort Bliss had an out-processing procedure separate from the OTSG policy, in which commanders filled out local form 15-R and medical screening occurred.\(^{276}\) SPC Lopez-Lopez’s medical history and permanent profile did not trigger any concerns. As noted before, he was not physically present for this out-processing, either.

(30) Fort Leonard Wood did not have a requirement to follow OTSG policy because SPC Lopez-Lopez was on TDY status there. However, some salient issues are noted. If Fort Bliss EBH had scheduled SPC Lopez-Lopez to see the AIT EBH, then the AIT EBH might have scheduled SPC Lopez-Lopez with a Fort Hood BH appointment once he left Fort Leonard Wood. SPC Lopez-Lopez did see a primary care nurse practitioner at Fort Leonard Wood for a medication refill of . The OTSG policy appears to focus on BH appointments and BH providers. AIT lacked a school out-processing procedure that would have resulted in the screening described in the OTSG policy (e.g. whether SPC Lopez-Lopez had had any BH appointments within the past 180 days).\(^{277}\)

(31) Fort Leonard Wood and Fort Hood had in-processing procedures for BH that had potential to mitigate the lack of hand-over during out-processing.

\(^{271}\) H-1 Lopez-Lopez AHLTA note dated 15 November 2013.

\(^{272}\) Exhibit B-16 DA Form 2823 \((b)(6)\) Statement 29 April 2014.

\(^{273}\) H-1 Lopez-Lopez AHLTA note dated 15 November 2013.

\(^{274}\) Exhibit B-43 DA Form 2823\((b)(6)\) Statement 29 April 2014.

\(^{275}\) H-1 Lopez-Lopez AHLTA note dated 15 November 2014.

\(^{276}\) Exhibit O-1 Form 15-R Fort Bliss Medical Readiness Out Processing Commander’s Screening Parts I and II (example) 5 June 2014, Exhibit B-65 DA Form 2823 \((b)(6)\) Statement 30 April 2014; Exhibit B-59 DA Form 2823 Exhibit B-59 DA Form 2823 \((b)(6)\) Statement 28 April 2014.

\(^{277}\) Exhibit L-98 MEDCOM Policy Memo 13-007 - Procedures for Transferring Care 20 February 2013.
(32) Fort Leonard Wood’s AIT in-processing involved a paper questionnaire without a review of the electronic medical record by a medical technician. The chief of psychological health for Fort Leonard Wood, stated that AIT has an EBH, but it did not appear that SPC Lopez-Lopez knew about it. This could be due to the information not being passed on, or SPC Lopez-Lopez not committing the information to memory. The AIT Reception Counseling form makes no reference to EBH or the BH clinic at the main hospital on post. Rather, it recommends that depressed or suicidal Soldiers speak to the platoon sergeant, cadre, or a chaplain. Mention is made of sick call but no specialized BH services. SPC Lopez-Lopez wrote

One AIT NCO reported no follow up questioning ensued, while another reported that SPC Lopez-Lopez stated he did not need to talk to. SPC Lopez-Lopez eventually went to the Emergency Department (ED) with for refills, and was referred to sick call to refill his . This encounter generated some negative emotions in SPC Lopez-Lopez, per and . Because the Victory clinic is not a BH clinic, OTSG Policy 13-007 did not require them to set up a follow-up appointment at Fort Hood’s BH clinic. There was no medical out-processing screening to schedule a follow-up with Fort Hood BH, though since he never saw BH at Fort Leonard Wood, he would possibly not have been flagged as needing follow-up care at Fort Hood.

(33) Fort Hood did not receive notification from Fort Bliss or Fort Leonard Wood regarding SPC Lopez-Lopez’s BH history or need for follow-up. Fort Hood’s BH clinic did receive a list of all in-processing Soldiers through their installation. This list was screened by a Sergeant First Class who then called Soldiers to schedule appointments, if an appointment was indicated. However, the list was kept on a handwritten sheet and could not be located for this investigation. The BH clinic provided two office phone

---

279 Exhibit C-3 MFR Email Summary 3 June 2014.
280 Exhibit G-9 Lopez-Lopez AIT Reception Counseling 1 December 2013.
281 Exhibit C-1 DA Form 2823 Statement 1 May 2014.
282 Exhibit C-8 DA Form 2823 Statement 1 May 2014.
283 Exhibit C-10 DA Form 2823 Statement 2 May 2014; Exhibit C-7 DA Form 2823 Statement 1 May 2014.
284 Exhibit C-12 MFR Telephone Interview 3 June 2014.
285 Exhibit E-13 DA Form 2823 Statement 8 May 2014.
286 Exhibit L-98 MEDCOM Policy Memo 13-007, Procedures for Transferring Care 20 February 2013.
287 Exhibit C-15 MFR Email Summary 6 June 2014.
288 Exhibit D-36 DA Form 2823 Statement 23 April 2014; Exhibit D-37 MFR Email Transcript 3 June 2014.
numbers that would have been used to contact patients. However, SPC Lopez-Lopez’s cell phone log did not show any received calls from these numbers.  

(b) (6)

Polypharmacy Policy

(35) OTSG/MEDCOM Policy 13-032,\textsuperscript{294} provides guidelines for managing Soldiers on multiple medications, a.k.a. “polypharmacy.” The intent is to prevent incidents of accidental or intentional overdoses or other adverse effects due to the combination of medications. Multiple categories, or “buckets,” of patients exist involving combinations of psychotropic and opioid medications. The central procedure of the policy occurs on the fifteenth of every month, when the MTF submits a report that either it created or it received from the DoD Pharmacoeconomic Branch (PEC-B) of the Pharmacy Analytics & Support Section (PASS).\textsuperscript{295} If a patient appears on the report, then each local post’s pharmacy department may still have to conduct an interview with the patient to clarify the medications.

(36) Please consult the polypharmacy diagrams for improved understanding of the bucket system and the timeline of SPC Lopez-Lopez’s polypharmacy status.\textsuperscript{296}

(b) (6)

\begin{itemize}
\item Exhibit D-37 MFR\textsuperscript{(b) (6)} Email Transcript 3 June 2014.
\item Exhibit D-15 DA Form 2823\textsuperscript{(b) (6)} 23 April 2014.
\item Exhibit E-18 DA Form 2824\textsuperscript{(b) (6)} Statement 23 April 2014.
\item Exhibit D-81 DA Form 2823\textsuperscript{(b) (6)} Statement 22 April 2014.
\item Exhibit H-1 Lopez-Lopez AHLTA note dated 10 March 2014 with\textsuperscript{(b) (6)}
\item Exhibit F-1 MFR\textsuperscript{(b) (6)} Telephone Interview 3 June 2014.
\item Exhibit I-2 Polypharmacy Buckets; Exhibit H-11 Lopez-Lopez Polypharmacy Timeline.
\item Exhibit H-12 Poly-MART Drug List 21 August 2013.
\end{itemize}
298 Exhibit B-19 MFR (b) Telephone Interview 3 June 2014.
299 Exhibit B-16 DA Form 2823 (b) Statement 29 April 2014.
300 Exhibit B-70 MFR (b) Email Summary 3 June 2014; Exhibit B-19 MFR (b) Telephone Interview 3 June 2014.
301 Exhibit B-70 MFR (b) Email Summary 3 June 2014.
302 Exhibit B-19 MFR (b) Telephone Interview 3 June 2014.
303 See Exhibit H-11 Lopez-Lopez Polypharmacy Timeline.
304 Exhibit B-59 DA Form 2823 (b) Statement 28 April 2014.
306 Exhibit C-14 MFR (b) Email Summary 3 June 2014.
(41) It would take 216 full-time clinical pharmacists to interview every Soldier in every bucket of the polypharmacy policy. The Army currently has forty-six authorizations for clinical pharmacists. At present time, there are fifty-six additional over-hires bringing the total to 102 clinical pharmacists. Each MTF must fund their own polypharmacy program internally, so these over-hires are funded through various means at different MTFs. Many MTFs do not have enough pharmacists to perform any polypharmacy at all.

(42) Polypharmacy is difficult to determine from just looking at a medical record. Just because a Soldier appears on a polypharmacy list does not mean that side effects are occurring, or that any medication effect is interfering with an Army duty. The actual positive polypharmacy status may be very brief if only a few days’ worth of one medication is given. Moreover, just because a patient is prescribed certain medications does not mean he is actually taking all of them. Soldiers often stop medications due to side effects and may never inform the provider. Medications such as tramadol or hydroxyzine are taken only when needed for symptom relief, and may be taken multiple times per day. A ten tab supply that can be taken every six hours could be used up in 2.5 days at the maximum rate, or could be taken only once every seven days if symptoms are infrequent.

(43) A clinical interview may be needed to determine if individuals on the PEC-B polypharmacy list are actually in a bucket or not. Many pharmacy operations may not have the time to conduct clinical interviews of patients, or may ask the patients’ providers for assistance. The Army does not possess adequate pharmacist staffing to meet the work requirements of a fully-implemented polypharmacy program. Although some posts like Fort Leonard Wood may have a clinical pharmacist to work exclusively on polypharmacy, others such as Fort Bliss may double-task a regular pharmacist to take on the clinical pharmacist duty.

(44) The polypharmacy policy represents a backdoor method for providing possibly pertinent BH information to commanders. The policy states that healthcare providers will seek collaborative communication with commanders IAW OTSG/MEDCOM Policy Memo 12-062. The latter document allows for passing of HIPAA-privileged information to commanders when a Soldier’s health status threatens the mission of individual safety, among several other exceptions to HIPAA.

---

307 Exhibit F-1 MFR Telephone Interview 3 June 2014.
308 Exhibit F-1 MFR Telephone Interview 3 June 2014.
Implementation of the polypharmacy policy varies between posts because the policy does not require the lists to go directly to commanders. The lists are sent to providers to manage the Soldiers on the list. Those providers, especially those organic to line units, may choose to keep their commanders informed if risks exist. Fort Leonard Wood stated that the information is not passed to commanders. The policy clearly states that commanders should be informed when medication effects or side effects may interfere with or impair duty performance or mission execution.

**c. Findings.**

1. After an independent review of the medical and behavioral health care and treatment provided to SPC Lopez-Lopez, no deviation from standard of care occurred in any component of the medical treatment continuum. Access to care (length of wait for an appointment) met MEDCOM standards at Fort Bliss, Fort Leonard Wood, and Fort Hood.

2. There was no evidence that any medication, or combination of medications, caused suicidal and/or homicidal thoughts in SPC Lopez-Lopez.

3. OTSG Policy 13-007 on hand-over of BH information is supposed to streamline information sharing, but in this case, no BH information was shared between Fort Bliss, Fort Leonard Wood, and Fort Hood.

4. There was no evidence that SPC Lopez-Lopez’s polypharmacy positive status would have triggered a high-risk flagging even if it had been communicated between posts or sent to commands. There was no evidence that successful information transfer of the polypharmacy status between posts would have prevented the events of 2 April 14.

**b. Recommendations.**

---

311 Exhibit C-14 MFR (b) (6) Email Summary 3 June 2014.

312 Exhibit H-1 Lopez-Lopez AHLTA, note dated 10 March 2014 and Exhibit D-63 MFR (b) (6) Email Summary 3 June 2014.
(1) Update policy to streamline transfer of behavioral health information in synch with installation in/out-processing policies (OTSG lead).

(2) Assess ways to improve the polypharmacy policy and to identify the appropriate resourcing to execute the policy (OTSG lead).

(3) Assess ways to enable transfer of polypharmacy information between posts when Soldiers PCS or go on long-term TDY (OTSG lead).\(^{313}\)

5. Enlistment. This question contains two subparts addressed in 5.a-5.b below

a. Assess whether SPC Lopez's initial enlistment into the Army National Guard (ARNG), as well as his subsequent enlistment into the Regular Army, complied with applicable Army programs, policies, processes and procedures, including, but not limited to, AR 601-210, Active and Reserve Components Enlistment Program.

(1) Background.

(a) Army Regulation (AR) 601-210, Active and Reserve Components Enlistment Program (8 March 2011, RAR 12 March 2013) governs eligibility criteria, policies, and procedures for enlistment and processing of persons into the Regular Army, the Army Reserve, and the Army National Guard.\(^{314}\)\(^{ }^{ }^{ }\) IAW AR 601-210, all non-prior service applicants must meet the basic eligibility requirements contained in Chapter 2, and Prior Service applicants must meet the eligibility requirements in Chapter 3.\(^{315}\) An applicant who does not meet all the requirements for enlistment may be granted a waiver in order to join. Waiver categories include medical, administrative (dependency and all reentry eligibility (RE) code waivers), DAT (Drug and Alcohol Test), and conduct (minor non-traffic, conduct, and major misconduct).

(b) Soldiers who are currently serving in the ARNG and desire to transfer to the Regular Army must meet the requirement in paragraph 5-20 and 5-21. Specifically they must have successfully completed required Initial Active Duty Training (IADT), have been awarded a Military Occupational Specialty (MOS); have received clearance from the appropriate approval authority for release (DD Form 368); have not been alerted

\(^{313}\) These recommendations are currently in various phases of development at OTSG. OTSG is moving toward use of an Information Technology (IT) solution called the Behavioral Health Data Platform (BHDP). BHDP is already in use by providers to share information. Future ideas include allowing limited access to the system by commands for threat management and ways to flag PCS-ing Soldiers for BH needs, including Family Advocacy Program (FAP) open cases, or polypharmacy concerns.

\(^{314}\) Exhibit L-31 AR 601-210 Active and Reserve Components Enlistment Program.

\(^{315}\) Exhibit L-31 AR 601-210 Active and Reserve Components Enlistment Program.
mobilization; and have not been notified of orders directing involuntary order to Active Duty, as well as other criteria.  

(2) Discussion.

(a) SPC Lopez-Lopez enlisted in the Puerto Rico Army National Guard (ARNG) on 4 January 1999 and was discharged on 30 November 1999 for Entry Level Performance and Conduct with a character of service of Uncharacterized. He was discharged because he failed to complete the Pre-BCT English Language Course. There is no record of him starting or completing initial entry training during this period. SPC Lopez-Lopez reentered the PR ARNG on 30 April 2003 as a MOS 11B, Infantryman, after obtaining an enlistment waiver due to his previous Entry Level Performance and Conduct discharge. He required no additional waivers to enlist the second time. On 30 March 2010, he was released from the ARNG and enlisted in the Active Component (AC) (effective 1 April 2010) as an 11B. He was assigned to the 1st Armored Division (and subsequently to 4-6 Infantry), on 13 April 2010. During his AC enlistment processing, the U.S. Army Recruiting Command (USAREC) conducted an Electronic Fingerprint Capture (fingerprint check with law enforcement databases) and confirmed SPC Lopez-Lopez had no previous law violations.

(b) Because his MOS did not require a security clearance, his National Agency Check with Law and Credit (NACLC) Personnel Security Investigation (PSI) was not adjudicated. Accordingly, SPC Lopez-Lopez never received a favorably adjudicated PSI upon his enlistment in 2003. The Army continues to submit PSIs in accordance with DoD guidance; however, only Soldiers entering a MOS that requires a security clearance are being adjudicated. ASA(M&RA) is coordinating draft policy that closes the gap concerning the military population who do not have favorably adjudicated background investigations. Military suitability must comply with the intent of Homeland Security policy which requires the Army to establish policy to mandate that all accessions attain a favorably adjudicated personnel security investigation and afford the military population an appeals process to mitigate derogatory information discovered in the vetting process. The Army, as part of its implementation of Homeland Security Presidential Directive 12, will continue to work with DoD to ensure that DoDCAF adjudicates all PSIs of new accessions in FY15 regardless of whether their MOS requires a security clearance.

(3) Findings.

316 Exhibit L-31 AR 601-210 Active and Reserve Components Enlistment Program.
317 Exhibit G-10 Lopez-Lopez AMHRR, at 89.
318 Exhibit G-10 Lopez-Lopez AMHRR, at 85.
319 Exhibit G-10 Lopez-Lopez AMHRR, at 215.
320 Exhibit G-10 Lopez-Lopez AMHRR, at 215.
(a) SPC Lopez-Lopez’s enlistment into the ARNG in 2003 and subsequent enlistment into the Active Component in 2010 complied with the processes and procedures contained in AR 601-210.

(b) SPC Lopez-Lopez’s PSI did not require adjudication when he joined the ARNG or Active Component because he was not entering a MOS that required a security clearance.\(^{322}\)

(c) A review of SPC Lopez-Lopez’s SF-86 shows that he was not truthful about his financial situation upon enlistment. However, had SPC Lopez-Lopez’s entry PSI been adjudicated, based on the outcomes of similar cases, he still may have been allowed to enlist even though he had delinquent debt of approximately $14,000.\(^{323}\)

(4) **Recommendation.** Require a favorably adjudicated PSI for all new enlistees in accordance with military suitability requirements. Due to resourcing, current enlistment policy only requires submission of the PSI, but it does not require the PSI to be adjudicated unless the applicant’s MOS requires a Secret or higher clearance.\(^{324}\)

(ASA(M&RA) lead)

\[b. \text{Assess the sufficiency of Army programs, policies, processes, procedures and systems for sharing relevant information regarding Soldiers who are transferring between Components/Services, or who have prior service in another Component/Service.}^{325}\]

(1) **Background.** Personnel information on Soldiers serving in other services or the three Army components is maintained in the Defense Management Data Center (DMDC) database.\(^{326}\) Soldiers transitioning from other Services/Army Components are required to provide the accessioning agency a DD Form 368 (Request for conditional release) and their DD Form 214 (Certificate of Release or Discharge from Active Duty) or NGB 22 (National Guard Report of Separation and Record of Service) which shows the type of separation, character of service, separation authority, separation code, and the reentry code.\(^{327}\)

(2) **Discussion.** When a Soldier transfers from one component/service to another, the accessioning agency will ensure they meet enlistment and processing standards in

---

\(^{322}\) Exhibit G-21 Lopez-Lopez MEPS Result and NACLC Screenshot.

\(^{323}\) Exhibit G-11 Lopez-Lopez SF-86 1 February 2010.

\(^{324}\) Exhibit L-31 AR 601-210 Active and Reserve Components Enlistment Program, para. 2-14.

\(^{325}\) Exhibit A-1 IO Appointment Memo 10 April 2014.

\(^{326}\) Exhibit L-111 DODI 1205.19 - Procedures for Transfer of Members Between Reserve and Regular Components of the Military Services 3 April 95 and Exhibit L-112 DODI 1304.02 - Accession Processing Data Collection Forms 9 September 2011.

\(^{327}\) Exhibit L-31 AR 601-210 - Active and Reserve Components Enlistment Program 12 March 2013, Para 5-20 & 5-21.
AR 601-210 prior to being allowed to sign a contract. During processing of an applicant USAREC also does an Electronic Fingerprint Capture to check for law violations (SPC Lopez-Lopez had no law violations). Additionally, they are required to initiate a PSI; however, in SPC Lopez-Lopez’s case, no investigation was required because he had submitted one for the ARNG within the last ten years.

(3) Findings.

(a) All relevant accessioning data necessary for transfer between services or Army components is stored within the DMDC and allows for the effective transition of Soldiers across components/services.

(b) The programs, policies, processes, procedures and systems are sufficient. In this case, the data on SPC Lopez-Lopez was accessible.

(4) Recommendations. None

6. Reclassification. This question contains four subparts addressed at 6.a-6.d below.

a. Determine whether SPC Lopez’s reclassification was voluntary or mandatory.

(1) Background. AR 614-200, Enlisted Assignments and Utilization Management, and AR 601-280, Army Retention Program, provide reenlistment/reclassification authorities a tool to manage reenlistment, extensions, and reclassification of enlisted Soldiers. Additionally, Army Directive 2012-18 rescinds AR 600-60 and replaces it with a streamlined review process for MOS administrative retention, known as MAR2. MAR2 is an administrative process for Soldiers who meet medical retention standards, but who nonetheless may not be able to satisfactorily perform the duties their primary MOS requires. The MAR2 program ensures that Soldiers who are issued a P3 or P4 profile have an administrative review to see if the physical limitations on their profile prohibit them from performing in their current MOS/AOC. Soldiers are counseled by the Battalion Career Counselor and Commander and are informed that the MAR2 process will result in them either being retained in their current MOS, reclassified to a new MOS, or recommended for Medical Evaluation Board (MEB). The Soldier’s MAR2 packet is submitted to HRC and they determine what MOS the Soldier is qualified to reclassify into based on the Soldier’s physical limitations. HRC issues a
Reclassification Decision Report that notifies the Soldier of his new MOS and the effective reclassification date.

(2) **Discussion.** SPC Lopez-Lopez underwent the MOS Administrative Retention Review (MAR2) process and on 23 October 2013, HRC directed that he be reclassified to MOS 88M, Motor Transport Operator. According to his orders, the effective reclassification date was 4 February 2014 or upon completion of AIT training.

(3) **Findings.** SPC Lopez-Lopez’s reclassification was mandatory based on his permanent profile which impacted his ability to meet the 11B MOS requirements, as described in DA Pam 611-21. Although it was a mandatory reclassification, SPC Lopez-Lopez was excited about changing his MOS to 88M and the opportunity to PCS to Fort Hood following Advanced Individual Training (AIT).

(4) **Recommendations.** None.

b. Assess whether his reclassification complied with current Army programs, policies, processes and procedures, including, but not limited to, AR 614-200, Enlisted Assignments and Utilizations Management (26 February 2009, RAR 11 October 2011).

(1) **Background.**

(a) The MOS reclassification for Soldiers who do not meet their MOS requirements follows the MAR2 process (which replaced the MOS/Medical Retention Board). The new MAR2 policy includes a process to identify Soldiers with medical limitations and an administrative review procedure to determine if they meet their MOS standards.

(b) A Soldier can either be retained in their current MOS (with proponent waiver), reclassify to a new MOS, or get referred to a MEB or Physical Evaluation Board (PEB). HRC is responsible for rendering a decision on the MAR2 packet submitted by the Soldier. If the Soldier is reclassified to a new MOS, HRC will schedule MOS training and issue new assignment instructions based on AR 614-200.

(2) **Discussion.** SPC Lopez-Lopez received a permanent profile, underwent the MAR2 process, and was reclassified to MOS 88M, Motor Transport Operator, by HRC.

---

334 Exhibit G-10 Lopez-Lopez AMHRR, at 46.
335 Exhibit L-33 AR 611-1 - Military Occupational Classification Structure Development and Implementation, 30 September 1997.
336 Exhibit B-8 DA Form 2823 Statement 28 April 2014.
337 Exhibit A-1 IO Appointment Memo 10 April 2014.
on 3 December 2013. He was ordered to PCS to Fort Hood upon completion of 88M AIT at Fort Leonard Wood. SPC Lopez-Lopez went TDY to Fort Leonard Wood enroute to Fort Hood, beginning AIT on 29 November 2013. Upon graduation on 4 February 2014, he drove to his new duty assignment of Fort Hood. On 5 February 2014, he reported and in-processed into Fort Hood, and was assigned to the 154th CTC on 18 February 2014. The 13th SC(E) strength for 88M skill level 10 Soldiers was approximately 87% of authorizations during the time SPC Lopez-Lopez was assigned to the unit. The strength for 88M skill level 20 Soldiers was approximately 67%. The strength of the 154th CTC was much lower (32%), since Soldiers were pulled from the 154th to bring the 96th and 297th Transportation Companies to 100% prior their deployment.

(3) Finding. SPC Lopez-Lopez’s reclassification to 88M complied with current Army programs, policies and processes and procedures. HRC reclassifies Soldiers into shortage MOSs that meet the restrictions of the Soldier’s medical profile. In this case, SPC Lopez-Lopez could not perform as an 11B but could perform as an 88M.

(4) Recommendations. None.

c. Assess whether the timing and/or circumstances surrounding his reclassification may have exacerbated any medical condition or interfered with his medical treatment.

(1) Background. SPC Lopez-Lopez was reclassified from an 11B to an 88M as a result of his permanent profile for . His initial active duty entry PULHES was 111111 and his PULHES after MAR2 was 211311 (UNCLASSIFIED USR extract).
Although he may not have really wanted to be an 88M, it was apparently still an improvement, in his eyes, to being an 11B.

(b) SPC Lopez-Lopez’s departure from Fort Bliss was nonstandard in that another Soldier out-processed for him. By doing so, SPC Lopez-Lopez was able to attend AIT immediately after his mother’s funeral, but he later had to seek a refill of his medication through the Emergency Department at Fort Leonard Wood, with a referral to sick call. He expressed anger about this refill procedure to a peer.

(3) Finding. As explained in Part IV, para. 4 above, the MOS reclassification itself did not exacerbate or interfere with his medical condition or treatment. The circumstances under which he transitioned from Fort Bliss to AIT could have been better, but there is no clear evidence it impacted his medical condition or medical treatment, as he ultimately remained on his prescribed medications and continued to report a stable behavioral health status at Fort Hood.

(4) Recommendations. None.

   d. Assess whether the reclassification procedures hampered the sharing of information between commands as SPC Lopez transitioned between units.

   (1) Background. SPC Lopez-Lopez was reclassified from an 11B to an 88M as a result of his permanent profile. His reclassification was based on repeat visits to medical providers for the same complaint.

   (2) Discussion. The reclassification procedures, discussed in Part IV, para. 6 above, did not hamper the sharing of information between commands. The reclassification led to a permanent change of station from Fort Bliss to Fort Hood, but all of SPC Lopez-Lopez’s reclassification records were available to the gaining command in the RETAIN automated retention system. Further information on Soldiers (e.g.,

---

349 Exhibit B-61 DA Form 2823 Statement 28 April 2014 to 15-6 team.
350 Exhibit H-1 Lopez-Lopez AHLTA note dtd 28 October 2013; Exhibit B-61 DA Form 2823 Statement 28 April 2014.
351 Exhibit B-61 DA Form 2823 Statement 28 April 2014 to 15-6 team.
352 Exhibit E-13 DA Form 2823 Statement 8 May 2014.
353 Exhibit A-1 IO Appointment Memo 10 April 2014.
counseling files, locally filed adverse actions, recommendations for promotion, records of family issues) is not typically shared between commands and would require the losing command to contact the gaining command directly. In SPC Lopez-Lopez’s case, this would have been more difficult to coordinate because he attended 88M training at Fort Leonard Wood enroute to Fort Hood.

(3) **Findings.** The reclassification itself did not hamper the sharing of information between commands as SPC Lopez-Lopez transitioned between units.

(4) **Recommendations.** None.

7. **Reassignment.** This question contains two subparts addressed in 7.a-7.b below.

a. Assess whether SPC Lopez's reassignment from Fort Bliss to Fort Hood complied with current Army programs, policies, processes and procedures, including, but not limited to: AR 600–8, The Total Army Sponsorship Program (4 April 2006); AR 600–8–11, Reassignment (1 May 2007, RAR 18 October 2012); AR 600–8–101, Processing Personnel (In–, Out–, Soldier Readiness, Mobilization and Deployment Processing)(18 July 2003); and DA Pam 600–8–101, Processing Personnel (In–, Out–, Soldier Readiness, Mobilization and Deployment Processing)(28 May 2003).

(1) **Background.**

(a) Soldier reassignment is a complicated process involving HRC, the Military Personnel Division (MPD), and the Soldier’s unit. The goal of the personnel assignment system is to place the right Soldier in the right job at the right time. AR 614–100 and AR 614–200 provide overviews of the personnel assignment system. Enlisted reassignments follow procedures contained in AR 614–200 and AR 614–30. The personnel reassignment process ensures that the eligibility of Soldiers receiving Assignment Instructions (AI) is verified, that travel assistance is provided, that Soldiers are prepared for movement, and that their departure is verified. Reassignment processing begins upon receipt of Assignment Instructions and ends with the issuance of PCS orders in accordance with AR 600–8–105.

(b) Gaps exist between the levy briefing process, orders publication, and in/out processing actions. AR 600–8–105 contains instructions for preparing PCS orders and DD Form 1610. It is essential that special instructions are inserted into orders to document requirements and entitlements in accordance with AR 600–8–105, para. 2–9, and to ensure the Soldier has all information concerning the gaining command’s special requirements. During the orders process, the “art” of integrating the DA-directed instructions, special requirements, local command instructions, and training instructions often produces conflicting guidance and ambiguity in actions required to complete a PCS move.

355 Exhibit A-1 IO Appointment Memo 10 April 2014.
(c) Currently, TDY and return is funded by the losing unit, and TDY enroute is paid for by Military Training Specific Allotment (MTSA) funding. MTSA funds are centrally allocated for DA-directed training, as opposed to other unit-funded training opportunities. Per HRC, approximately 89% of reclassifications involve CONUS Soldiers, and going TDY and return solves several issues. It allows Soldiers to attend training and return to their previous duty station to clear and PCS with their family. Using TDY and return also facilitates a smoother transition if a Soldier fails to meet training standards (mental or physical) and must return to his losing unit.

(d) HQDA EXORD 018-12, DTG 030426Z November 2011 concluded, “The current sponsorship program is not effectively implemented, utilized, monitored, and inspected Army wide. The Army Family Action Plan (AFAP) process further identified Soldiers arriving at some gaining installations/units do not benefit from having an assigned sponsor. If assigned, the sponsor may not be adequately trained. A Soldier’s critical first impression may be negatively impacted due to inadequate sponsorship.”

(e) The Total Army Sponsorship Program is intended to assist Soldiers, civilian employees, and families during the reassignment process and to assist families geographically separated from the Soldier or civilian employee sponsor due to duty requirements. The Army Family Action Plan (AFAP), Issue #609, November 2006 identified the Total Army Sponsorship Program (TASP) as having significant gaps and weaknesses.

(f) On 26 March 2014, the Army issued an ALARACT to approve and institute a ninety-day test pilot of new TASP procedures, using an automated system. The goal is to refine sponsorship procedures using the Army Career Tracker (ACT) automated process. The IMCOM G-1 will execute the TASP pilot, under the overall direction of the Assistant Chief of Staff for Installation Management (ACSIM) with implementation support from Army G-1 and TRADOC. Effective 17 March 2014 and continuing through 13 June 2014, personnel at the pilot sites would not be issued PCS orders until the gaining unit makes initial contact, appoints a sponsor, and confirms the sponsor’s identification within the ACT sponsorship module.

(2) Discussion.

356 Exhibit F-7 Email Traffic 13 May 2014.
357 Exhibit L-118 EXORD 018-12 ISO the Total Army Sponsorship Program (TASP) 3 November 2011.
358 Exhibit L-21 Army Regulation 600-8-8, The Total Army Sponsorship Program 4 April 06, p2, 1-7.
360 Exhibit L-115 ALARACT 2014-083 Announcement of the Total Army Sponsorship Program (TASP) 90 Day Army Career tracker (ACT) Sponsorship Test 26 March 2014.
361 Exhibit L-115 ALARACT 2014-083 Announcement of the Total Army Sponsorship Program (TASP) 90 Day Army Career tracker (ACT) Sponsorship Test 26 March 2014.
(a) When SPC Lopez-Lopez filled out his PCS Option Statement at Fort Bliss, he selected option three, electing to return to Fort Bliss upon completion of TDY to move his dependents to Fort Hood. His election was noted at paragraph (v) of his 29 August 2013 orders. The preceding paragraph (u) of this order indicates the Soldier is TDY enroute—a patent conflict. His orders were amended on 23 October 2013 changing his report date to Fort Hood. A second amendment to his orders directed him to report early to Fort Hood with no guidance on how he was to move his family to Fort Hood.

(b) The Fort Bliss Human Resources (HR) MPD issued the second amended order to minimize the Soldier’s need to use leave as a result of the fifty-five days between the end of his course and his report date to Fort Hood. The second amendment was published on the day SPC Lopez-Lopez received the Red Cross notice of his mother’s death. In order for SPC Lopez-Lopez to attend his mother’s funeral and meet his departure date for the AIT at Fort Leonard Wood, his unit tasked to complete the out-processing by proxy. AR 600-8-105 is silent on how a unit or installation may clear a Soldier who is not present. SPC Lopez-Lopez signed in from Emergency Leave and departed Fort Bliss on 26 November 2013, dropping his wife off in Odessa, Texas on his way to Missouri. Aside from leave during training, SPC Lopez-Lopez, and their child did not live together until approximately four months later, on 30 March 2014. The inconsistent guidance in SPC Lopez-Lopez’s orders required him to travel directly to Fort Hood from Fort Leonard Wood. In addition, SPC Lopez-Lopez did not fully engage the personnel at Fort Hood’s Copeland Soldier Support Center to determine the time or method of his return to Fort Bliss to move his family members to Fort Hood. 2nd Platoon Leader, stated he was also confused with the orders. His experience was Soldiers normally went TDY and return in the event they failed the course. Additionally, Soldiers could then out-process and move with their family.

(c) Fort Hood is participating in TASP pilot (post-incident). At Fort Hood, the Copeland Soldier Support Center manages the program. TASP is a commander’s

---

365 Exhibit E-7 MFR Telephone Interview 21 May 2014.
366 Exhibit D-80 DA Form 2823 Statement 23 April 2014.
367 Exhibit B-49 DA Form 2823 Statement 29 April 2014.
368 Exhibit L-116 OPORD 13-044 Total Army Sponsorship Program (TASP) 180 Day Test Pilot 27 November 2012; Exhibit L-117 OPORD PW 14-03-0251 Army Career Tracker In Support of the TASP 90-Day Test Pilot 31 March 2014.
369 Exhibit D-16 DA Form 2823 Statement 23 April 2014; Exhibit D-38 DA Form 2823 Statement 23 April 2014.
program, although sponsorship training support, when requested, is provided by the FMWR and Army Community Service (ACS) personnel. 370

(d) SPC Lopez-Lopez was not officially assigned a unit sponsor at any time during his PCS process. 371 Moreover (b) (6) (154 CTC Acting Squad Leader) indicated that SPC Lopez-Lopez’s reception and integration into the installation and unit was ad hoc. 372 (b) (6) stated that due to high unit OPTEMPO, unit strength and the requirement for NCOs to be in the trucks for every mission meant that “priority Soldier issues” were on the “back burner.” 373

(3) Findings.

(a) The appropriate instructions and entitlements were not inserted into SPC Lopez-Lopez’s orders to document them in accordance with AR 600–8–105, paragraph 2–9. 374 Specifically, the TDY Schooling in Conjunction with PCS Option Statement found in AR 600-8-11 was not adhered to in this case. 375

(b) SPC Lopez-Lopez’s PCS orders contained the entry “TDY enroute” in section (u), preceding the class date and location. This is a standard Army Training Resources System (ATTRS) entry, but it caused confusion with the following entry (paragraph (v)), which authorized SPC Lopez-Lopez to return to Fort Bliss to move his family. The ATTRS entry is a component of accounting for training funds solely where MTSA funds are centrally allocated for DA-directed training, vice unit-funded training opportunities.

(c) AR 600-8-105 and AR 600-8-10, Leaves and Passes are not clear on how to process requests for PTDY in conjunction with a PCS move. SPC Lopez-Lopez sought guidance when he returned from emergency leave and was instructed to get his PTDY at Fort Leonard Wood. 376 By the time SPC Lopez-Lopez’s PTDY request was signed by his battalion commander, he had already secured an apartment, moved his family and household goods to Killeen, and would not have been entitled to PTDY for house-hunting. 377

(d) SPC Lopez-Lopez did not have his PTDY approved at Fort Bliss for his house-hunting at Fort Hood, and had difficulties getting the PTDY approved when he

370 Exhibit L-118 EXORD 018-12 ISO the Total Army Sponsorship Program (TASP) 3 November 2011, section 1.D.
371 Exhibit D-81 DA Form 2823 (b) (6) Statement 22 April 2014.
372 Exhibit D-81 DA Form 2823 (b) (6) Statement 22 April 2014.
373 Exhibit D-3 DA Form 2823 (b) (6) Statement 23 April 2014; Exhibit D-81 DA Form 2823 (b) (6) April 2014; Exhibit D-56 DA Form 2823 (b) (6) Statement 22 April 2014.
374 Exhibit N-20 EXSUM - Telecom with IMCOM and HRC 30 May 2014. Orders were confusing, only 50% of HRC’s instructions got on the orders.
375 Exhibit G-14 Lopez-Lopez Levy Packet, includes MILPERCEN Form (now discontinued) used by MPD Ft Bliss.
376 Exhibit B-49 DA Form 2823 (b) (6) Statement 29 April 2014.
377 Exhibit L-22 AR 600-8-10 – Leaves and Passes, 4 August 2011, para. 5-32 (f).
arrived at Fort Hood because of requirements to in-process the installation and his unit.\footnote{Exhibit D-81 DA Form 2823 (b) (6) Statement 22 April 2014.}

(e) We can only speculate what would have happened had SPC Lopez-Lopez’s PTDY been approved at Fort Bliss or immediately upon arrival at Fort Hood. However, it is important to emphasize that having his most immediate support system (i.e., his family) with him during the weeks leading up to the incident might have helped him deal with the cumulative stressors that led up to and contributed to his actions on 2 April 2014.

(4) Recommendations.

(a) Implement a tiger team to update the guidance and regulation specific to DA Form 5118 for control and implementation of elected PCS options. (Lead G-1, G-3/5/7 and ACSIM assist)

(b) Revise Army Regulations 600-8-105 and 600-8-10 to clarify leave authorization/options for each type of leave category and update DA Form 5118 to specify options for Soldier election or requirement. (G-1 Lead, ACSIM assist)

(c) Evaluate TASP pilot results for Army-wide implementation. If adopted, revise AR 600-8-8 with applicable ACT procedural guidelines. In addition, consider realignment of the sponsorship program to HRC/G-1. (ACSIM lead)

(d) Implement procedures for Soldiers to gain PTDY approval prior to PCS-ing or at gaining installation, without having to first in-process the installation and unit. (ACSIM lead)

(e) Continue to support initiatives that leverage the existing DAMPS system capabilities to streamline and simplify PCS orders (with TAGD, EPMD, and OPMD). This G-3/5/7 initiative, known as the Enterprise travel order writing solution, will serve as the interim Army capability until future transition to the Integrated Pay and Personnel System (IPPS-A). (G-3/5/7 lead)

(f) Further develop and implement, for consistency across all installations, enterprise-level standard web pages to disseminate information on common in/out processing procedures. (ACSIM lead)

(g) Revamp levy briefing instructions, including all entitlements and Soldier options, using an on-line format with all information the unit, garrison, and HRC would need to process an order accurately. This recommendation has the potential to reduce the manpower load needed to process amendments. Quality control measures must be clearly articulated in policy and linked to the service provider’s Installation or Garrison inspection program to ensure compliance and accountability. (Senior Commanders and IMCOM lead)
b. Assess the sufficiency of Army programs, policies, processes, procedures and systems for sharing relevant information regarding Soldiers who are being reassigned from one duty station to another and the sufficiency of reception programs when transferring between duty locations or units.  

(1) Background. Part IV, para. 6.d., discusses information sharing as it relates to reclassification. The following focuses on information sharing as it pertains to high-risk Soldiers. The Army does not have a system or procedures for sharing information relevant to identifying risk between commanders when Soldiers transfer from one installation to another. The Army Health Promotion Risk Reduction Suicide Prevention Report 2010 (Red Book) recognized the need to share information and for a risk reduction dashboard to help commanders manage high-risk Soldiers. The Army Health Promotion & Risk Reduction Council (AHPRRRC), now the Ready and Resilient Campaign (R2C), assigned to Army G-1 the task of developing a management information system to “provide Commanders the ability to detect, measure, and track unit-level risk behavior and to identify Soldiers who are high-risk in order to engage in prevention and intervention activities.” OTSG has a policy for handoff of BH care between posts when Soldiers transition between posts, as described in detail in para. 4 above.

(2) Discussion. The Commander’s Risk Reduction Dashboard (CRRD) will provide Soldier-level data on multiple risk factors. Reports will focus on Soldiers with known high-risk behaviors and newly-arrived Soldiers. Battalion and company commanders will have access to individual Soldier risk data. The CRRD is being developed to comply with current law and policy related to Privacy Act protected data and data protected under the HIPAA.

(3) Finding. Soldier information (e.g., unit and personnel databases, medical records, local counseling and disciplinary files) remains compartmentalized and does not adequately inform the chain of command about high-risk Soldiers. Although we cannot reasonably conclude that the CRRD would have prevented SPC Lopez-Lopez’s actions on 2 April, the CRRD can provide commanders timely, accurate awareness of the overall health and risk factors affecting their command. Further, the CRRD would allow oversight of actions taken to mitigate risk as well as detection and analysis of help-seeking or risk-taking trends.

(4) Recommendation. Continue to support and refine the CRRD proof of concept and rapidly work to attain Objective System IOC.

379 Exhibit A-1 IO Appointment Memo 10 April 2014.
380 Exhibit M-5 Army Health Promotion Risk Reduction Suicide Prevention Report 2010 (Red Book), at 212.
381 Exhibit K-7 CRRD Brief for 18 April 2014.
382 Exhibit K-7 CRRD Brief for 18 April 2014.
383 Exhibit M-5 Army Health Promotion Risk Reduction Suicide Prevention Report 2010 (Red Book), at 204-210.
8. **Physical Security at Fort Hood, Texas.**

Assess the sufficiency of systems for the safety and security of the Fort Hood installation and its personnel, including, but not limited to, policies regarding privately owned weapons. Determine whether these systems were subject to adequate oversight and enforcement, both generally and with respect to the shooting incident at Fort Hood, Texas, on 2 April 2014, and the actions of SPC Lopez-Lopez.  

a. **Background.** The Fort Hood physical security assessment conducted by the Investigation Team examined a wide variety of Army non-warfighting protection functions to examine the sufficiency of systems for the safety and security of Fort Hood and its personnel. Specifically, the investigating team assessed the adequacy and effectiveness of Army policy and procedures related to: privately owned weapons; access control; random antiterrorism measures program; law enforcement command and control; law enforcement training; law enforcement partnerships with local, state and federal law enforcement agencies; suspicious activity reporting; police intelligence operations; and execution of the Fort Hood Protection program. Overall, protection policies at Fort Hood were aligned and nested with the Department of the Army policies. The assessment revealed that Fort Hood’s protection plan; protection forums; higher headquarters assessment; local vulnerability assessment; suspicious activity reporting; law enforcement operations; law enforcement and community active shooter training; and Military Police Certification Program were executed in accordance with Army protection policies. Furthermore, the investigation revealed strong and effective partnerships exist with the local, state and federal law enforcement agencies. The investigation identified minor shortcomings in visitor and contractor vetting and in the management of privately owned firearms on the installation.

b. **Discussion.**

(1) **Installation Protection Forums.** Strong command emphasis exists concerning the execution of the Installation Protection Program ensuring the security and safety of the Fort Hood Installation and personnel. Fort Hood meets Army Standards concerning the execution of the Installation Protect Executive Board chaired by the Deputy Commanding General and Installation Protection Working Group and exceeds Army standard concerning Threat Working Group.  

(2) **Privately Owned Weapons (POW).** On 23 February 2014, SPC Lopez-Lopez purchased a Smith and Wesson, Model M&P .45 pistol from AAFES on Fort Hood, and signed the AAFES Fort Hood Firearms Requirements Information Form that addresses the Fort Hood POW Registration Policy. At the time of purchase, SPC

---

384 Exhibit A-1 IO Appointment Memo 10 April 2014.


386 Exhibit N-3 AAFES Firearms Requirements Form (signed by Lopez-Lopez) 23 February 2014 (states if living in the barracks, the POW shall immediately be stored in the arms room.)
Lopez-Lopez was assigned a room in the Fort Hood transient barracks. According to SPC Lopez-Lopez’s statements to the Killeen Police Department, he took possession of his off-post apartment on 28 February 2014. The handgun was allegedly stolen from his apartment between 2100 hours on 28 February 2014 and 1000 hours on 1 March 2014. Instead of storing the firearm in the arms room, it appears SPC Lopez-Lopez may have kept his POW either inside his transient room or his vehicle.

(a) Fort Hood meets the majority of Army requirements for the registration of POWs. The Fort Hood weapons regulation and Privately Owned Firearms (POF) policy require all Service Members and their dependents living, residing, or temporarily staying on Fort Hood to register POWs kept on post with the DES. Fort Hood does not meet the Army requirement for all Soldiers and family members residing on the installation to obtain the unit commander’s approval to register POFs. Instead, Fort Hood requires Soldiers in the rank of Staff Sergeant and below to obtain approval from the unit commander. Fort Hood does not require Soldiers in the rank of Sergeant First Class and above to obtain the unit commander’s approval.

(b) The December 3, 2010, Secretary of Defense message directed all DoD components to require mandatory registration of POF for all personnel who bring or store a POF on an installation, whether or not they live on the installation. Army policy for POW aligns with this policy, except it does not incorporate the DoD policy for POF purchases on installations. Fort Hood regulations do address on-post purchases, however. Currently AAFES sells firearms in 68 locations.

(c) With a limited exception, Federal law prohibits collecting information about POWs from service members who do not reside or bring POWs onto a military installation.
(d) The Army lacks policy directing installations to deregister firearms in the Centralized Operation Police Suite (COPS) upon departure from the installation. As a result, installations may not have an accurate count of POWs currently registered on the installation. For instance, there are approximately 9,800 weapons registered on Fort Hood.

(3) **Installation Access Control – Fort Hood.** Access Control procedures meet most of the DoD minimum standards for controlling entry (ACP). However, Fort Hood policy allows visitors and contractors to enter the installation without being properly vetted. Specifically, only the driver of a visitor or contractor vehicle is vetted. Passengers are not vetted. This procedure is not aligned with DoD or Army policy stating non-Federal Government and non-DoD-issued card holders who are provided unescorted access require identity proofing and vetting to determine fitness and eligibility for access. Army Physical Security Policy requires the use of National Crime Information Center (NCIC) Interstate Identification Index (III) to screen and vet personnel.

(4) **Installation Access Control – General.** Evidence suggests that access control shortcomings are more widespread. DoD and Army policy requires non-USG...
ID card holder-vetting against NCIC, but only 50% of IMCOM and AMC installations have established a visitor control capability to do this.\(^\text{403}\) Many installations use commercial, non-compliant, background screening services in lieu of establishing visitor control operations. These commercial services do not vet against authoritative databases as was highlighted in a recent DoD IG Report.\(^\text{404}\)

(a) In December 2009, Directive Type Memorandum (DTM) 09-12 (responding to NDAA 2008, Section 1069) established DoD standards for identity proofing, background vetting and authentication of non USG ID card hold visitors and contractor personnel entering installations. The Army published implementing instructions in February 2011, codified in AR 190-13, which established the requirement to check criminal history records through the NCIC Interstate Identification Index (NCIC III) as the Army minimum baseline background check for entrance onto Army installations for uncleared contractors and visitors.\(^\text{405}\)

(b) The primary challenge in establishing NCIC for access control screening has been manning of visitor centers. Army installation visitor centers have been depleted due to fiscal pressure on IMCOM to cut personnel authorizations. There was also a reduction of personnel for Vehicle Registration operations (no longer required by policy) that could have been restructured for access control vetting.

(c) Currently, only about half of Army installations have fielded the capability to vet against NCIC-III for access, but those installations that have done so have been able to identify significant numbers of personnel with a felony criminal history. At Fort Bragg during November-December 2013, more than 650 persons were denied entry based on their derogatory criminal history records.\(^\text{406}\) Joint Base Lewis-McChord has been using NCIC-III since 2011; although initially they experienced a large increase in access to the installation using a valid Government issued identification (driver’s license) as a “valid access credential”. This procedure is not aligned with DoD or Army DoD policy, and violates the requirement for non-Federal Government and non-DoD-issued-card holders who are provided unescorted access to be properly vetted to determine fitness and eligibility for access.

\(^{403}\) PS IMCOM OPORD, 14-022, Enhancing Protection of Army Installations, By Regions, dated 14 April 2014.


\(^{406}\) Exhibit I-3 Fort Bragg Firearms Incident Data 2013-2014 (Fort Bragg Firearm Violations at Access Control Points (ACP)). In FY2013, Fort Bragg reported seventy-two weapons violations at ACP. For 1st and 2nd Qtr FY2014, Fort Bragg reported thirty-one weapons violations at ACP.
denials, these have fallen significantly as companies now avoid hiring persons with criminal histories. The main challenge at other installations is restoring the manning authorizations to operate visitor centers. OPMG is working with United States Army Manpower and Analysis Agency (USAMAA) and IMCOM to justify visitor center manning requirements based on installation population. The Secretary of the Army has directed the Army Staff to survey compliance with Army physical security policy requirements for vetting and identify additional resources that are needed.

(5) Random Antiterrorism Measures (RAM) Program. This investigation revealed that Fort Hood regularly conducts RAM and vehicle inspections required under AR 525-13, Antiterrorism, dated 11 September 2008. A segment of the Fort Hood RAM program focuses on installation ACPs. Prior to the 2014 incident, Fort Hood ACP RAM program was executed by three mobile patrols rotating between installation ACPs. For calendar year 2013, Fort Hood averaged one firearm violation per week. An average of fifty vehicles would be inspected daily. After the incident on 2 April 2014, Fort Hood mounted a deliberate RAM program conducting vehicle inspections at all ACPs. From 2 April to 22 May 2014, Fort Hood ACPs conducted a daily average of 1,456 vehicle inspections, discovering a total of seventeen firearm violations (unregistered firearms).

(6) Suspicious Activity Reporting. Fort Hood actively participates in the Federal Bureau of Investigation’s eGuardian system developed to report suspicious activity. DoD Instruction 2000.26, “Suspicious Activity Reporting (SAR)”, governs how the Department of Defense reports suspicious activities for all DoD components with law enforcement organizations. The eGuardian system is used for reporting, storing, and sharing unclassified suspicious activity reports dealing with information regarding a potential threat or suspicious activity related to DoD personnel, facilities, or forces in transit. The eGuardian system is the Federal Bureau of Investigation’s (FBI) unclassified repository for law enforcement suspicious activity reporting (SAR). The U.S. Army has been an active participant in the eGuardian program from its inception in December 2008.

---

407 Exhibit I-4 JBLM Firearms Incident Data June 2014 (Joint Base Lewis Mc Cord (JBLM) Firearm Violations at ACP). In FY2013, JBLM reported thirty-nine weapons violations at ACP. For 1st and 2nd Qtr FY2014, JBLM reported twenty-three weapons violations at ACP.

408 Exhibit L-123 PS IMCOM OPORD, 14-022, Enhancing Protection of Army Installations, By Regions, dated 14 April 2014.


410 Exhibit D-76 DA Form 2823 Statement 23 April 2014.

411 Exhibit D-106 Email 23 May 2014.

412 Exhibit D-76 DA Form 2823 Statement 23 April 2014.

413 Exhibit D-106 23 May 2014.

414 Exhibit L-121 DODI - Suspicious Activity Reporting 1 November 2011.
(a) In response to the Fort Hood Army Internal Review Team: Final Report, Finding 3.5, “the DoD does not have direct access to Force Protection (FP) threat reporting system for suspicious activity reports”, the DoD appointed the Secretary of the Army as the Executive Agent for eGuardian, through DoDI 2000.26, Suspicious Activity Reporting. The Office of the Provost Marshal General (OPMG) created and chairs a DoD eGuardian Working Group (eGWG) responsible for the oversight and management of the DoD’s use of the eGuardian system. CID is the Army’s Program Manager and is responsible for the Army’s participation and execution of the eGuardian program.

(b) There are currently 486 eGuardian accounts throughout the Army at CID organizations and Installation Provost Marshal/Directorate of Emergency Services Offices. Fort Hood maintains six PM/DES and sixteen CID eGuardian accounts, representing 5% of all Army eGuardian accounts.

(c) During FY13, the Army provided 260 SARs in the eGuardian system. In the same year, Fort Hood eGuardian users produced thirteen SARs, 5% of all Army SARs. In the first half of FY14, the Army has entered 116 SARs in the eGuardian system. Fort Hood eGuardian users have entered eight SARs into the eGuardian system, accounting for 7% of the Army SARs entered in FY14. In FY14, five of the 116 Army SARs are being further evaluated by the FBI to determine if there is a nexus to terrorism.

(7) Law Enforcement.

(a) Dual-hatting of MP Brigade Commander as Garrison DES. Dual-hatting the 89th MP Brigade Commander as the Fort Hood DES proved to be effective and efficient, because it created opportunities to build relationships between military and civilian police teams before 2 April, leading to unity of effort in response to the shooting. With a team of senior MP Officers and Department of the Army Civilian Police (DACP) working together on 2 April 2014, the full capabilities, capacity, knowledge, and experiences of both the DES and MP commands were brought together with dual-hatting. Dual-hatting proved to be efficient because the MP Brigade Commander owns the patrol assets and thus can move quickly to call up additional MP assets or logistical support during an incident. Furthermore, the 89th MP Brigade Commander appointed the 720th MP Battalion Commander as the Installation Provost Marshal, allowing for unity of effort among law enforcement assets. Finally, he appointed his Brigade CSM as the DES CSM to work with unit Command Sergeants Major concerning the manning and operations of Fort Hood ACPs.

---

415 Exhibit L-121 DODI - Suspicious Activity Reporting 1 November 2011.
416 Exhibit L-130 SECARMY Memo Law Enforcement Suspicious Activity Reporting (SAR) System - eGuardian 27 April 2010.
417 Exhibit F-3 (b)(6) 19 May 2014.
418 Exhibit F-3 Mr (b)(6) 19 May 2014 and Exhibit F-2 (b)(6) Email 27 May 2014.
(b) Military Police (MP) Certification Training. Fort Hood has a comprehensive MP Certification Program. Prior to performing unassisted law enforcement duties on Fort Hood, Military Police (MP) Soldiers must complete an extensive Police Orientation Course (POC). The POC is a two week course that consists of MP certifications (unarmed self defense, weapons qualification, Oleoresin Capsicum (OC) Pepper Spray, Taser); Problem Oriented Policing; Fort Hood Policies and Regulations; and Texas State Law.\textsuperscript{419} After completion of the POC, MPs participate in a four week On the Job Training (OJT) program with a certified Police Trained Officer, normally the team leader or squad leader.\textsuperscript{420}

(c) Fort Hood exceeds the annual Active Shooter response training requirement for Department of Army Civilian Police (DACP) and biennial training requirement for Military Police (MP) Soldiers. Fort Hood conducts monthly Active Shooter training for both MP soldiers and DACPs.\textsuperscript{421} Training consists of a weekly Table Top Exercise (TTX), monthly one hour Active Shooter practical exercise, and a semi-annual active shooter exercise.\textsuperscript{422}

(d) Fort Hood linked its Active Shooter Response training standards to the national Advanced Law Enforcement Rapid Response Training (ALERRT) program. ALERRT is a training program recognized and funded by the Department of Justice Bureau of Justice Assistance (BJA) and the Federal Bureau of Investigation (FBI).\textsuperscript{423} This is a Department of Justice endorsed standard that is maintained by the Federal Training Center (FLETC) in Glync, Georgia. Furthermore, in June 2013, the FBI partnered with the ALERRT Center in Texas and named the ALERRT their standard for active shooter response. To date, forty-six Fort Hood MPs and DACPs have attended this training.\textsuperscript{424}

(8) Criminal History Information Sharing.

(a) SPC Lopez-Lopez was assigned to the 154th CTC, 49th Trans (MC), 4th Sustainment Brigade on 18 February 2014. Evidence suggests that the 4th Sustainment Brigade did submit a request to the Fort Hood DES for criminal history checks for newly assigned brigade Soldiers for the month of March but did not include SPC Lopez-Lopez in the submission. However, if submitted, results for Army Law

\textsuperscript{419} Exhibit J-6 720th MP BN Training SOP 11 June 2013.
\textsuperscript{420} Exhibit J-6 720th MP BN Training SOP 11 June 2013.
\textsuperscript{421} Exhibit L-12 Army Regulation 190-56, The Army Civilian Police and Security Guard Program, dated 15 March 2013, addresses annual DACP training requirement and Exhibit L-124 STP19-31B, United States Army Military Police Field Training Manual, 1 March 2010, addresses the biennial requirement for MPs.
\textsuperscript{422} Exhibit L-12 Army Regulation 190-56, The Army Civilian Police and Security Guard Program, dated 15 March 2013, addresses annual DACP training requirement and Exhibit L-124 ST 19-31B, United States Army Military Police Field Training Manual, 1 March 2010, addresses the biennial requirement for MPs.
\textsuperscript{423} Exhibit D-27 DA Form 2823 Statement 23 April 2014.
\textsuperscript{424} Exhibit N-9 720th MP Battalion Training Statistics.
Enforcement Reporting Systems would have shown that SPC Lopez-Lopez did not have a criminal history.\textsuperscript{425}

(b) Army Directive 2013-16 (Providing Specified Law Enforcement Information to Commanders of Newly Assigned Soldiers), dated 14 February 2013 outlines a process for systematically informing commanders about the criminal history of newly assigned Soldiers to assist in the identification of high-risk Soldiers.\textsuperscript{426} This Directive authorizes Brigade level commanders to receive criminal history reports on newly assigned Soldiers from criminal records stored in Army Law Enforcement reporting systems. The intent is to provide commanders with a tool to assist in promoting health and discipline in their units by ensuring awareness of criminal history of newly assigned Soldiers. The Army began sharing criminal history in September 2013.\textsuperscript{427} As of 1 May 2014 a total of thirty-eight installations have received criminal history reports and submitted 46,743 Soldier names for criminal history checks.\textsuperscript{428} Of these, 2,548 (5\%) Soldiers were reported as having a criminal history, and 1,209 (2\%) had multiple offenses.\textsuperscript{428} Fort Hood began sharing criminal history in October 2013. As of 1 May 2014, Fort Hood has twenty-seven Brigade-level commands participating.\textsuperscript{430} From October 2013 to present, Fort Hood commands submitted 2,916 Soldier names (5\%) for criminal history checks. Soldiers were reported as having a criminal history; 55 (1\%) had multiple offenses.\textsuperscript{431}

(9) Higher Headquarters Assessments (HHA).

(a) DoDI 2000.16, DoD Antiterrorism (AT) Standards and AR 525-13, Antiterrorism Standard 31 require a comprehensive AT program review of subordinate commands at least once every three years so that commanders can make resource and operational decisions regarding AT measures.

(b) Fort Hood last received a program review from the Joint Staff Integrated Vulnerability Assessment (JSIVA) teams from 28 October through 2 November 2012.\textsuperscript{432} This review identified only five vulnerabilities on Fort Hood, at least three of which could be solved by procedural changes. The JSIVA team also lauded the Fort Hood

\textsuperscript{425} Exhibit N-6 CID MFR Lopez-Lopez Criminal History Check 30 May 2014.
\textsuperscript{426} Exhibit L-138 Secretary of the Army Directive 2013-16 (Providing Specified Law Enforcement Information to Commanders of Newly Assigned Soldiers), dated 14 February 2014.
\textsuperscript{427} Exhibit N-8 Info Paper - Fort Hood SA Directive on Criminal History Sharing 1 May 2014.
\textsuperscript{428} Exhibit F-5 Email 12 May 2014.
\textsuperscript{429} Exhibit N-8 Info Paper - Fort Hood SA Directive on Criminal History Sharing 1 May 2014.
\textsuperscript{430} Exhibit J-7 Info Paper - Fort Hood Implementation of SA Directive on Criminal History Sharing 1 May 2014.
\textsuperscript{431} Exhibit J-7 Info Paper - Fort Hood Implementation of SA Directive on Criminal History Sharing 1 May 2014.
\textsuperscript{432} Joint Staff Integrated Vulnerability Assessment Report, Fort Hood, Texas, 28 October to 2 November 2012, dtd 14 December 2012. The report is Confidential and is not attached to this report.
command engagement as “premier,” from the Commanding General on down.\textsuperscript{433} Projecting out on the three-year cycle for external higher headquarters program reviews, Fort Hood should receive their next program review early in FY16 but could be impacted with the overall decrease in JSIVA assessments and IMCOM manpower reductions.

(10) **Antiterrorism (AT) Level I.** DoD and Army Antiterrorism Policy requires that AT Level I training be conducted annually. Active Shooter (Community Response) training is embedded in the AT Level I training system. Additionally, new civilian hires are required to receive face-to-face AT Level I training by a certified Antiterrorism Officer (ATO).\textsuperscript{434} Fort Hood has an internal system to track the status of AT Level I training for Mission, Garrison, and Tenant Units which is reported to the Senior Commander or designated representative at the semi-annual Fort Hood Protection Executive Board.

(a) All Army units are required to record the completion of common mandatory training in the Digital Training Management System (DTMS) IAW AR 350-1.\textsuperscript{435} AT Level I training recorded in DTMS for the twelve-month period (1 May 2013-1 May 2014) suggested Forts Hood/Riley/Lewis averaged just over 30% completion and Fort Bliss averaged about 50% completion.\textsuperscript{436} However, Fort Hood’s internal tracking system averaged about 82%, suggesting that units may be failing to record training completed in DTMS.\textsuperscript{437}

(b) The impending release of a revised AR 350-1 will, for the first time, include internal control measures designed to assess a unit’s use of Unit Organizational Inspection Program.

(11) **U.S. NORTHCOM Force Protection Directive 13-164 (Mexico Travel Prohibitions).** SPC Lopez-Lopez traveled to Ciudad Juarez, Chihuahua on several occasions while assigned to Fort Bliss, Texas in violation of a USNORTHCOM force protection directive.\textsuperscript{438} CDR USNORTHCOM prohibited all routine, non-official travel (e.g., leave and pass) to the state of Chihuahua.\textsuperscript{439} Exceptions for travel to any prohibited Mexican state must be submitted to the USNORTHCOM J3 and must be endorsed by the first General Officer or Civilian Senior Executive Services (SES) in the

\textsuperscript{433} Exhibit J-7 Info Paper - Fort Hood Implementation of SA Directive on Criminal History Sharing 1 May 2014.

\textsuperscript{434} Exhibit L-18 AR 525-13, Army Antiterrorism, 11 September 2008.

\textsuperscript{435} Exhibit L-14 AR 350-1, Army Training and Leader Development, Rapid Action Revision (RAR), issued 4 August 2011.

\textsuperscript{436} Exhibit N-17 DTMS AT Level 1 (4+2 locations) 19 May 2014 (Information Paper, DAMO-TRC, Subject: AT Level I Training Recorded in DTMS, dated 19 May 2014).

\textsuperscript{437} Exhibit N-7 Fort Hood 2nd Qtr FY14, AT Level I Training Status Statistics 1 April 2014.

\textsuperscript{438} Exhibit N-18 Lopez-Lopez Cell Phone Data 28 May 2014 (CID Memorandum For Record, Subject: SPC Lopez-Lopez Cell Phone Data, date 28 May 2014).

\textsuperscript{439} Exhibit L-131 NORTHCOM Force Protection Advisory 13-164 (MEXICO TRAVEL PROHIBITIONS) 13 June 2013.
chain of command. Requests must be submitted through and endorsed by ARNORTH. Evidence revealed that ARNORTH did not receive a request from SPC Lopez-Lopez’s chain of command to travel to the state of Chihuahua.\textsuperscript{440}

c. Findings.

(1) Privately Owned Weapons (POW).

(a) Commanders are limited in collecting a Soldier’s POW information if the Soldier resides or stores a POW off the installation.\textsuperscript{441} This impacts a commander’s ability to maintain situational awareness over a Service Member and their actions involving a firearm that could be concealed and brought onto the installation for unauthorized purposes.

(b) The Army lacks policy and procedures for deregistration of POWs when a Soldier or family member departs the installation.\textsuperscript{442}

(c) Fort Hood does not meet the Army requirement for all Soldiers and Family members who reside on the installation to obtain unit commander approval to register POW. Although it did not affect the shooting on 2 April, as SPC Lopez-Lopez was required as an E-4 to to register his POW upon entering Fort Hood, this gap in Fort Hood’s policy limits a unit commander’s ability to gain full awareness of Soldiers and family members who bring a POW onto the installation for authorized purposes or storage.\textsuperscript{443}

(d) The Army does not address, in policy, the DoD requirement to develop procedures for on-post purchases of POW.\textsuperscript{444}

(e) Evidence strongly suggests SPC Lopez-Lopez improperly stored his POW on post while residing in transient quarters from 23 February 2014 when he purchased the weapon, until he moved to an off post apartment on 28 February 2014.\textsuperscript{445}

(2) Access Control.

\textsuperscript{440} Exhibit F-4(b)(6) Email 30 May 2014. Although, SPC Lopez-Lopez’s improper travel did not affect the 2 April shootings, it does show his apparent unwillingness to follow policies and may further indicate deceptive behavior, as discussed in Part III, para. 3 above.


\textsuperscript{442} Exhibit L-9 AR 190-11, Physical Security of Arms, Ammunition, and Explosives, dated 5 September 2013.

\textsuperscript{443} Exhibit J-2 Fort Hood Regulation 190-11 (MP Weapons) 22 May 2012; compare, Exhibit L-9 AR 190-11, Physical Security of Arms, Ammunition, and Explosives dated 5 September 2013.

\textsuperscript{444} Exhibit L-132 Secretary of Defense Message, Subject: Privately Owned Firearms (POF)3 December 2010.

\textsuperscript{445} Exhibit N-4 610-9 KPD Burglary Report 1 March 2014.
(a) As discussed above, Fort Hood meets the majority but not all DoD minimum standards for controlling entry at Access Control Points (ACPs).446

(b) Fort Hood is not using authoritative databases to vet all visitors and contractors to determine fitness to enter Army installations.447 Most of our Army installations have access to National Crime Information Center (NCIC) for law enforcement and investigative purposes, but not all installations have access to NCIC for the purpose of vetting at Visitor Control Centers (VCC).448 Army installations are challenged to establish the capability to vet non USG ID card holder visitors and contractors against the National Crime Information Center (NCIC) authoritative database due to resource constraints, especially manpower.449

(3) The United States Military Police Field Training Manual biennial training requirement for military police wasn’t consistent with DACP annual requirement for active shooter response training.450

(4) The Army has made progress on implementing Army Directive 2013-16 but not all Army installations are participating. Currently there are 38 Army installations requesting criminal history for newly assigned Soldiers to Brigade level commands.451

(5) Fort Hood has implemented Army Directive 2013-16 and shares criminal history reports (October 2013) but not all Soldiers have been submitted for criminal history reports since 2013.452

(6) Antiterrorism (AT) Level training across the Army is not systematically recorded in the Digital Training Management System (DTMS).

(7) Fort Hood is not conducting face-to-face AT Level I training for civilian new hires.453


447 Exhibit D-105 DA Form 2823 Statement 2 May 2014.

448 Exhibit L-123 IMCOM OPORD 14-022 Data (VCC and NCIC-III Vetting) 1 April 2014.


451 Exhibit F-5 Email 12 May 2014 Subject: Criminal History, list of Installations no reporting in criminal history, dated 12 May 2014.

452 Exhibit N-10 Fort Hood Gains 1 October 2013 - 9 May 2014 Fort Hood gains roster indicates that 4,945 Soldiers were assigned to Fort Hood since October 2013, however, during this time 2,916 Soldiers’ names (59%) were submitted for criminal history reports.

453 Exhibit D-90 DA Form 2823 Statement 1 May 2014.
Report of Investigation into the 2 April 2014 Shooting Incident at Fort Hood

(8) SPC Lopez-Lopez traveled to Ciudad Juarez, Chihuahua violating USNORTHCOM Force Protection Directive 13-164 (Mexico Travel Prohibitions).\footnote{Exhibit N-18 Lopez-Lopez Cell Phone Data 28 May 2014 (CID Memorandum For Record, Subject: SPC Lopez-Lopez Cell Phone Data, date 28 May 2014).}

(9) Fort Hood active shooter response training for MPs and DACPs exceeds Army standards. (Best Practice)

(10) Fort Hood has a comprehensive Military Police Certification Program to train MPs prior to performing unassisted law enforcement duties. (Best Practice)

(11) Fort Hood has an active Random Antiterrorism Measures Program that is yielding results. (Best Practice)

(12) Dual-hatting the Military Police brigade/battalion commanders as the Garrison DES where available. (Best Practice)

e. Recommendations.

(1) Privately Owned Weapons (POW).

(a) To assist commanders in assessing risk in their efforts to prevent violence, suicides, and insider threats, develop a legislative proposal to modify Public Law Number 111-383 (NDAA 2011, as amended by NDAA 2013) to permit commanders to collect information about a Soldier’s ownership of off-post POW and further require members of the Armed Forces, regardless of domicile, to register POW with the installation. (ASA(M&RA) lead)

(b) Develop and incorporate deregistration policy guidance in Army Regulation 190-11, Physical Security of Arms, Ammunition, and Explosives, dated 5 September 2013. (OPMG lead)

(c) Update relevant local regulations and policies that currently exempt Sergeants First Class and above from obtaining commanders’ approval to register a POW. (Fort Hood Senior Commander lead)

(d) Develop and incorporate policy guidance for the purchasing of POWs on Army installations in Army Regulation 190-11, Physical Security of Arms, Ammunition, and Explosives, dated 5 September 2013. (OPMG lead)

(2) Access Control.

(a) Execute installation access control procedures in accordance with AR 190-13, “Army Physical Security Program”, Chapter 8, Army Access Control. If the installation access control procedures cannot be met, deviations to the DoD Physical
Security Program must be submitted to HQDA for consideration. Deviations should be coordinated through the Army Service Component Command to the Geographic Combatant Commander.

(b) Add assessments of a sample number of installations each year to the HQDA Protection Assessment program to strengthen internal controls and provide a feedback mechanism on implementation and challenges to implementation. (G-3/5/7 lead and OPMG assist)

(c) Continue the process to survey installations IAW Secretary of the Army Memorandum, Subject: Uncleared Contractor or Common Access Credentialing and Installation Access, dated 31 October 2013, to determine the resources needed (facility, manpower, and equipment) to operate Visitor Control Centers to check all uncleared contractors (Non CAC eligible) and visitors against National Crime Information Center (NCIC) – Interstate Identification Index (III) prior to granting access. Final recommendations are due to the Secretary of the Army on 26 September 2014. (G-3/5/7 lead and OPMG assist)

(d) Examine whether Senior Military Police Brigade or Battalion Commanders should be required to serve as both Provost Marshal and DES and update Army Regulation 570-4, Manpower Management to reflect any changes to policy. (ASA (M&RA) lead, OPMG assist)

(3) Military Police Active Shooter Response Training.

(a) Provide guidance to the U.S Army Military Police School to update ST-19-31B to require Military Police to receive active shooter response training annually. (TRADOC)

(b) Codify the annual Military Police active shooter response training requirement in AR 190-30, Law Enforcement Operations. (OPMG lead)

(4) Criminal Information Sharing.


(b) Develop and incorporate a period of instruction on criminal history sharing of newly assigned Soldiers into Pre-Command Course instruction. (TRADOC)

(c) Assess whether criminal history sharing should be incorporated in the Commander’s Risk Reduction Dashboard (CRRD). (G-1 lead and OPMG assist)

(d) Continue efforts toward achieving 100% submissions of criminal history reports for newly assigned Soldiers. (ACOM, ASCC, DRU Commanders and Director, ARNG)

(5) AT Level I Training.

(a) Continue to explore business rules to effectively query data from DTMS. (G-3/5/7 (TR), ICW TRADOC/CAC-T and ARSTAF functional proponents for common mandatory training requirements)

(b) Track AT Level I training for Soldiers and Army civilians using DTMS IAW AR 350-1. (ACOM/ASCC/DRU Commanders and Director, ARNG)

(c) Develop MOUs/MOAs between tenant organizations and installations for AT Level I coordination. (ACOM/ASCC/DRU Commanders and Director, ARNG)

(d) Require annual completion of AT Level I training NLT 30 August and highlight during annual Army-wide AT Awareness Month (August). (ACOM/ASCC/DRU Commanders and Director, ARNG)

(e) Ensure Army Civilian Personnel Advisory Center (CPAC) incorporates face-to-face AT Level I training for newly hired Department of Army Civilians during in-processing. (ASA(M&RA) lead, OPMG assist)

(6) USNORTHCOM Force Protection Directive 13-164 (Mexico Travel Prohibitions)

(a) Reinforce awareness of USNORTHCOM Force Protection Directive (Mexico Travel Prohibitions) via Army Protection Message. (G-3/5/7 lead / OPMG in assist)

(b) Reinforce command compliance to USNORTHCOM Force Protection Directive (Mexico Travel Prohibitions). (ACOM, ASCC, DRU Commanders and Director, ARNG)


Assess the sufficiency and effectiveness of the emergency response to the shooting incident at Fort Hood, including, but not limited to, the sufficiency of active shooter response, mass casualty plans and the execution of those plans; the effectiveness of command and control during the incident; the propriety and effectiveness of the dissemination of
information regarding the incident in its immediate aftermath, and in the
days that followed; and the effectiveness of coordination with local, state
and other federal agencies.

a. Background.

(1) The shooting began with shots fired at approximately 1615 hours at the 49th
Trans (MC) Headquarters (Bldg 39001) (Bn HQ). The Fort Hood Dispatch Center
received the first 911 call at 1616 hours. The first patrol responded to the Battalion
Headquarters at 1621 hours. The shooting coincided with patrol shift change, which
enhanced the response as there were twice the number of patrols and Watch
Commanders for employment at the seven distinct shooting locations. SPC Lopez-
Lopez shot himself in the parking lot behind the 49th Trans (MC) HQs and near Bldg
39018 at 1625 hours.

(2) The first Emergency Medical Services reported “enroute” to the incident area at
1626 hours and arrived near Bldg 39018 at 1634 hours. Four casualties were reported
in the motorpool at 1633 hours. Fellow Soldiers evacuated the severely wounded
victims and EMS evacuated the one remaining Soldier at 1653 hours.

(3) The Incident Command Post (ICP) was initially established at 1634 hours near
the Bn HQ. The post Installation Operations Center (IOC) was ordered to activate
the Emergency Operations Center (EOC) to Tier 3 at 1638 hours. The shooting
occurred after shift change necessitating the recall of essential EOC personnel. The
Crisis Response Battalion (2-12 CAV) received notification at 1640 hours and began
activation. The post initiated lock down (Phantom Shield) at 1645 hours. The EOC
initiated its MWN at 1646 hours using “Big Voice” to broadcast a shelter-in-place
warning and followed up with email, desktop alert, banner, and telephonic alerts at 1659
hours. At approximately 1700 hours, the EOC was at full manning and was tracking a
crime scene at two places: the 49th Trans (MC) and the 1st Medical Brigade
Headquarters.

(4) The Fort Hood PAO released its initial Press Release at 021733 April 2014. By
1744 hours the ICP was fully established in the Fort Hood mobile command post at the
corner of 72nd Street and Tank Destroyer. The mobile command post had difficulty

---

457 All times are taken from Dispatch, Incident command and EOC logs in Exhibits N-23 (DES Dispatch Log 3 April
2014), Exhibit N-24 (FHECC Radio Transcripts 2 April 2014) and Exhibit N-25 (EMS Radio transcripts 2 April 2014)
unless otherwise stated.

458 Exhibit D-105 DA Form 2823 (b) (6) Statement 2 May 2014; Exhibit D-92 DA Form 2823 Mr. (b) (6)
Statement 23 April 2014.

459 Exhibit D-92 DA Form 2823 (b) (6) Statement 23 April 2014.

460 Exhibit D-39 DA Form 2823 (b) (6) Statement 1 May 2014.
getting full functionality out of their IT systems.\textsuperscript{461} The newly fielded MWN system was first used to request accountability at 1756 hours.\textsuperscript{462}

(5) By 1830 hours both the ICP and the EOC had a more complete picture of the seven distinct shooting locations. At this time the installation’s behavioral health providers were directed to support a MASCAL event and by 1900 hours they had conducted a needs assessment for the MASCAL. A chaplain arrived on scene at the Police Department at 1915 hours to support first responders. At approximately 1930 hours, the Fort Hood EOC had 100% visibility on the status of the casualties.\textsuperscript{463} Within two hours of the incident, a team went to the DES to begin immediate Traumatic Event Management (TEM) for first responders.

(6) The installation lifted the post lockdown at 022040 April 2014.

b. Discussion.

(1) Pre-Incident Preparation.

(a) Based on the 2009 Fort Hood shooting, Fort Hood developed a comprehensive approach to preparing the installation to manage and respond to a complex emergency to include the following:

i. Frequent periodic training events incorporating the full spectrum of enablers to include: monthly training at the Installation, DES, and functional response level (e.g. police, fire, EMS). Augmentation and integration training included the Corps staff for the Emergency Operations Center (EOC) and incorporation of partner emergency response forces from the surrounding communities at the incident level.\textsuperscript{464}

ii. Fort Hood Active Shooter Response (ASR) training and preparation exceeds Army requirements. An ASR SOP is required down to the Battalion level. The week before the incident the Installation EOC had conducted a tabletop rehearsal as part of their monthly training.\textsuperscript{465} Additionally, during that same week, the DES executed a tabletop exercise with leaders and an ASR rehearsal with their Special Response Team (SRT).\textsuperscript{466}

\textsuperscript{461} Exhibit D-105 DA Form 2823 Statement 2 May 2014.

\textsuperscript{462} The Army fielded the Ad Hoc© system to Fort Hood as part of an enterprise MWN system in December of 2013.

\textsuperscript{463} Exhibit D-39 DA Form 2823 Statement 1 May 2014.

\textsuperscript{464} Exhibit D-71 DA Form 2823 Statement 23 April 2014; Exhibit D-93 DA Form 2823 Statement 23 April 2014; Exhibit D-27 DA Form 2823 Statement 23 April 2014; Exhibit D-91 DA Form Statement 23 April 2014.

\textsuperscript{465} Exhibit D-93 DA Form Statement 23 April 2014.

\textsuperscript{466} Exhibit D-105 DA Form 2823 Statement 2 May 2014; Exhibit D-92 DA Form 2823 Statement 23 April 2014.
(2) Command, Control and Communications during the incident.

(a) During the incident, information sharing occurred primarily through voice and the use of SharePoint. The use of a dedicated, common Conference call line for voice communications allowed key leadership to dial in and avoid multiple calls and enhanced cross-talk.  

(b) Fort Hood runs a consolidated emergency dispatch center. These dispatch centers are resourced (manning and funding) primarily through three Management Decision Packages (MDEP) to include QLPR, QDPW-P and DHP Account (medical services). Enhanced 911 (E911) allows dispatchers to receive Automatic Number Identification and Automatic Location Information (ANI/ALI) from government telephone lines to facilitate more rapid and accurate emergency response. The ability to receive ANI/ALI from non-military lines is dependent on certification as a Public Safety Answering Point (PSAP) by the local community. There are currently twenty-five recognized PSAPs on twenty-two installations across the Army. Fort Hood is not a recognized PSAP and Bell County, Texas currently lacks the ability to automatically route 911 calls from cell phones directly to Fort Hood but is working to develop this capability through Next Generation 911 (NG911).

i. An Army working group identified the top doctrine, organization, training, materiel, leadership, personnel and facilities (DOTMLPF) gaps within the 911 Domain as: a lack of Doctrine and organization for dispatch center operations, inconsistent Manning guidance for dispatch center staffing, lack of standardized training and proficiency testing for dispatch center staff, and no established HQDA material solution or sustainment for Computer Aided dispatch (CAD).

ii. Fort Hood believes its Dispatch Center requires seventeen personnel. The current manning authorization is ten. Fort Hood uses borrowed manpower from the 89th MP Bde and non-deployable/recovering military firefighters to augment their current authorizations. The Fort Hood personnel serve as both call takers and dispatchers. Fort Hood responds to 911 calls in the order received and does not have the ability to conduct “priority dispatching.” Priority dispatch allows for dynamic re-tasking of an asset after it has been dispatched to an emergency to a higher priority event.

---

467 Exhibit D-93 DA Form 2823 Statement 23 April 2014; Exhibit D-90 DA Form 2823 Statement 1 May 2014.

468 Exhibit D-74 DA Form 2823 Statement 1 May 2014.

469 Derived from the Federal Communication Commission list of PSAPs. See Exhibit N-19 MFR Army Installations with Public Safety Answering Points 2 June 2014.

470 Exhibit D-74 DA Form 2823 Statement 1 May 2014.


472 Exhibit D-74 DA Form 2823 Statement 1 May 2014.
(c) Army and DoD policy create a ten-minute standard for initiation of MWN from the time the command verifies an incident.  Fort Hood initiated MWN approximately twenty-five minutes after the arrival of the first patrol to the first shooting. The installation utilized multi-modal notification of the Active Shooter event to include Giant Voice, Desktop Alert, and a standalone Telephone Alert System. The newly fielded “AtHoc” system was utilized approximately an hour later to solicit accountability across the installation.

(d) At the individual responder level, Land Mobile Radio (LMR) functioned well and was also available to the Crisis Response Battalion. The Mobile Command Post provided the ICP satellite phone and internet capability. The installation received a Site on Wheels (SOW) two weeks prior to the incident that allowed the ICP to patch together three different communications systems from different responding agencies and has the capability to serve as a backup/replacement repeater.

(e) Fort Hood uses Emergency Essential Personnel badges. Where badge holders could get to an ACP, they were quickly ushered through. Elsewhere, a backlog of traffic complicated efforts to get to the ACP. Eventually, law enforcement support from the surrounding community was used to divert traffic attempting to approach ACPs from major thoroughfares and eased backlog at the ACPs. Additionally, not all medical personnel have these badges and in some instances were denied access back on post after the installation lockdown. Some installations have a dedicated Emergency response ACP or ACPs, to be utilized only in the event of an emergency.

(f) During an emergency the only uniform items distinguishing an MP responder wearing ACUs from a Soldier wearing ACUs are a subdued MP shoulder patch and a patrol belt. This complicates emergency responder and bystander control during an incident. As a result of the 2009 Fort Hood shooting, the installation purchased vests with “Police” on them that both aid in recognition and assist in increasing tactical load capability.

c. Findings.

(1) The Fort Hood ASR preparation was effective.
Report of Investigation into the 2 April 2014 Shooting Incident at Fort Hood

(2) The Fort Hood Dispatch Center has reduced capability due to shortages in authorized dispatchers and fills the shortages with military personnel and other forms of Borrowed Military Manpower.

(3) There is no Army proponent for the 911 Domain for alerting and dispatching Emergency Response to address the full range of DOTMLPF.

(4) Fort Hood does not have the ability to digitally share common relevant situational awareness between the Installation EOC, the ICP and the dispatch center.

(5) MWN was initiated too late to optimize its potential effectiveness. Given that the entire incident was over in about ten minutes, we found no indication that actions taken to verify the shootings were improper or unreasonably delayed. While we cannot reasonably conclude that earlier initiation would have prevented casualties, its initiation after the post lockdown was implemented was not optimal.

(6) Despite less than optimal digital communication capabilities, increased voice communication capabilities enhanced the response to the shooting.

(7) Although Access to Fort Hood by emergency response personnel during the incident was improved over that in 2009, many continued to experience delays and difficulty returning to post.

d. Recommendations.

(1) Designate a force modernization proponent for the 911 Domain as a specialty function in AR 5-22 (The Army Force Modernization Proponent System), Rapid Action Revision dated 25 March 2011, and establish a standing forum and the mechanisms to address top DOTMLPF gaps. The proponent should initiate a USAMAA “dispatch center” manpower model as one of its first tasks. (G-3/5/7 lead)

(2) HQDA and IMCOM assess the feasibility of integrating Computer Aided Dispatch with ongoing Army efforts to field a COP between the EOC and ICP. (OPMG lead)

(3) Share Fort Hood’s standing Conference Call line TTP with the rest of the Army as a best practice. (G-3/5/7 lead)

(4) Consider MWN procedures in place at Virginia Tech and other best practices to develop protocols to streamline the process for initiating its MWN systems appropriately. Procedures should be tailored to specific hazards and centralize initiation authority where needed and decentralize where appropriate. These procedures should also take advantage of tailoring different MWN modes (e.g., computer pop-ups vice Giant Voice) in parallel or in sequence based on the immediacy of the threat and level of confirmation. (G-3/5/7 lead)

---

Report of Investigation into the 2 April 2014 Shooting Incident at Fort Hood

(5) Assess the requirement for a SOW on major Army installations to patch together different communications systems and serve as a backup/replacement repeater. (OPMG lead)

(6) Identify the use of dedicated Emergency Response only ACPs as a best practice and share with the Army.

(7) Share Fort Hood’s use of High Visibility vests for its MPs with the rest of the Army as a best practice.

10. Care for Victims, Families and Other Personnel.

Examine and evaluate the adequacy of support and care, to include counseling and other mental health services provided to Victims, Families, first responders and other Fort Hood personnel.

a. Background.

(1) During a MASCAL event such as the 2 April 2014 incident at Fort Hood, Army doctrine relies heavily on the Family Assistance Center (FAC) to render support and care to victims, families, first responders, and other personnel. The discussion below covers the FAC’s role, responsibilities and capabilities generally, and how they operated at Fort Hood specifically. The medical response is addressed at Part IV, para. 10b, below.

(2) The FAC is a critical component of the Installation Emergency Management (IEM) plan. When activated by the emergency operations center (EOC), the FAC provides a myriad of co-located community support functions, to include: 24-hour emergency telephone capability; information and referral; behavioral health services; chaplain support; child care assistance; financial assistance; housing; transportation; casualty support; translators; medical triage; security; personal locator assistance; DEERs access; finance; ID card support; legal services; community outreach; and TRICARE/Medical support.478

(3) Department of Defense and Army policies are in place and specifically address in sufficient detail the core service elements and agencies to be considered for FAC operations.479 Army Regulation 608-1, Army Community Service, directs staffing requirements for each FAC phase to be included in the IEM plan.

(4) The OSD Report, “Response to the Terrorist Attack on the Pentagon: Pentagon Family Assistance Center (PFAC) After Action Review,” dated March 2003 (Pentagon AAR), documented lessons learned from the activation and sustainment of the first Joint family assistance center supporting the Soldiers, Families, Community and Military

---

Service Components in the aftermath of 9-11. The report provided ten overarching recommendations in the areas of policy; command and control; protocols for information sharing; communications; staff expertise; management of donations and funding; and resourcing. The Fort Hood Army Internal Review Team amplified in their final report, “Protecting Our Army Community at Home and Abroad,” dated 4 August 2010, gaps in full implementation of PFAC recommendations. Specifically, the team recommended developing guidance incorporating the core service elements of a FAC, as identified in the Pentagon AAR, and developing guidance to establish a FAC as a component of the Installation Emergency Management (IEM) program.

b. Discussion.

(1) Shortly after the Shelter in Place (SIP) announcement was broadcast over the MWN to the residents of the Fort Hood community, the EOC activated the Fort Hood Family Assistance Center at 1848 hours.

(2) The FAC responded effectively to 148 calls between 2 and 9 April 2014. FAC personnel were adequately trained enabling the successful direction or handling of callers inquiries and engaging the proper servicing entity or supporting organization(s).

(3) Fort Hood augmented the EOC Casualty Assistance Officer with a Family Care Team. Fort Hood’s OPLAN to form a Family Care Team, along with the FRG Crisis Response Teams, were instrumental in providing successful support to the families of those affected by the shooting.

(4) The 1646 SIP announcement was not lifted until 2045. As a result, Child and Youth Services (CYS) provided extended care for 670 children and sheltered 46 parents and 189 staff members, in eleven separate child and youth facilities. In addition to supervision, shelter, and care, the CYS provided nourishment until appropriate arrangements could be made for pick-up.

---

480 Exhibit M-6 Pentagon Family Assistance Center (PFAC) Crisis Report March 03, at 63-70.
483 Exhibit M-8 Fort Hood, Soldier & Family Readiness Branch, Army Community Service Family Assistance Center After Action Report, 2 April 2014, Shooting Incident, 2-9 April 2014, Operational Summary (FAC AAR).
484 Exhibit N-11 ACS-FAC Form 3, Fort Hood Family Assistance Center (FAC) Telephone Contact Log, 2-9 April 2014.
485 Exhibit K-10 Fort Hood AAR Briefing 22 April 2014, 19.
486 Exhibit N-16 Fort Hood EOC Call Logs 2-9 April 2014.
487 Exhibit N-21 Email Traffic (CYSS Facility Cost) 4 June 2014.
c. Findings.

(1) The FAC operated to standard and provided effective and appropriate services, to include a manned 24-hour hotline responding to Soldier welfare inquiries and requests for counseling support; providing procedural information on donations; referring press inquiries to the III Corps public affairs officer; and providing personnel for FAC to EOC liaison. Three shifts were established to manage the day-to-day FAC call center, while the III Corps EOC oversaw support from the supporting agencies (i.e., Casualty Assistance, Red Cross, Chaplain, and Military Family Life Counselors).

(2) The CYS facilities were fully capable and prepared to care for the children for the duration of the SIP.

d. Recommendations.

(1) As part of the Installation/Command Inspection Program, assess whether FAC core competencies and service elements are exercised through garrison and installation simulations and annual exercises. Share, publish, and archive lessons learned and best practices.

(2) Ensure FAC SOPs and Soldier family care plans address and consider extended SIP requirements and delineate roles and responsibilities.

(3) Evaluate for Army-wide applicability Fort Hood’s best practice (taken from lessons learned in the 2009 Fort Hood shooting) requiring an Emergency Operations Family Care Team (FCT) to augment casualty assistance officers.488 (Army OBT lead, ACSIM assist)

10b. Medical and Behavioral Health Care for Victims, Families, First Responders, and Other Personnel

a. Background.

(1) Along with, and as part of the FAC, the 2 April 2014 shooting required significant medical and behavioral health care support for victims, families, first responders, and other personnel on Fort Hood. The following section covers the support provided specifically by the medical and behavioral health personnel.

(2) The statistics on the victims seen at the Fort Hood Emergency Department (ED) that day are as follows:489

(a) Deceased: 4, including SPC Lopez-Lopez

488 Fort Hood III Corps 02 April 2014 brief given to 15-6 IO and AIOs on 22 April 2014 (Exhibit K-10 Fort Hood AAR Briefing 22 April 2014), at 19.

489 A list of Soldiers killed, wounded, and otherwise injured is at Appendix 5, TAB C; Exhibit I-1 Casualty Report 2 April 2014.
Report of Investigation into the 2 April 2014 Shooting Incident at Fort Hood

(b) Wounded by gunfire: 12

(c) Others seen in ED: 4

(3) CID tracked one other individual who injured a finger that was in a post-surgical healing state. CID also tracked a few other individuals with possible emotional issues related to trauma exposure, although some may have been uninjured or very mildly affected.\(^{490}\)

(4) The Medical Response.\(^{491}\) Delivery of acute medical care and subsequent follow-ups was directed by the Deputy Commander for Clinical Services (DCCS) of Carl R. Darnall Army Medical Center (CRDAMC). Having led a similar effort after the 2009 Fort Hood shootings, he was seasoned in managing this type of event. Notable aspects of the acute medical management included emergency medical triage at the CRDAMC Emergency Department (ED), exclusive use of air transport to higher level civilian medical centers, and delivery of Traumatic Event Management care by Behavioral Health providers to non-Tricare individuals.

(5) Emergency Medical Services (EMS) were rapidly dispatched from CRDAMC and Scott & White Hospital. All victims were triaged and stabilized at CRDAMC ED. Victims requiring higher levels of medical care were transported rapidly via air to Scott & White Temple Hospital in Temple, Texas. Every transported victim had a CT scan to ensure there was no active internal bleeding. Coordination occurred with other local civilian medical centers as well. CRDAMC is accredited as a Level III trauma center, while Scott & White is accredited as a Level I trauma center, the top level. CRDAMC can provide emergency care, emergency surgery and stabilization, and intensive care, while Scott & White can provide highly specialized care once patients are stabilized for transport. Additional support came from local facilities such as Rollins Brook Community Hospital in Killeen, which provided the initial blood product support. Besides treating those with gunshot wounds, CRDAMC treated others with secondary injuries and emotional distress related to the incident.

(6) CRDAMC was fully staffed because the incident occurred shortly before close of business. Additional staff was called in, but they had some delays getting onto post due to the post lockdown. CRDAMC had adequate space and resources to assess and stabilize every wounded victim from the incident. Due to the uncertainty over how many casualties were coming in, some wounded were airlifted to civilian facilities in order to create room. In hindsight, believed more wounded could have been kept at CRDAMC.

---

\(^{490}\) Exhibit N-13 CID Status Report 16 April 2014.

\(^{491}\) The entire medical response section derives from the statement (Exhibit D-34 DA Form 2823 COL statement 23 April 2014). Individual medical records of victims were consulted as needed, but no major deviation from official timelines was noted.
(7) Although there were no non-Tricare beneficiaries wounded, CRDAMC routinely accepts and treats emergency civilian patients and bills their insurance companies. CRDAMC supports the local Killeen community as the highest level trauma hospital outside of Temple. Supporting the Local Community also keeps staff trained in handling emergency medical trauma, including gunshot wounds.

(8) CRDAMC improved its abilities to track how many victims came into its ED and how many were released or transported, since the 2009 incident. This was important for maintaining evidence for future investigations and for public affairs purposes. CRDAMC has since established an MOU with Scott & White in order to receive updates day or night, facilitating rapid information handover with outside partners. Part of the success in maintaining accountability during this incident is attributable to the inter-agency annual MASCAL training, which included the tracking of patients at civilian facilities.

(9) On the day after the incident, access to care for routine patients became limited, but care for hospitalized victims and other inpatients remained steady. The reason was that many patients could not reach their appointments on time due to the lockdown status at the post gates. In addition, all routine-scheduled surgeries were cancelled on 3 April because the hospital staff had been working throughout the night. In addition, some clinics had to be closed during the POTUS visit due to the road path used.

Availability of Counseling and the Behavioral Health Response

(10) Behavioral Health (BH) deploys teams of trained personnel to conduct TEM for any traumatic incident involving the Fort Hood community. Chaplains also received TEM training through MEDCOM, and work with BH or independently as appropriate. TEM is described in FM 4-02.51 (Combat and Operational Stress Control), dated July 06; FM 6-22.5 (Combat and Operational Stress Control Manual for Leaders and Soldiers) dated 18 March 2009; and MEDCOM Pamphlet 40-17 (Traumatic Event Management) dated 6 June 2012.

(11) The Chief of Psychological Health for Fort Hood is a psychiatrist. The TEM response on 2 April involved multiple units, multiple TEM teams, individual counseling, and coordination with chaplain and IMCOM resources. Eligible individuals included Soldiers, Victims, Families, First Responders, and other civilian personnel. The commander of CRDAMC requested Secretary of the Army Designee status through The Surgeon General of the Army for the delivery of TEM and BH

---

492 Exhibit D-101 MFR Telephone Interview 3 June 2014.

493 TEM is not a medical treatment that occurs in a clinic and has a medical note generated from the session. Rather, it is an intervention to prevent future emotional or mental problems among individuals exposed to trauma, and it occurs on-site (e.g. within the 13th SC(E) footprint).
(clinical) care to non-Tricare eligible individuals. This request was deferred, but permission to use TEM for those individuals was nonetheless approved because it is not a clinical treatment (i.e. not Tricare-based). BH has maintained a pool of TEM-trained providers in accordance with OTSG policy in the wake of the 2009 Fort Hood shootings.

(12) The incident coincided with the establishment of an Embedded Behavioral Health (EBH) for the 13th SC(E). Fort Hood has completed ahead of schedule Phase I of OPORD 12-63 mandating establishment of four EBH Clinics for the four brigade combat teams there. Fort Hood is two years ahead of schedule by setting up their first EBH for a non-BCT unit, the 13th SC(E). BH, a U.S. Public Health Service provider assigned to CRDAMC, was detailed to set up the 13th SC(E) EBH two days prior to the incident. By fortuitously naming and other team members two days before the shootings, there was no time lag to determine who to send to the trauma sites. The team and other BH providers began providing on-scene support to the affected units and personnel within two hours of the shootings.

(13) EBH teams are not staffed to cover a MASCAL with hundreds of potential traumatized individuals. As such, support flowed in rapidly through OTSG and San Antonio Military Medical Center. The latter sent fifteen providers to augment the EBH, and other staff at CRDAMC were also tasked to the effort. Another local unit was the 85th Combat Operational Stress Control (COSC) Detachment, led by . This FORSCOM BH unit supports the 1st Medical Brigade, and thus was appropriately positioned to manage the TEM for that brigade. In all, combined assets from CRDAMC, III Corps, and augmentee personnel totaled 111 providers.

(14) The combined EBH effort spanned the 13th SC(E), the 1st Medical Brigade, civilians and military in the Department of Emergency Services, providers and other staff at CRDAMC, families and victims of the deceased and wounded, and other friends or loved ones within the community. The response from the above units was positive. TEM is coordinated with non-medical assets, and synergy with the local chaplains and Military Family Life Consultants (MFLCs) occurred. MFLCs are part of an Army Community Service program offering completely private, non-medical counseling to

---

494 Exhibit N-28 OTSG Request for blanket Designee status 14 April 2014.
495 Exhibit N-29 MRA Response to blanket Designee request 16 April 2014.
496 Exhibit L-95 MEDCOM Pamphlet 40-17, dated 6 June 2012.
497 Exhibit L-125 MEDCOM OPORD 12-63 - Embedded Behavioral Health Team Implementation 17 August 2012.
498 Exhibit K-4 Behavioral Health Overview - Fort Hood - April 23 2014.
499 Exhibit D-36 DA Form 2823 Statement 23 April 2014; Exhibit D-84 DA Form 2823 Statement 24 April 2014.
500 Exhibit D-36 DA Form 2823 23 April 2014.
501 Exhibit K-5 TEM Statistics from 30 April 2014.
502 Exhibit K-5 TEM Statistics from 30 April 2014.
Soldiers for up to ten sessions. Soldiers who preferred chaplain services found their availability acceptable. A local chapel was selected as a key operations center for EBH due to the close work between EBH and the chaplains.

(15) From 2 April to the present, EBH has run thirty-three separate TEM groups for the 13th SC(E), covering 699 Soldiers. The Department of Emergency Services received six group sessions covering sixty personnel, CRDAMC received twelve sessions covering 137 personnel, and 1st Medical Brigade received nine sessions covering 115 personnel. In total for Fort Hood, there have been 65 groups covering 1015 individuals, with an additional 863 individual contacts and 583 contacts with leadership elements. The optimal arrangement is less than twenty individuals per TEM group. Most groups met in the chapel because EBH does not yet have a dedicated work space. BH provides support in many other avenues besides TEM. BH providers have maintained a presence at unit training events, and Soldiers have been willing to approach and speak to the providers at these events.

(16) EBH stepped in during uncomfortable situations for affected Soldiers. On one occasion, the Soldiers who had worked in battalion headquarters were asked to clear their personal items out, though the crime scene still had blood and bullet holes visible. EBH relieved the Soldiers of the potentially re-traumatizing experience and cleared everything out themselves with some 1st Cavalry Division Soldiers. In addition, EBH was present at the memorial service and spoke with several Soldiers who became stressed during the event.

(17) A BH Hotline was established on 4 April 2014 to provide further support modalities. Callers could speak with professional BH providers. The phone number was posted on the III Corps webpage, CRDAMC webpage, and broadcasted on local Channel 10 News. Twelve calls came in, with none since 18 April 2014.

(18) One issue raised concerned an initial TEM briefing held for roughly forty Soldiers in the chapel. The Soldiers believed the space was too confining given their recent experiences. concurred that the set-up was not ideal. He preferred TEM in groups of twenty individuals or less, not forty, and the chapel was actually partitioned for another purpose, so the space was reduced. All subsequent

---

503 Exhibit D-81 DA Form 2823 Statement 22 April 2014.
504 Exhibit D-84 DA Form 2823 Statement 24 April 2014.
505 Exhibit K-5 TEM Statistics from 30 April 2014.
506 Exhibit K-5 TEM Statistics from 30 April 2014.
507 Exhibit D-101 MFR Telephone Interview 3 June 2014.
508 Exhibit D-84 DA Form 2823 Statement 24 April 2014.
509 Exhibit K-5 TEM Statistics from 30 April 2014.
510 Exhibit D-3 DA Form 2823 Statement 23 April 2014.
511 Exhibit D-84 DA Form 2823 Statement 24 April 2014.
TEMs involved twenty individuals or less, and no issues were heard concerning these smaller sessions, many of which still occurred within the chapel, and without the partitions. Negative comments about the chapel size were provided to as an AAR. The other thirty-five TEM sessions for the 13th SC(E) were considered successful per .

(19) Regarding support for family members, BH providers and chaplains attended FRG events and other events where family members were present. Services were offered to those interested. In addition, Scott & White and Metroplex Hospital in Killeen set up BH teams to assist family members. MFLCs contacted local schools to ensure that students had an option for seeking service, though the schools all had internal counselors who were available as well. Soldiers also commented that services for family were excellent.

(20) TEM teams visited the wounded at hospitals and frequently interacted with their family members and friends. Support was rendered on-scene to 137 family members and civilians. Sixty-seven of those were considered “highly affected” and drew greater attention. Of those sixty-seven, forty-seven were not Tricare-eligible. Of the twenty Tricare-eligible members, fourteen were referred for individual BH treatment at clinics. None of the non-eligible family members and civilians required referral. One non-eligible did receive care at CRDAMC for an unrelated cardiac issue and received Secretary of the Army Designee status for this care.

(21) The 89th MP Brigade requested BH services for its first responders. They had a special BH outpost set up within their footprint to provide counseling and treatment to just their unit.

c. Findings.

(1) The policy language guiding TEM only includes Soldiers, though MASCAL events in garrison or even in operational environments may involve civilian personnel and may affect the families of the wounded.

(2) Designating TEM leaders and team lists in advance is critical for a rapid response to a mass casualty. This best practice requires keeping adequate numbers of TEM-trained personnel as team leaders. The optimal TEM team is the EBH assigned to
a particular unit. The affected unit, the 13th SC(E), had an EBH team created two days before the incident, enabling rapid designation of individuals and a leader to respond.

(3) 89th MP brigade desired a full-time EBH for first responders in need of counseling or support. That unit will have an EBH supporting the 89th MP brigade and two other units.\(^{519}\) The deadline for establishing that EBH and five other EBH units on Fort Hood is 30 September 2016.\(^{520}\)

d. **Recommendations.**

(1) Update TEM policy to include non-military personnel. (OTSG lead)

(2) Examine ways to accelerate creation of non-BCT EBH teams, with emphasis on servicing first responder units such as MP brigades. (OTSG lead)

**11. Individual Accountability.**

Assess whether any individuals should be held accountable for any failures or deficiencies with respect to SPC Lopez or the shooting incident at Fort Hood, Texas on 2 April 2014, and make specific recommendations for appropriate action.

a. **Discussion.**

(1) In assessing accountability for the events of 2 April, it is impossible to overstate the significance of SPC Lopez-Lopez’s actions, which in the end were irrational and wholly out of proportion to any amount of stress or frustration he may have been feeling. His targeted and random violence toward completely innocent Soldiers is inexcusable, regardless of anyone else’s shortcomings in this matter.

(2) As with any tragedy, it is tempting to try to identify which stressor or event was the “final straw” and to determine whether someone could have done more to resolve that issue. To be sure, many of the leaders or medical providers who dealt with SPC Lopez-Lopez in the days, weeks, and months before the shooting could have handled matters differently. But the more appropriate question is whether they reasonably could have foreseen the events of 2 April or should have acted differently in response to what they knew about SPC Lopez-Lopez.

b. **Findings.**

(1) We find insufficient evidence to conclude that leaders and medical providers at Fort Bliss or Fort Hood could have affected SPC Lopez-Lopez’s decision to shoot his fellow Soldiers. Any other conclusion is simply conjecture. They could not have foreseen his violent outburst, and they acted appropriately given what they knew about

---

\(^{519}\) Exhibit K-4 Behavioral Health Overview - Fort Hood - April 23 2014.

\(^{520}\) Exhibit L-125 MEDCOM OPORD 12-63 - Embedded Behavioral Health Team Implementation 17 August 2012.
his situation. We therefore find that their conduct, while not always optimal, was reasonable under the circumstances.

(2) Further, we find that many Soldiers and civilians at Fort Hood behaved admirably in the immediate aftermath of the shooting. The brigade and battalion commanders reacted to reports of the shooting by moving to locations where they could best command their units, take accountability, and restore order without interfering with emergency response.\(^{521}\) remained in her office with a mortally wounded Soldier providing direct aid until help arrived, while others evaded the shooter.\(^{522}\) Several of her comrades in the 49th Trans (MC) conference room did the same.\(^{523}\) Many other Soldiers, Military Police, and first responders—too numerous to recognize here—took action with courage and resolve. In the weeks following the incident, the command identified personnel whose conduct during the shootings was substandard and took appropriate corrective action.\(^{524}\)

(3) A separate question is whether SPC Lopez-Lopez’s leaders should have known more about his issues. As discussed above, much of what they did not know was due to SPC Lopez-Lopez’s own failure to provide accurate information. Although we found other deficiencies in information sharing among SPC Lopez-Lopez’s leaders, these were not due to their negligence, inaction, or bad faith. Even with more information, it is not clear that they should have identified SPC Lopez-Lopez as a high-risk Soldier, and if they did, it is doubtful it would have affected his ultimate decisions. Thus, we recommend that SPC Lopez-Lopez’s leaders not receive any adverse action for the events of 2 April.

(4) It remains true that leaders are accountable for all that happens or fails to happen in their units, and SPC Lopez-Lopez’s leaders have been held accountable in the truest sense of the word. During this investigation, they were called to account for their actions on 2 April and before, and they have done so with great cooperation, candor, and introspection. SPC Lopez-Lopez alone was responsible for his actions, and no one else should bear that responsibility. We find no further accounting is necessary.

\(^{521}\) Exhibit D-57 DA Form 2823 Statement 23 April 2014; Exhibit D-10 DA Form 2823 Statement 23 April 2014.

\(^{522}\) Exhibit D-88 DA Form 2823 Statement 22 April 2014.

\(^{523}\) Exhibit D-48 DA Form 2823 Statement 22 April 2014.

\(^{524}\) Exhibit D-57 DA Form 2823 g Statement 23 April 2014.
12. **Potential Focus Area Review Group (FARG) Impact.**

Identify FARG cuts that potentially affect the implementation of 2010 DoD/AIRT recommendations.\(^{525}\)

When this investigation began in April, the Office of Business Transformation (OBT) was expected to release its proposal for implementing the FARG before the investigation was complete. Now that OBT does not expect to release its proposal until December 2014, it would be premature to speculate on where and to what extent projected cuts would impact the programs, installations, and units addressed in this investigation. That said, I recommend that HQDA closely examine the projected impact of FARG cuts on the implementation of AIRT recommendations, physical security, emergency response, and the Army Insider Threat Program, especially those recommendations not synchronized and coordinated across ACOMs, ASCCs, and DRUs.

\(^{525}\) Secretary McHugh directed this task verbally during his initial meeting with LTG Martz on 11 April 2014.
Appendices

1. Timelines
   a. Tab A – 7 December 1998-2 April 2014
   b. Tab B – 2 April 2014

2. Investigation Team, Timeline, and Materials
   a. Tab A – Investigation Team Members
   b. Tab B – Investigation Timeline
   c. Tab C – Personnel Interviewed
   d. Tab D – Non-Disclosure Agreements

3. Acronyms and Definitions
   a. Tab A – Acronyms
   b. Tab B – Definitions

4. Exhibits
   a. Tab A – Investigation Administrative Materials
   b. Tab B – Fort Bliss Statements
   c. Tab C – Fort Leonard Wood Statements
   d. Tab D – Fort Hood Statements
   e. Tab E – Family/Friend Statements
   f. Tab F – Miscellaneous Statements
   g. Tab G – Personnel Records
   h. Tab H – Medical Records
   i. Tab I – Charts
   j. Tab J – Installation Orders
   k. Tab K – Policy Documents
   l. Tab L – Reports
m. Tab M – Other Evidence
n. Tab N – Forms

5. Medical Treatment
   a. Medical Personnel Consulted
   b. Medical Chronology
   c. Casualty List