



Behavioral Health Guidelines for mEdic Assessment & Response

Training Overview

SUMMARY

This training will provide Army medics and leaders without prior behavioral health training an overview of how to manage the most common behavioral health problems experienced by Soldiers in forward environments. Trainees will learn how to identify and assess these BH problems, as well as learn how to apply specific interventions to manage and/or ameliorate these problems. Trainees will also review the steps involved in BH medical evacuations. The training will include role-play demonstrations and activities to foster participant engagement and retention of the material.

TRAINING OUTLINE

1. Purpose of Additional Training
 - a. How future wars will be different
 - b. Need for medics to help assess, prevent & manage BH
 - c. New CPGs for non-BH providers recently developed
2. Orientation to Training
 - a. Agenda
 - b. Objectives
 - c. Additional resources
3. Overarching Principles
 - a. When do Soldiers experience BH problems?
 - b. Role of stress
 - c. Keep Soldier in the fight and maintain unit readiness
 - d. Combat and operational stress reactions vs. behavioral health disorders
 - e. Process: Assess, make a plan & give feedback + Possible Dispositions
 - f. Knowledge of medical capabilities & evacuation procedures
4. Behavioral Health Assessment
 - a. Sources of information
 - b. Brief clinical interview & mental status exam
 - c. Suicide risk assessment
 - d. Risk/contributing factors to assess
 - e. Use of screening tools
 - f. Active listening
 - g. Practice activity - Brief BH assessment in a group
5. General Interventions
 - a. What skills are already in their toolbox?
 - b. Thriving during stress
6. Specific Interventions Used Across Symptom/Problem Areas
 - a. Tactical breathing
 - b. Progressive muscle relaxation
 - c. Challenging negative thinking
 - d. Visualization
 - e. Problem solving
 - f. Motivational interviewing - Includes video, demonstration & practice activity
7. Management of Acute Issues
 - a. Process
 - b. Interventions for agitation
 - c. Verbal de-Escalation & grounding
8. General Anxiety, Panic Attacks & Acute Stress Reactions
 - a. Background info and distinguishing symptoms
 - b. Assessment
 - c. Interventions - Includes iCOVER video
 - d. Practice activity - Identification of case examples and appropriate intervention
9. Depression
 - a. General info
 - b. Assessment
 - c. Interventions
 - d. Practice activity - Explaining behavioral activation worksheet to peer

TRAINING OUTLINE, CONT.

10. Sleep Disruption & Deprivation
 - a. General info
 - b. Interventions
11. Coping with Social Stressors
 - a. Communication with friends/family
 - b. Local stressors (mission, locals, team conflict)
12. Anger Management
 - a. Assessment
 - b. Interventions
13. Mania & Bipolar Symptoms
 - a. Mania and hypomania symptoms
 - b. Assessment – Includes video demonstration of assessment of manic client
14. Psychosis
 - a. Signs & symptoms
 - b. Assessment – Includes video demonstration of psychotic client
 - c. Differential Diagnosis
 - d. Interventions for Mania & Psychosis
15. Substance Use Disorders
 - a. Alcohol
 - b. Anabolic steroids/performance enhancing Drugs & opioids
 - c. Interventions
16. Managing Suicide Risk
 - a. Risk indicators
 - b. Risk management
 - c. Practice activity – Identification of level of risk and appropriate plan of action
17. Managing Homicide Risk
 - a. Risk factors & assessment
 - b. Risk management
18. Psychopharmacological Interventions & Considerations
 - a. Planning for deployment
 - b. Psychotropic medications may not be available
 - c. Medication history essential
 - d. Serotonin syndrome
 - e. Available medications & use for agitation, insomnia, psychosis & stress
19. Behavioral Health Medical Evacuation (MEDEVAC)
 - a. Consideration and how to determine if evacuation is needed
 - b. Procedures to follow – Includes walk through of MEDEVAC flow sheet and discussion of case examples
20. Command Consultation
 - a. Advise command on risk
 - b. HIPPA
 - c. Leadership can provide guidance on communication
21. Culmination Exercise
 - a. Assessment, leader consultation, determination of plan of action including if a Soldier should be medically evacuated
20. Who To Enlist to Help You
 - a. Combat lifesavers, NCOs, Senior members of chain of command & chaplains
21. Notification of Others
 - a. Situations requiring formal behavioral health evaluation
 - b. When to notify command

LEARNING OBJECTIVES

1. Describe how the role of Army medics is changing in regards to managing behavioral health concerns.
2. Demonstrate how to perform a behavioral health assessment.
3. Recall three core symptoms of depression, mania, psychosis and insomnia.
4. State two interventions that can be used to help Soldiers reduce anxiety.
5. Describe how to manage a Soldier with risk factors for suicide.
6. Discuss when a medical evacuation is needed and the steps to take to complete the evacuation