



# Train-the-Trainer Program for the Behavioral Health Guidelines for mEdic Assessment & Response (BH GEAR) Training

## Training Overview

### SUMMARY

This training will provide Army medical staff with the knowledge and skills so that they can be an effective trainer of the BH GEAR training, which instructs medics and leaders without prior behavioral health training in the identification, prevention and management of behavioral health (BH) concerns. This Train-the-Trainer program includes a full demonstration of the BH GEAR training, followed by review of knowledge and skills relevant to public speaking and facilitating learning, as well as the rationale and history of the development and design of the BH GEAR training. The training will include whole and small group activities to foster participant engagement, retention of and comfort with the material.

### TRAINING OUTLINE

#### Day 1

##### A. Review Course Agenda and Objectives

##### B. Review BH GEAR Training as if Participant

###### 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

## TRAINING OUTLINE, CONT.

### 9. Depression

- a. General info
- b. Assessment
- c. Interventions
- d. Practice activity – Explaining behavioral activation worksheet to peer

### 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
  - a. Serotonin Syndrome
  - b. 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

### C. Review Homework Assignment

- a. Prepare to teach class something personally relevant tomorrow

## TRAINING OUTLINE, CONT.

### Day 2

- A. Homework Presentation
- B. Public Speaking Skills and Concepts
- C. Adult Learning Concepts
  - a. Relevance
  - b. Learning by doing
  - c. Repetition
  - d. Goal setting
  - e. Processing with all senses
- D. Presenter Facilitation Strategies
  - a. Asking quality questions
  - b. Efficient instructions
  - c. Bridging
  - d. Conducting effective discussions
  - e. Handling challenges
- E. Professional Development
- F. History of BH GEAR
- G. Rational of Training Design
- H. Orientation to the Trainer's Guide
- I. Section by Section Small Group Practice

### Day 3

- A. Section by Section Small Group Practice
- B. Review Homework Assignments
  - a. Select a section of the training to present tomorrow

### Day 4

- A. BH GEAR Training Demonstrations
- B. Participant Frequently Asked Questions and Challenges Encountered
- C. Planning for BH GEAR Training

## LEARNING OBJECTIVES

1. Articulate the core learning objectives of the BH GEAR training.
2. Outline the history of the BH GEAR training, including the origin of the training content and how the training content was developed and evaluated.
3. Explain how a non-provider can perform a behavioral health assessment in far forward environments.
4. Summarize interventions to manage behavioral health problems that can be used by non-providers in far forward environments.
5. Select appropriate interventions for use by non-providers in far forward environments that can be used to manage suicide risk.
6. Differentiate between minimum, better, and best interventions that are recommended for use to manage behavioral health issues by non-providers in far forward environments.
7. Discriminate between the psychopharmacological treatments for behavioral health problems available for use by non-providers in far forward environments.
8. Describe how to utilize the medical evacuation flowchart to determine if a behavioral health evacuation is needed.
9. Justify the need for the BH GEAR training implementation among non-providers deploying to far forward environments.
10. Explain the use of the trainer's guide in the preparation for and delivery of the BH GEAR training.
11. Devise methods to utilize facilitation strategies to optimize delivery of the BH GEAR training.
12. Demonstrate an ability to deliver BH GEAR training content to an audience.