



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE

WASHINGTON, DC 20301-1200

DEC 13 2010

**MEMORANDUM FOR SURGEON GENERAL OF THE ARMY
SURGEON GENERAL OF THE NAVY
SURGEON GENERAL OF THE AIR FORCE
DIRECTOR, MARINE CORPS STAFF
DIRECTOR, HEALTH AND SAFETY OF THE U.S. COAST GUARD**

SUBJECT: Guidance for Mental Health Provider Training for the Treatment of Post-Traumatic Stress Disorder and Acute Stress Disorder

In accordance with the Department of Defense (DoD) Task Force on Mental Health Report (2007) recommendation that DoD ensure that mental health professionals apply evidence-based psychotherapies (EBTs), this guidance provides recommended training requirements for DoD mental health providers who treat Service members with post-traumatic stress disorder (PTSD) and acute stress disorder (ASD).

Recent advances in effective psychotherapeutic treatments for PTSD and ASD have not been consistently adopted in clinical practice, and mental health providers may not have received, or may require additional, specialized training in current evidence-based psychotherapies for PTSD and ASD. Our goal is to assure that all civilian and new military providers have sufficient training or experience in military culture and terminology to ensure that care is targeted to the unique needs of Active Duty Service members and their families. The training applies to licensed and privileged mental health providers (e.g., psychiatrists, psychologists, clinical social workers, advanced practice psychiatric nurses), as well as license-eligible providers in these disciplines practicing under a plan of supervision.

The attached guidance and recommendations are for use by the Military Departments in implementing mental health provider training for those providers in military treatment facilities that treat PTSD and ASD with psychotherapy. Central to this guidance are recommendations that formal training occur, be consistent with DoD/Veterans Affairs clinical practice guidelines, and rooted in evidence-based psychotherapies. Key suggested elements for implementation include training objectives (Attachments 1 and 2) and guidance for obtaining military cultural competency, post-training consultation, and ongoing training (Attachment 3).

The Military Departments may access the Defense Center of Excellence for Psychological Health and Traumatic Brain Injury (DCoE) to obtain resources and support for implementation, including the following:

- An updated list of effective psychotherapies that conform to evolving evidence-based psychotherapies, as well as complementary and alternative modalities that are used to augment evidence-based treatments for ASD and PTSD

- Clinical Practice Guidelines, suggested metrics for evaluating the outcomes of these therapies and resources to promote wider dissemination
- Assistance with methods to assess the results of training
- Upon request by the Military Departments, facilitate/coordinate:
 - Training courses in evidence-based practices through the Center for Deployment Psychology (CDP). CDP currently offers several multi-day workshops in evidence-based psychotherapies delivered by certified trainers (<http://deploymentpsych.org>).
 - Online and in-person training on military culture for civilian and new military providers through CDP (<http://deploymentpsych.org>).
 - Consultant training through CDP.

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cc:
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Recommended Objectives for Military Department Implementation of Training in Evidence-Based Therapies for Post-Traumatic Stress Disorder/Acute Stress Disorder

The recommended objectives for implementation of training are based on a 1-year window for evidence-based psychotherapy (EBT) and military culture training after a provider starts working for a Military Department.

- Mental health providers who treat post-traumatic stress disorder (PTSD) and acute stress disorder (ASD) with psychotherapy receive formal training in at least one of the evidence-based psychological treatments for PTSD and ASD. (Refer to Attachment 2 for recommended minimal requirements).
- Mental health providers newly trained in EBT for PTSD and ASD are given the opportunity to receive case consultation from a trained senior provider (Attachment 3).
- Those completing training and post-training consultation are provided with a certificate to document their completion.
- The number of providers trained in EBTs for PTSD and ASD will be tracked for Department of Defense reporting purposes, as needed.
- Training in evidence-based treatments should include clinical decision-making for deviating from clinical practice standards for circumstances in which patients may not be ready for certain evidence-based psychotherapy treatments (i.e., exposure therapy) owing to PTSD or ASD not being the primary diagnosis, and/or patients who require initial supportive therapy prior to initiating an EBT.
- Ensure that all civilian and new military providers have sufficient training or experience in military culture and terminology to deliver context-sensitive care for the treatment of psychological conditions related to war trauma.
- To the extent possible, assure that each military treatment facility has at least one senior mental health clinician with specialized training to provide case consultation to newly trained clinicians applying EBTs.

Recommended Learning Objectives and Training in Evidence-Based Therapies for Post-Traumatic Stress Disorder/Acute Stress Disorder

The minimal recommended learning objectives for formal training in evidence-based psychotherapies (EBTs) for post-traumatic stress disorder (PTSD) and acute stress disorder (ASD) are outlined below.

Following evidence-based training, providers should be able to:

- Describe common reactions to trauma.
- List the symptoms of PTSD and ASD including the criteria for diagnoses.
- Explain the theory of PTSD including rationale for the use of a specific EBT.
- Discuss the empirical evidence in support of the use of the chosen evidence-based psychotherapy.
- Demonstrate understanding of and an adequate skill level in specific techniques used in the EBT.
- Successfully role-play specific techniques in the psychotherapy to be utilized.
- Verbalize an understanding of alternatives and specific treatment considerations while using an EBT.
- From a full mental health evaluation, establish a fully empirically based treatment plan for PTSD/ASD and other dual/co-occurring disorders.
- Demonstrate ability to administer and interpret outcome measures related to the empirically based treatments.

Detailed requirements for specific EBTs can be obtained from the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury.

Recommended Minimal Requirements for Achieving Competency in Military Culture for Civilian and New Military Mental Health Providers

Review the free online course in military culture and demonstrate competency in applying skills of evidence-based psychotherapy (EBT) through supervisorial consultation. The online course is available at the Center for Deployment Psychology Web site: <http://deploymentpsych.org>.

Guidance for Obtaining Clinical Consultation Following Training

Because the competent delivery of EBTs for post-traumatic stress disorder (PTSD) requires practice, post-training consultation with an expert in the specific EBT should occur until the provider has demonstrated competence in treating PTSD or acute stress disorder (ASD) by completing two cases from start to finish according to established EBT protocol.

- Obtain clinical case-consultation for each of the first two patients with PTSD or ASD treated with an EBT for PTSD and ASD.
- Consultation should be provided by a “master” clinician who has undergone specialized training as outlined below. The consultation may be face-to-face, telephonically, etc.
- The consultant documents satisfactory completion of the treatment process by the therapist of the first two patients.

Guidelines for Training Master Clinicians who will Provide Consultative Services at Military Treatment Facilities

- Basic training in EBT.
- Completion of 10 cases with consultation by an experienced, senior instructor.
- Completion of an advanced course in consultation/supervision in select EBTs.

Continuing Education Opportunities

Professional continuing education is always encouraged in order to keep current on evidence-based treatment methods. The Defense Center of Excellence for Psychological Health and Traumatic Brain Injury provides free continuing education at locations across the United States.

For a list of these courses, go to:

<http://www.dcoe.health.mil/Training/PTSDTrainingEvents.aspx>.