



## **Training on Assessment of PTSD and Suicide Risk Management in Veterans**

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Cultural competence is an ethical and clinical imperative for effective clinical practice. Cultural competence for clinicians working with Veterans and Service members includes developing familiarity with unique aspects of military culture that impact clinical care as well as common clinical issues faced by these populations. This two-day workshop aims to introduce participants to military culture and help them develop skills in assessing for two important clinical issues: post-traumatic stress disorder (PTSD) and suicide risk.

### **Day One**

An overview of military culture will be provided including basics about its history, organizational structure, core values, branches of the service, mission and operations, as well as the differences between the active and reserve components. Participants acquire greater competency in working with Service members and Veterans by learning military culture and terminology, and by discussing how aspects of the military culture impact behaviors and perspectives. The remainder of day one will review a method for screening, assessment, and treatment outcome monitoring of Posttraumatic Stress Disorder (PTSD) centered on the use of the PTSD Checklist for DSM-5 (PCL-5). Participants will be introduced to VA/DOD best practices for diagnosing military-related PTSD including screening for trauma-related disorders, obtaining thorough military and trauma histories, conducting a semi-structured diagnostic interview, and using self-report measures to track treatment outcome. Interactive exercises and video demonstrations will be used to help develop participants' PTSD assessment skills.

### **Day Two**

Veteran suicide remains a significant public health concern, with those diagnosed with PTSD at potentially elevated risk. Clinicians with the VA Suicide Risk Management Consultation Program will review risk factors and discuss empirically-supported best practices for suicide assessment, prevention, and intervention with Veterans, including lethal means safety counseling and collaborative safety planning.

**Target Audience:** For licensed behavioral health providers who treat Veterans. Non-VA licensed mental health providers who regularly treat U.S. Veterans or those who intend to treat U.S. Veterans can apply.

**Instructional Level:** Intermediate



## **Learning Objectives:**

Attendees will be able to:

- Characterize the structure and major components of the United States military.
- Analyze common characteristics of the military population and how they compare to the general population.
- Substantiate the importance of a distinct culture to the military.
- Appraise elements of the military experience and lifestyle that are integral to military culture.
- Apply the VA/DOD Guidelines for the Assessment of Trauma and PTSD.
- Discriminate between symptoms of PTSD and other disorders based on the DSM-5.
- Facilitate the screening, diagnostic assessment, and tracking of treatment outcomes in PTSD patients using the PTSD Checklist for DSM-5 (PCL-5).
- Communicate results of diagnostic assessments as well as treatment outcome measures to clients to facilitate effective treatment.
- Apply suicide risk identification methods, including identifying warning signs, predictive analytics, and screening.
- Conduct a comprehensive suicide clinical risk assessment to include a review of assessment goals, suicidal ideation, and history of suicide, and identification of warning signs and both risk and protective factors for suicide.
- Utilize the results of a suicide clinical risk assessment to develop a suicide risk formulation.
- Provide recommendations for the documentation of suicide risk based on the outcomes of the suicide clinical risk assessment.
- Differentiate between acute and chronic suicide risk and descriptors for low, intermediate, and high-risk status.
- Justify the use of lethal means safety counseling as a best practice for suicide risk management.
- Apply the recommended methods for lethal means safety counseling for firearms, medications, and other environmental risks to US Veterans.
- Collaboratively develop and utilize an effective safety plan to mitigate suicide risk.



## **DAY ONE**

10:00-12:00 AM	Military Culture
15 Minute Break	
12:15-1:15 PM	Measurement Based Care
1:15-2:15 PM	PTSD Assessment/PTSD Diagnosis
60 Minute Break	
3:15-4:15 PM	PTSD Assessment/ Assessments
4:15-5:15 PM	PTSD Assessment/Evidence-Based Treatments
15 Minute Break	
5:30-6:30 PM	PTSD Assessment/Differential Diagnoses

## **DAY TWO**

10:00-11:00 AM	Suicide Risk Identification
11:00-12:00 AM	Suicide Clinical Risk Assessment
15 Minute Break	
12:15-2:15 PM	Suicide Risk Formulation
60 Minute Break	
3:15-4:15 PM	Lethal Means Safety
4:15-5:15 PM	US Veterans and Firearms
15 Minute Break	
5:30-6:30 PM	Safety Planning



## Location Information

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**Address:**

<https://www.eventbrite.com/e/training-on-assessment-of-ptsd-and-suicide-risk-management-in-veterans-registration-467528770137>

July 19-20, 2023, 10:00 - 18:30 Eastern Time

## Participate

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**Registration Information:**

Registration will be through the Eventbrite system. and those that register will be waitlisted, and vetted through the CDP/VA Project Managers. Applicants will be notified by email of the decision within approximately two weeks of the application.

Cost/Refunds: Zero cost, no refund policy

**Special Accommodations:**

If you require special accommodations due to a disability, please contact Micah Norgard at [micah.norgard.ctr@usuhs.edu](mailto:micah.norgard.ctr@usuhs.edu) 2 weeks before the training so that we can provide appropriate service.



## Presenter

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**Kevin Holloway, Ph.D.**, is a licensed clinical psychologist working as the Director of Training and Education at the Center for Deployment Psychology (CDP) at the Uniformed Services University of the Health Sciences in Bethesda, Maryland. In this capacity, he leads a team of subject matter experts and support staff to develop and present workshops across the world to military and civilian audiences on topics in the deployment of behavioral health and evidence-based therapies for Posttraumatic Stress Disorder (PTSD). Additionally, he leads a team of mental health subject matter experts and technology experts to develop and disseminate technology solutions to improve access to and quality of professional training.

**Jenna Ermold, Ph.D.**, is a clinical psychologist working as the Assistant Director of Training and Education for the Center for Deployment Psychology at the Uniformed Services University in Bethesda, Maryland. Dr. Ermold oversees the development of online and face-to-face trainings for behavioral health clinicians to improve clinical and cultural competency in working with military members and their families. Dr. Ermold also presents workshops on deployment behavioral health topics for clinicians across the country.

**Lisa-Ann Cuccurullo, Ph.D.** is a clinical psychologist at the National Center for PTSD, where she works on a team that facilitates the use of empirically supported treatments for veterans in rural areas. Her clinical work has focused on cognitive behavioral treatments for PTSD (and other post-trauma-related symptoms), such as Prolonged Exposure, Cognitive Processing Therapy, Acceptance and Commitment Therapy, and Dialectical Behavior Therapy. She is a national Prolonged Exposure consultant in VA. Before joining the staff of the National Center for PTSD, she was the Military Sexual Trauma Coordinator and Assistant Director of Psychology Clinical Training at the Southeast Louisiana Veteran's Health Care System and a clinical instructor at Tulane University School of Medicine. Dr. Cuccurullo's current research interests focus on the implementation of empirically supported treatments and posttraumatic symptom presentation. Dr. Cuccurullo received her doctorate in clinical psychology from La Salle University and completed her clinical internship and a PTSD-focused fellowship at the Southeast Louisiana Veteran's Health Care System.

**Hal S. Wortzel, MD**, is a forensic neuropsychiatrist at the Rocky Mountain MIRECC, where he serves as Director of Neuropsychiatric Consultation Services and Co-director for the National Suicide Risk Management Consultation Program. He is an Associate Professor of Psychiatry, Neurology and Physical Medicine & Rehabilitation at the University of Colorado, and serves as the Michael K. Cooper Professor of Neurocognitive Disease, and as Faculty for the Program in Forensic Psychiatry. Dr. Wortzel maintains a private practice in Forensic Neuropsychiatry & Behavioral Neurology, and has consulted on numerous criminal and civil cases. Areas of research/scholarship interest include suicide risk management, aggression and suicide in the context of PTSD and TBI, brain injury litigation, and the application of emerging neuroscientific tools to the legal arena.



**Megan Harvey, Ph.D.**, received her PhD in Clinical Psychology at the University of Cincinnati. She has held multiple positions within VA over the past 13+ years, including Local Recovery Coordinator, Local Evidence-Based Psychotherapy Coordinator, and Section Chief of Outpatient Services at the VA Eastern Colorado Health Care System. In 2018, Dr. Harvey joined the Rocky Mountain MIRECC for Veteran Suicide Prevention where she serves in the role of Program Evaluator for the Suicide Risk Management Consultation Program, is on the technical assistance team for the national Suicide Risk Identification Strategy and is a consultant for the Advanced Training in the Safety Planning Intervention (ASPI). Dr. Harvey's interests include evidence-based interventions that promote recovery and mitigate suicide risk as well as program evaluation. She believes strongly in the mission of VHA and is honored to be contributing to Veteran services.

**Ryan Holliday Ph.D.**, is a Clinical Research Psychologist at the Rocky Mountain Mental Illness Research, Education and Clinical Center for Veteran Suicide Prevention and Assistant Professor at the University of Colorado Anschutz Medical Campus. His clinical and research interest focus upon understanding the intersection of trauma, psychosocial stressors (such as homelessness and justice involvement), and mental health. He is further interested in translating these findings into evidence-based practice.

There is no commercial support or conflict of interest to report for these presenters.

## **Continuing Education**

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The Center for Deployment Psychology is approved by the American Psychological Association to sponsor continuing education for psychologists. The Center for Deployment Psychology maintains responsibility for this program and its content.

The Center for Deployment Psychology offers attendees 14 credit hours for participation in this training. Participants attending events in person are required to sign-in at the start of the training and sign-out at the conclusion of the training in order to attain CE credit. Participant attendance data will be collected electronically during webinars. There is a 30-day time limit post-training to complete all CE requirements. Partial credits cannot be issued. Inquiries regarding CE credits may be directed via email to Micah Norgard at [micah.norgard.ctr@usuhs.edu](mailto:micah.norgard.ctr@usuhs.edu).

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