CCP Trainer's Guide

3

Module 3

Regular Services Program (RSP) Midprogram Training

Crisis Counseling Assistance and Training Program

SAMHSA
Substance Abuse and Mental Health
Services Administration

FEMA

How to Use This Trainer's Guide

This trainer's guide contains a suggested schedule and learning activities for delivering the required Crisis Counseling Assistance and Training Program (CCP) Regular Services Program (RSP) Midprogram Training. This training is focused on helping CCP leadership and staff to reflect on what has been accomplished during the RSP to date, identify next steps, and begin to prepare for phasedown.

Trainers are encouraged to adapt and modify how they deliver the course to meet the needs of the specific program, audience, and circumstances, while keeping to the established course purpose and learning objectives. For example, the time available and the number of participants are two factors that would impact how the course is delivered.

This trainer's guide presents a detailed plan of instruction for a 1-day course. The agendas assume an 8½-hour training day, including 15-minute breaks in the morning and afternoon, and 1 hour for lunch.

The activities and timing of this design are intended for a group of about 25 participants. If the group is smaller, the activities and group discussions may take less time than indicated in this plan of instruction. If the group is larger than 25, you will need to modify the activities in order to fit the time available. For example, when a table exercise is indicated in the design, with reports from each table, you may want to have the participants work in trios and take a few examples to process in the large group, rather than asking all of the small groups to give reports.

The trainer's guide provides detailed instructions for suggested talking points and group exercises. It contains images of all slides. If you wish to print the slides out separately, you can do so directly from the PowerPoint file on the Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Technical Assistance Center (DTAC) website in the CCP Toolkit found at the following location: https://www.samhsa.gov/dtac/ccp-toolkit/train-your-ccp-staff.

The *CCP RSP Midprogram Training Participant Workbook* contains all the essential content from the slides that participants should have as reference material, along with worksheets tailored to the learning activities described in this trainer's guide. The *CCP RSP Midprogram Training Participant Workbook* and the *CCP RSP Midprogram Training Presentation* are both available on the *SAMHSA DTAC website*, along with this Trainer's Guide. It is suggested that the *CCP Participant Workbook* be reproduced on three-hole-punch paper and provided to participants in a three-ring binder.

Rev. X/2023

CCP Trainer's Guide
RSP Midprogram Training

Table of Contents

Pre-training Checklist

Prior to the course, contact the CCP program manager to discuss the items below:

Disaster Specifics

- ☐ Type of disaster

- ☐ Size and scope of disaster

- ☐ Unique dynamics of the disaster

- ☐ Population affected, including special populations and cultural factors

Program Data

- ☐ RSP start and end dates and disaster anniversary date

- ☐ Size of program—number of providers and counselors, status of recruitment

- ☐ Background and experience of counselors:

  - − Ask the program manager about the strengths and needs of the staff in order to tailor the training appropriately.

- ☐ Current status of service provision:

  - − Ask about the status of group counseling to determine which of the two recommended group counseling-related activities to do during the training.

  - − Ask whether to focus the community networking activity on anniversary or phasedown preparation.

- ☐ Request a copy of key program documents:

  - − Summary of data on service provision to date

- ☐ RSP application:

  - − Current Needs Assessment

  - − Current Outreach Strategy/Plan of Services

  - − Current Staffing Plan/Organizational Chart

  - − Maps of the disaster impact

- ☐ Ask the program manager to be prepared to answer questions about the program's assessment and referral protocols, specifically those for someone in crisis.

Course Logistics

☐ Number of participants:

- − Encourage the program manager to attend the entire training.

- − Make sure any new program staff who didn't attend the Core Content and Transition to RSP Trainings attend this training and get a copy of the participant workbooks for the Core Content and Transition to RSP Trainings.

☐ Determine whether other community representatives would benefit from attending the training.

☐ Confirm length of course and start/end times.

☐ Location and training facility—training room size and setup

☐ Audiovisual support—LCD, computer, easel stands, and tear sheets

☐ Name tags, markers, etc.

☐ Reproduce the *CCP RSP Midprogram Training Participant Workbook* and other materials (handouts of program documents, *CCP Job Aid for Crisis Counselors,* etc.)

- − Modify *RSP Midprogram Participant Workbook,* if desired/necessary.

Travel Logistics

☐ Flight recommendations

☐ Lodging recommendations

☐ Reimbursement procedure

Other Items

☐ Review the training agenda and activities with the program manager.

☐ Agree how the staff input generated through the training activities will be captured and transferred to the program manager.

☐ Familiarize yourself with the CCP Toolkit on the SAMHSA DTAC website in the event that you need to reference CCP trainings, tools, and resources (https://www.samhsa.gov/dtac/ccp-toolkit).

Post-training

☐ Make recommendations to the program manager about post-training follow-up—e.g., subsequent meetings, training, other actions.

☐ Submit completed participant evaluations and trainer feedback form to the Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Technical Assistance Center (DTAC). Participant evaluation forms are included in the *RSP Midprogram Participant Workbook,* and the trainer feedback form appears at the end of this trainer's guide.

Recommended Agenda
RSP Midprogram Training—1 Day

8:30 a.m.	Welcome and Introductions
9 a.m.	Section 1: Program Assessment
9:45 a.m.	Section 2: Individual, Community, and Staff Needs
10 a.m.	Break
10:15 a.m.	Section 2 (cont.)
11:15 a.m.	Section 3: Crisis Counseling Services and Skills
12:30 p.m.	Lunch
1:30 p.m.	Section 3 (cont.)
2:45 p.m.	Break
3 p.m.	Section 3 (cont.)
3:30 p.m.	Section 4: Program Management
4 p.m.	Section 5: Stress Management
4:45 p.m.	Applying Your Learning and Course Evaluation
5 p.m.	Adjourn

Welcome and Introductions *(30 minutes)*

| 15 minutes | Welcome and Introduction |

**Begin** the course by welcoming participants and introducing yourself.
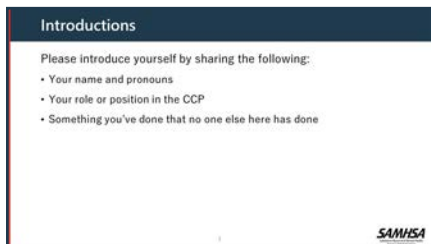
Ask participants to introduce themselves by sharing the following:

- Their names

- Their role or position in the CCP

- Something they've done that they think no one else here has done

During the introductions, if someone else in the room has done what the person introducing him- or herself has done, then the participant must state something else until he or she finds something no one else has done. Once this has been achieved, wait for further instructions.

| 15 minutes | Course Objectives, Agenda, and Norms |
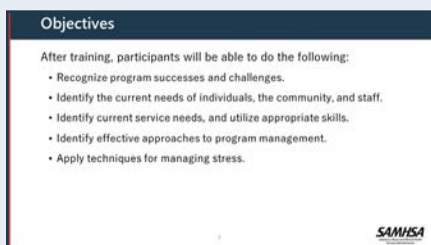
Review objectives of the course. Note that the course agenda and objectives appear in the workbook.

Objectives—By the end of the course, participants will be able to do the following:

- Recognize program successes and challenges.

- Identify the current needs of survivors, the community, and staff.

- Identify current service needs, and utilize appropriate skills.

- Identify effective approaches to program management.

- Apply techniques for managing stress.

Emphasize the organizing theme of this course is to reflect on what has been accomplished during the RSP to date, identify next steps, and begin to think about phasedown.

Agenda

Morning	Afternoon
Welcome and Introductions	Section 3: Crisis Counseling Services and Skills (cont.)
Objectives and Agenda	Section 4: Program Management
Section 1: Program Assessment	Section 5: Stress Management
Section 2: Individual, Community, and Staff Needs	Applying Your Learning and Course Evaluation
Section 3: Crisis Counseling Services and Skills	

SAMHSA

Review the course schedule, and discuss how the objectives will be addressed during the training.

Be sure to **cover** logistical details, such as the following:

- Lunch and break times and locations

- Restroom locations

- Time (follow clock in the room)

- Include any special instructions for virtual training, if applicable

- Address safety protocols, such as physical distancing, and building evacuation routes

Pause and ask for participants' reactions or questions, and ask whether they feel there is anything missing from this program.

Guidelines for Working Together

- Keep time (start on time, return from breaks on time, end on time).
- Switch mobile phones off or silence them.
- Participate fully.
- Ask questions freely.
- Balance talking and listening.
- Respect each other's points of view.
- Use "person-first" language, i.e., "person with a disability."

SAMHSA

Introduce the CCP RSP Midprogram Participant Workbook, and describe how it will be used during the course. Highlight the following:

- Keep time (start on time, return from breaks on time, end on time).

- Switch mobile phones off or to "vibrate."

- Participate fully.

- Ask questions freely.

- Balance talking and listening.

- Respect each other's points of view.

- Use "person-first" language, i.e., "person with a disability."

Ask the participants to decide together on the following:

- If there are any guidelines they would like to modify

- If there are any guidelines to add

Write any additional guidelines on the tear sheet, and **check** to see if everyone in the room can agree to the list. You can keep it light by asking them to shake hands with someone at their table to signify agreement with this "social contract."

Warmly **welcome** the participants again, and jump into the content of the course!

Section 1: Program Assessment *(45 minutes)*

5 minutes | Session Introduction

Section 1—Program Assessment

- Program Successes and Challenges
- Using Program Data

SAMHSA

Introduce this session by telling participants that we're going to start our work together today by taking stock of the program's successes and challenges to date in a way that's fun and creative.

Objective

- Recognize and illustrate program successes and challenges.

SAMHSA

Review the session objective:

- Recognize program successes and challenges.

40 minutes | Program Successes and Challenges Mural

Explain that we're going to create a mural that shows the program's successes and challenges over time.

Preparation

Create a timeline along the wall using tear sheets. Tape tear sheets on the wall, end to end, and draw a timeline across the center of each page, from left to right. Start the timeline with the disaster, and mark the months up to the present time.

Write "Successes" on the top center of the page. Write "Challenges" on the bottom center. When the participants draw on the mural, they will draw successes above the timeline and challenges below the timeline.

Successes

Disaster ├─┼─┼─┼─┼─┼─┼─┤ Present Time
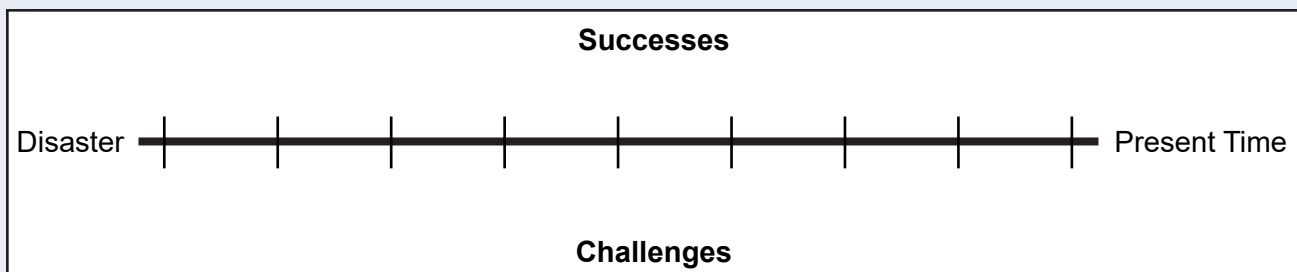
Challenges

Program Successes and Challenges

Mural Activity

- Individually, think about the successes and challenges of this CCP over time.
- With your group, share your lists of successes and challenges.
- Come to agreement on two or three successes and two or three challenges you'd like to put on the mural.
- Draw them on the timeline sheets on the wall—use a combination of images and words.

SAMHSA

Task

Have participants reflect individually on the successes and challenges the program has faced to date. (5 minutes)

Divide the participants into groups along functional and geographic roles and responsibilities. For example—have the program management team members form one group, the administrative team members form another group, and crisis counselors form geographic groups based on their area of responsibility.

If the program has a small staff, you may want to have mixed groups with program staff (administration, finance, etc.) integrated with crisis counseling staff.

Have participants share their reflections on successes and challenges in their group. They should come to agreement on two or three successes and two or three challenges and draw them on the timeline on the wall. They can use a combination of drawings and words, if they'd like. (15 minutes)

Once all the groups have finished, **have the participants stand** in front of the mural they have created. **Ask** each group to tell the story behind the drawings they have made. (15 minutes)

Summarize the discussion, and explain that this mural they've created is a common starting point for us to continue our work today as a group. We will use this foundation of what they've accomplished and struggled with as we collectively strategize about where the program needs to go from here and how to get there. (5 minutes)

Transition to the next lesson on using program data.

Using Program Data

Program Evaluation: Program evaluation is a systematic effort to collect, analyze, and use data to inform and improve service delivery.

- Data collection
- Data analysis
- Feedback loop
- Program evaluation plan

NEEDS ASSESSMENT   OUTREACH SERVICES

SAMHSA

Review the definition of program evaluation, and discuss the various aspects of the data collection and program evaluation process.

Program evaluation is a systematic effort to collect, analyze, and use data to inform and improve service delivery.

- Data collection: A process of gathering information about survivors and services.

- Data analysis: A process of reviewing and interpreting the information that has been collected.

- Feedback loop: A process of sharing findings from the analysis and developing a strategy to address them.

- Program evaluation plan: A plan for how you will monitor and evaluate your program service delivery to assess improvements and support decision making.
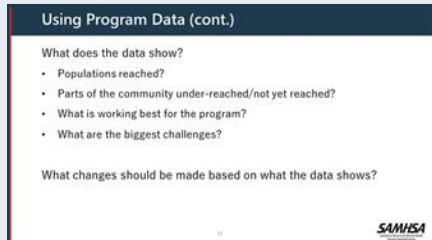
Using Program Data (cont.)

- Data Collection
  - Challenges with using the data systems?
- Data Analysis
  - What has the data shown? What is missing from the data?
- Feedback Loop
  - How has data been used so far?
- Program Evaluation Plan
  - Who is responsible?

SAMHSA

Discuss the role of the CCP staff in data collection and program evaluation. Explain that there is more to the data than them just entering it into ODCES. All staff should be aware of and involved in all steps in the process.

- Data Collection

    - Challenges with using the data systems?

- Data Analysis

    - What has the data shown? What is missing from the data?

- Feedback Loop

    - How has data been used so far?

- Program Evaluation Plan

    - Who is responsible?

Suggested talking points:

- How to improve the reach of the service delivery system or how to improve the efficacy of the services themselves, using program evaluation to provide a data-driven basis for the actions.

- Data collection is performed by the crisis counselors while data analysis is performed by program managers.

- The feedback loop is performed by program managers with input from the crisis counselors.

- The program evaluation plan is implemented by the crisis counselors and team leaders and monitored by the program managers.

| 15 minutes | **Program Data Activity** |

Using Program Data (cont.)

What does the data show?
- Populations reached?
- Parts of the community under-reached/not yet reached?
- What is working best for the program?
- What are the biggest challenges?

What changes should be made based on what the data shows?

SAMHSA

Activity: (For this activity the instructor must prepare by getting the needs assessment and recent demographic data reports from the program manager ahead of the training. The reports should show the specific program data along broad categories like basic demographics of their survivors and the split of services. The trainer should be prepared to share/display them during the activity.)

Use data from program and original needs assessment to compare what was predicted and what is happening.

As a large group, **review** the data and **discuss** the following questions:

- What populations have been reached?

- Which parts of the community under-reached/not yet reached?

- What is working best for the program?

- What are the biggest challenges?

- What changes should be made based on what the data shows?

Ask for the group to brainstorm why the actual data differs from the original needs assessment, and what should be changed at this point in the program to better address the community's needs.

Ask them to share specific challenges that they have experienced so far in the program. How have those challenges affected the program overall (as shown by the data)?

Conclude this section and mention that we will discuss data collection and evaluation again later in the training. We will now move into talking about individual, community and staff needs.

Section 2: Individual, Community, and Staff Needs
(3 hour, 45 minutes)

5 minutes	Session Introduction

Introduce this session by explaining that we're going to build upon our shared understanding of the program's history now by looking at the current state of needs for individuals, communities, and the CCP staff.

Review the session objective:

- Identify the current needs of survivors, the community, and staff.

10 minutes	Phases of Disaster

Explain that in order to understand current needs, it's important to know what phase of the disaster and recovery the community is in.

Review the phases of disaster graph (see suggested talking points below).

Ask participants what phase the community is in right now. What effect does the current phase of disaster have on individuals, the community, and staff?

Suggested talking points:

- This graph is a simple model of the community (rather than individual) reactions to disaster.

- A CCP is a year or longer in duration. It is "more of a marathon than a sprint."

- Communities progress through these phases at different rates, depending on the type of disaster and the degree of exposure. They may also move back and forth between phases.

- The Chronic Cyclical Disaster Model is a newer approach which considers multiple or overlapping disasters. An infographic is available here: https://chroniccyclicaldisasters.info.

- Crisis counseling interventions need to be adapted to the phase of the disaster response. Data can inform where certain groups/communities might be in the phases.

- This diagram identifies processes and events in addition to the main phases of disaster.

- Inventory is the process by which communities and individuals come to realize the limits of disaster assistance. This usually begins later in the honeymoon phase and causes the decline into the disillusionment phase.

- Trigger events can happen in any phase following the onset of a disaster but are more typical in the later phases—after the reality of the initial traumatic event has set in. Trigger events vary by disaster, community, and individual, but some trigger events can be predicted. For example, upsetting reports in the media about survivors' suffering or shortcomings in the disaster response can increase stress in individuals and communities.

- Anniversary reactions are often responses to trigger events that occur around the anniversary of the disaster event. While each disaster is different, experience with past disasters has shown that disaster event anniversaries are often accompanied by painful memories and potentially stressful media, political, and community attention. Some of these reactions are predictable and can be planned for.

- Working through grief is the process of coming to terms with disaster losses, developing constructive coping strategies, and building a new post-disaster life. This process can sometimes take years.

- Setbacks are trigger events in the reconstruction phase—e.g., recurrence of disaster or media coverage of new and painful discoveries related to the disaster. A community's sense of recovery—of having come to terms with the disaster—can be damaged by these unexpected setbacks.

Discuss the characteristics of the disillusionment and reconstruction phases.

Ask—Does this match with what you're seeing? With what you expect to see in the next phase?

Suggested talking points:

- The RSP Midprogram Training usually falls near the disillusionment phase of the disaster. The issues related to disillusionment affect the CCP staff, the community, and the survivors. Therefore, these issues must be addressed at all three of these levels in order to effectively move to the next stage of the CCP.

- Challenges of the disillusionment phase:

  - Stress and fatigue take a toll.

  - Optimism turns into discouragement.

  - There may be an increased need for substance use services.

  - The larger community returns to business as usual.

  - The CCP may have an increased demand for services as individuals and communities become ready to accept support.

  - Reality of losses sets in.

  - Diminishing assistance leads to feelings of abandonment.

- Reconstruction phase:

  - Individuals and communities begin to assume responsibility for rebuilding their lives.

  - People begin to adjust to new circumstances.

  - There is recognition of growth and opportunity.

  - The reconstruction process may continue for years.

  - People adjust to a new "normal" while continuing to grieve losses.

Give the participants a 15-minute break before proceeding to the next segment on identifying current needs.

15 minutes	**Break**

55 minutes	**Working Group Discussions**

Working Group Discussions

Decide which topic you want to discuss:
- Individual needs
- Community needs
- Staff needs

In your working group:
- Choose a facilitator, reporter, and presenter.
- Discuss the questions listed in your workbook for your topic.
- You have 20 minutes for your discussion.
- Be prepared to present your recommendations for future directions to the rest of the group.

SAMHSA

Say that with a better understanding of the current and anticipated phases the community will be experiencing, we'll now explore the implications for individuals, communities, and staff. **Refer** the group back to the data review and the mural as a starting point.

Explain that in order to cover the most ground in the shortest amount of time, we'll be dividing into three working groups to look at the specific needs of each of those groups.

Divide participants into three working groups, corresponding to the following focus areas: individual needs, community needs, and staff needs. **Ask** them to choose the group that matches the topic in which they are most interested. **Adjust** the group sizes as needed so that you have a relatively similar number of participants in each of the three groups.

If you have a very large group, you may want to have more than three groups, e.g., two groups for each topic area.

Explain that in this session, they'll be working in their groups to assess the current status of that group and identify unmet needs.

Tell the groups that they'll have 20 minutes for their discussion and that they should prepare to present their recommendations for future directions to the large group.
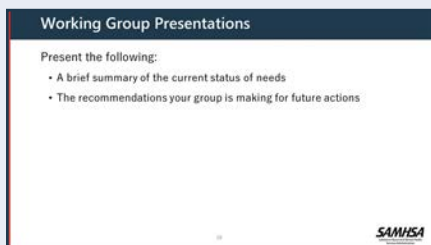
Individual Needs Questions

- What is the status of:
    - Populations targeted and reached?
    - Survivor needs and challenges?
    - Program data analysis and feedback process?
    - Available resources and challenges?
    - Long-term recovery committees?
- Where do we go from here?

- Interpret program data with regard to individual needs.

- Identify populations needing to be reached.

- Plan to address survivor needs and challenges.

- Identify needed resources.

Community Needs Questions

- What is the status of:

  - Community recovery?

  - Communities targeted and reached?

  - Program data analysis and feedback process?

  - Community activities and events?

- Is anyone missing that needs to be brought to the table?

  - Inclusion of community leaders and cultural brokers?

  - Involvement of community organizations?

- Where do we go from here?

  - Interpret program data with regard to community needs.

  - Identify and address remaining community needs and challenges.

  - Identify new ways to promote community recovery.

Staff Needs Questions

How can staff needs be addressed in order to support the continued needs for individuals and the community?

- What is the status of:

  - Staff skills? What trainings are needed?

  - Staff resources?

  - Stress management for staff?

- What other supports are needed?

- How can program data be used to address staff needs?

- What program management supports are needed?

Facilitate the group presentations and discussion. (30 minutes)

Summarize key points and action items after each presentation.

Wrap up the session, and transition to the next section on crisis counseling skills.

You may want to give them a quick stretch break (5 minutes) before proceeding to the next session.

Section 3: Crisis Counseling Services and Skills
(4 hour, 15 minutes)

| **5 minutes** | **Session Introduction** |

Introduce this session by previewing what we'll cover in this section.

Tell participants that we'll do the following:

- Conduct a self-assessment of their crisis counseling skills.

- Identify strategies for strengthening group counseling services.

- Strategize around community networking.

- Check in on any challenges they're facing in assessment and referral.

- Practice effective message delivery for public education.

Explain that we'll cover individual/family and group counseling before lunch, and then the rest after lunch. (If you are following the one-day training schedule.)

Review the session objective.

- Identify current service needs, and utilize appropriate skills.

Start the session by discussing the reach of services diagram and the implications for services at midprogram.

Suggested talking points:

- This graphic illustrates the reach and intensity of crisis counseling services.

- Primary services involve interaction of crisis counselors and survivors.

- Secondary services involve dissemination of information.

- Face-to-face primary services should be the focus of the CCP.

- Lower-intensity services reach a larger number of people.

- It is important to emphasize that as the program moves into the RSP midprogram phase, individual/family crisis counseling sessions continue.

- It is important to canvass hard-hit areas for returnees or those now ready to accept services.

- Continue individual/family crisis counseling with those who have more intensive needs, and continue referrals.

- Group counseling increases during the RSP as individuals become ready for this approach and counselors identify groups of survivors with common needs, issues, and concerns.

- Community efforts are increased through outreach to schools, businesses, and community and faith-based organizations.

- Public education increases and messaging may shift.

Crisis Counseling Services at Midprogram (cont.)

Midprogram is a time to do the following:
- Increase focus on group crisis counseling services, community support, networking, and public education.
- Continue individual/family crisis counseling and targeted outreach.
- Use data to adapt outreach strategies.
- Learn from challenges and strengthen crisis counseling skills.
- Facilitate referral of individuals and families to existing long-term community resources by utilizing the assessment and referral tools.
- Build connections to community-based services that will continue after the CCP has ended.

SAMHSA

Discuss how the focus of crisis counseling services changes at midprogram, as well as the areas to which the program should be paying particular attention:

- Increase focus on group crisis counseling services, community support, networking, and public education.

- Continue individual/family crisis counseling and targeted outreach.

- Use data to adapt outreach strategies.

- Learn from challenges and strengthen crisis counseling skills.

- Facilitate referral of individuals and families to existing long-term community resources by utilizing the Assessment and Referral Tools.

- Build connections to community-based services that will continue after the CCP has ended.

30 minutes	Crisis Counseling Services
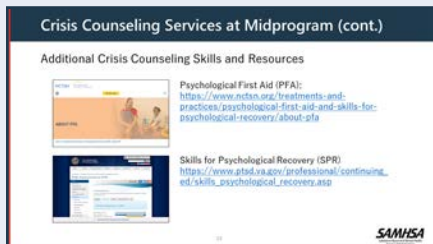
Introduce the concepts of Psychological First Aid and Skills for Psychological Recovery:

- Psychological First Aid (PFA) is an online training from the National Child Traumatic Stress Network (NCTSN): https://www.nctsn.org/treatments-and-practices/psychological-first-aid-and-skills-for-psychological-recovery/about-pfa.

  - PFA (which was introduced in the Core Content Module) is designed to reduce the initial distress caused by traumatic events and to foster short- and long-term adaptive functioning and coping. PFA does not assume that all survivors will develop severe mental health problems or long-term difficulties in recovery. Instead, it is based on an understanding that disaster survivors and others affected by such events will experience a broad range of early reactions (e.g., physical, psychological, behavioral, spiritual). Some of these reactions will cause enough distress to interfere with adaptive coping, and recovery may be helped by support from compassionate and caring disaster responders.

- Skills for Psychological Recovery (SPR) is an online or in-person training through the National Center for PTSD: https://www.ptsd.va.gov/professional/continuing_ed/skills_psychological_recovery.asp

  - Intended for use in the weeks and months after a disaster event, SPR aims to help survivors gain skills to manage distress and cope with stress and adversity after disasters and mass violence events.

  - SPR is a flexible, evidence-based model that helps providers teach core skills—problem-solving, behavioral activation, management of stress reactions, helpful thinking, and rebuilding healthy social connections—to help reduce distress and improve functioning.

Ask if the participants have taken these courses (or others that they would recommend) and how they have used these skills in their encounters with survivors.

Crisis Counseling Services at Midprogram (cont.)

Crisis counseling skills self-assessment:
- Complete the self-assessment in your workbook to identify your strengths and challenges in providing crisis counseling.
- Discuss your results with a partner.
- Prepare to share real-life examples with the group.

SAMHSA

Tell participants we want to check in with them about what's working well for them personally in their provision of crisis counseling and what challenges they're facing.

Ask them to complete the self-assessment of their strengths, skills, and challenges in their workbook. (5 minutes)

Have them discuss their self-assessment with a partner. (10 minutes)

Facilitate a large-group discussion about their self-assessment results. (15 minutes)

- Take a few examples of strengths from participants, and ask them to share any specific examples or tips for the strengths they identified.

- Ask them for examples of the skills they use to facilitate role modeling, empowerment, etc.

- Spend the majority of the discussion time asking them about the challenges they are facing.

- Ask for examples of the challenges they identified. Check to see if the examples they give are common to other staff members. Ask what advice they have for addressing each challenge. Provide your own advice as well.

**Transition** to focus on group crisis counseling.

30–40 minutes	**Group Crisis Counseling**

NOTE: For this segment of the course, you have two options for aspects of group crisis counseling to focus on:

- Option A: Strategies for finding, forming, and facilitating groups

- Option B: Managing challenges in group counseling

Choose which option to use based on what you learned about the current status of group counseling when talking with the program manager prior to the course. For example, if the program doesn't have many groups and is having difficulty getting groups started, choose option A. If the program has a number of groups established, then choose option B. You might also want to poll the staff to find out which topic would be most helpful to them.

For either option, refer back to the work previously done by group members and ask the group to begin their brainstorming based on the needs identified in the previous activity.
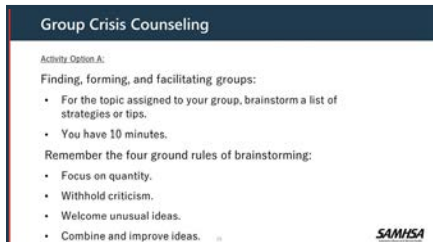
Option A: Strategies for Finding, Forming, and Facilitating Groups

- **Divide** participants into three or six groups (use three groups if the class size is about 15 participants; use six groups if the class includes 25 or more participants).

- **Have** the groups spread out in the room and gather around some blank tear sheets taped to the wall.

- **Tell** participants we're going to do a quick brainstorming session on finding, forming, and facilitating groups.

- **Remind** participants of the four ground rules of brainstorming:

  - Focus on quantity—the greater the number of ideas generated, the greater the chance of producing an outstanding idea.

  - Withhold criticism—by suspending judgment until later, individuals feel free to generate unusual ideas.

  - Welcome unusual ideas—new ways of thinking may provide better solutions.

  - Combine and improve ideas—good ideas may be combined to form a single better idea.

- Brainstorm (10 minutes)

  - Have one or two of the groups brainstorm a list of strategies for finding groups.

  - Have one or two groups brainstorm a list of strategies for forming groups.

  - Have one to two groups brainstorm tips for facilitating groups.

  - Hear quick reports from the groups—emphasize and reinforce the best strategies each group identified. (20 minutes)

Continue on Community Networking slide.

Lunch break (if following one-day schedule)

Option B: Tracking Progress and Managing Challenges in Group Counseling

Materials needed: One index card per person

- **Begin** a discussion about the kinds of challenges CCP staff are facing in group counseling—e.g., difficult group members, getting a session started, transitioning responsibility to the group members.

- **Ask** participants to write on an index card a description of a challenge they are struggling with in facilitating group counseling. (5 minutes)

- **Collect** the cards from participants. Have them discuss the challenges they identified at their tables while you quickly review the cards and choose two to work with. You might want to choose challenges that appear most frequently, or ones that provide the most substance for discussion. (5 minutes)

- **Assign** half of the tables in the room one of the challenges, and have them do some group problem solving around what they would do to manage that challenge. Assign the other half of the room the other challenge you have chosen.

- **Give** the groups 10 minutes to identify a strategy or tips for managing this challenge.

- **Facilitate** a discussion of the similarities and differences of the different groups' responses. Give your own perspective.

- **Repeat** the process for the other case. (10 minutes per case)

  OR

- **Transition** to discuss the examples of progress and success made in groups so far. (10 minutes)

Lunch break (if following one-day schedule)

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1 hour | **Lunch Break**

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20 minutes	Community Networking
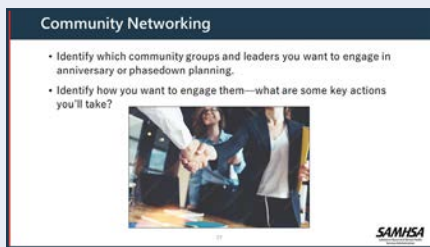
TRAINER'S NOTE: In this section, choose to focus the discussion on either anniversary planning or phasedown preparation, based on the timing of the training relative to either anniversary or phasedown. Discuss with the program manager before the training the event on which they would like to focus, or if both should be discussed.

Discuss the role of the CCP and the community in preparing for and commemorating either the disaster anniversary or the phasedown of the CCP.

- Emphasize that the CCP plays a supportive role in the disaster anniversary planning and commemoration of the community.

- Emphasize that the community must be integrally involved in the preparation and conduct of the CCP phasedown. After the CCP ceases operations, it is the community that must continue to provide services to its members.

- Emphasize that the CCP is a first step and initial connection to an ongoing system that will remain after the CCP is over.

Tell participants that we're going to take some time to begin discussing how to engage the community in anniversary or phasedown planning.

Ask participants to work with others at their table to do the following: (10 minutes)

- Identify which community groups and leaders you want to engage in anniversary/phasedown planning.

- Identify how you want to engage them—what are some key actions you'll take?

Ask groups which groups/leaders they identified. **Record** them on a tear sheet and incorporate into a future timeline.

Ask them what actions they'll take to engage these groups. **Summarize** the discussion, and transition to a discussion of assessment and referral.

| 30 minutes | Assessment and Referral |

Assessment and Referral

Why are the Assessment and Referral Tools so important to the CCP?
- Provides additional support for individuals not able to access their personal coping skills and resiliency
- Prevents long-term trauma through referral to preventative treatment
- Connects individuals with the local systems of care which can address their mental health and substance use needs longer-term

SAMHSA

Review the importance of the Assessment and Referral Tools:

- The CCP is resiliency-based and helps people access their personal coping skills. At this point after a disaster, if someone isn't able to access their personal coping skills it could mean they need professional help.

- The CCP is designed to help prevent long-term trauma and stress reactions like PTSD. The best way the program can do that is by referring individuals who are struggling to preventative treatment.

- The Assessment and Referral Tools are important implements to connect individuals with the local systems of care which can address their mental health and substance use needs. Part of the role of the CCP is to develop partnerships and connections with local resources/providers that continue offering services after the CCP ends. Developing, understanding, and utilizing this network is an important part of this phase of the grant.

Ask the participants to share other reasons why the Tools are important to the CCP program.

Assessment and Referral (cont.)

- What are some specific situations that are appropriate to administer the Assessment and Referral Tools?
- What are some examples of assessment and referral from the past month or so?
- Are there circumstances in which you are reluctant to make a referral, even when it could be indicated? What are these circumstances?
- What are some ways to overcome these obstacles?
- What are some of the grounds for emergency referral?

SAMHSA

Facilitate a large-group discussion about assessment and referral:

- What are some specific situations that are appropriate to administer the Assessment and Referral Tools?

- How have you seen the needs for assessment and referral change over time?

- What are some current examples of assessment and referral from the past month or so?

- Are there circumstances in which you are reluctant to make a referral, even when it could be indicated? What are these circumstances? (Record these on a tear sheet.)

- What are some ways to overcome these obstacles?

- What are some of the grounds for emergency referral?

Review the Adult Assessment and Referral Tool.

Discuss the following talking points/reminders:

- The Assessment and Referral Tools are often underutilized by CCP programs. Following the guidelines on when to use the tools ensures they will be utilized at the correct times.

- In the mobile app, the tool will prompt the user when the criteria are met, and crisis counselors should be using the form when appropriate.

- At the end of the form, you should review the responses that are highly rated and be prepared to offer the respondent a referral for more intensive services.

- It is important to have a plan in place (that adheres to your employer's protocol) for what to do if the individual says "yes" to the question "Is there any possibility that you might hurt or kill yourself?"

- A crisis counselor can still make visits to a survivor who has received an assessment and referral.

Review the Child/Youth Assessment and Referral Tool.

Remind participants that training videos on these forms are available online: https://www.samhsa.gov/dtac/ccp-toolkit/train-your-ccp-staff. Suggest the participants watch the videos at a future team meeting and do the forms together to practice as a group. This will help them become more familiar and comfortable with asking the questions.

Review the guidelines for emergency treatment referral.

Emphasize that crisis counselors should know local emergency resources before going out into the community.

Ask the program managers to share with the group how their work interfaces with existing mobile crisis response in addition to the 988 call centers.

Review the guidelines for nonemergency treatment referral.

Refer to the table in their workbooks describing the difference between traditional case management and CCP resource linkage.

Facilitate a discussion with the participants around the following questions:

- How might you know a person needs assessment and possibly also a referral?

- What resources do you have to refer people to?

- When should you contact your supervisor?

- What protocols do you have in place if someone answers "yes" to a question about self-harm?

- What real-life experiences have you had with the Assessment and Referral Tools? Do you have any lessons learned to share with the group?

Transition to discussing public education.

45 minutes	Public Education

Discuss how the need for public education increases at midprogram.

Ask participants where they currently provide public education and information—what venues, what audience?

Ask them to identify places they are not providing public education but could—what are some untapped opportunities? Record these on a tear sheet. Get the group to identify at least three opportunities.

Ask if the message has changed since the beginning of the program. Should any messaging by updated to reflect the status of the CCP program, and the eventual phasedown?

Ask them to imagine they're preparing a presentation at one of the venues identified above—what would you do to prepare in order to be successful?

The group will hopefully identify some of the following:

- Be clear about the purpose of your presentation.

- Know who the audience is.

- Gather appropriate supporting materials—visual aids, handouts.

- Know what you're going to say—prepare your remarks.

- Use effective presentation skills.

Emphasize that there are three key aspects to making an effective public education presentation:

- Know your audience.

- Plan your presentation.

- Deliver an effective message.
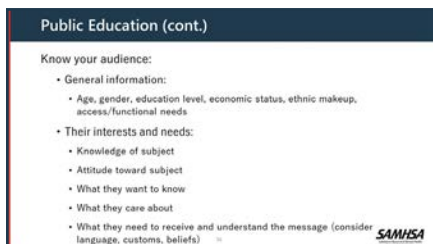
Discuss what you want to find out about your audience before making a presentation:

Know Your Audience

- General information about your audience—e.g., age, gender, education level, economic status, ethnicity

- Their interests and needs:

  - Knowledge level of your subject

  - Attitude toward the subject

  - What they want to know

  - What they care about

  - What they need to receive and understand the message (consider language, customs, and beliefs)

The most important thing to think about and determine is, what's in it for the audience? Why should they care about what you're saying? Orient your presentation around that. Explain that you won't always know for sure what their interests and needs are, but you can make an educated guess.

Explain the key steps in planning and preparing a presentation.

Plan Your Presentation

- Determine your key message—what do you want them to think, do, or know?

- Decide on the top three points of your message— these points should be concise.

- Identify supporting facts, examples, or stories—people remember examples and stories best.

- Craft a strong opening and closing statement—tell people what you're going to tell them; tell them; and then, tell them what you told them. Repetition of your key message will enhance audience retention.

- Develop supporting materials (visual aids, handouts, etc.)—when possible, use visuals and handouts to supplement your presentation.

Discuss the aspects of delivering an effective message.

Deliver an Effective Message

- Voice tone and speaking style:

  - Speak loudly and clearly—use your voice for emphasis.

  - Avoid talking in a monotone and trailing off at the end of sentences.

- Body language:

  - Gestures:

    - Maintain an "open" body posture—don't cross or clasp your hands; face the audience.

    - Don't fidget with anything; put down pens, markers, and papers.

    - Move around somewhat while presenting.

  - Facial expressions:

    - Make sure your facial expression matches what you're saying—excited, serious, etc.

    - Smile when appropriate.

- Eye contact:
    - Look for an "ally" in the group—but don't fixate on that one person!
    - Move your gaze about the room.
    - Don't look over people's heads.
- Preparing:
    - Write out what you want to say and put it in your own voice.
    - Practice ahead of time.
    - Practice in front of a mirror.

Public Education (cont.)

Activity instructions:

- For the audience or venue assigned to your group, prepare a 3- to 5-minute public education presentation.
- Discuss what you know about your audience.
- Plan the presentation.
- Identify someone in your group to deliver the message.
- Take 15 minutes to prepare.

SAMHSA

Note that many of these tips are common sense and probably aren't anything new to them. The hard part is doing it, and the secret to that is practice!

Tell them they are going to have a chance to practice crafting a public education message for a specific group and delivering that message.

Break the participants into three groups (or some multiple of three, depending on the size of the group). Choose three venues/audiences from the list of potential public education opportunities the group brainstormed. Assign one venue/audience to each group.

Their task is to prepare a public education message for that group (3–5 minutes) and identify supporting materials they would want to provide.

Tell them they have a total of 30 minutes to prepare and take a break before we start the presentations; it's up to them how they want to manage their time (i.e., take a break first, then work, or vice versa).

Have each group present its public education message and describe what supporting materials it would provide at the meeting.

Facilitate a brief feedback session after each presentation—on both the presenter's delivery (body languages, voice) and the message itself (clarity, persuasiveness). Ask the other participants to give feedback first, and then add in your perspective. Start by asking these questions:

- What worked well in this presentation?

- What could be improved?

Spend about 10 minutes per group for the presentation and then feedback. (30 minutes total)

Summarize—or ask the participants to summarize—the key messages about planning and delivering effective public education.
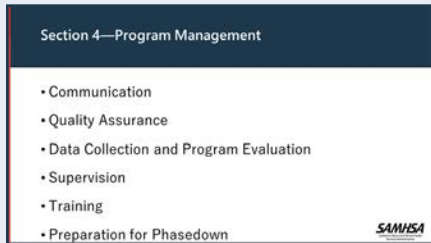
Wrap up this session, and transition to the next section on program management.

Give a 15-minute break if following the one-day schedule.

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15 minutes | **Break**

Section 4: Program Management *(30 minutes)*

5 minutes | **Session Introduction**

Section 4—Program Management
- Communication
- Quality Assurance
- Data Collection and Program Evaluation
- Supervision
- Training
- Preparation for Phasedown

SAMHSA

Introduce this session by saying that we're going to review and discuss a few key areas of program management to identify what's working well and where there's room for improvement.
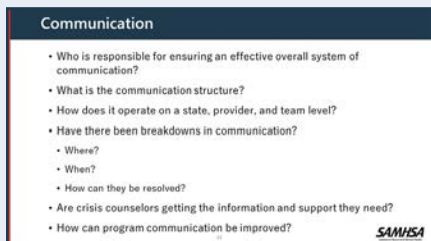
Objective
- Identify effective approaches to program management.

SAMHSA

Review the session objective:

- Identify effective approaches to program management.

Share with the group that while this section says program management, we want to hear from everyone, not just management/leadership.

25 minutes | **Program Management Discussion**

Communication
- Who is responsible for ensuring an effective overall system of communication?
- What is the communication structure?
- How does it operate on a state, provider, and team level?
- Have there been breakdowns in communication?
  - Where?
  - When?
  - How can they be resolved?
- Are crisis counselors getting the information and support they need?
- How can program communication be improved?

SAMHSA

TRAINER'S NOTE: In this section, slides with suggested questions are provided for a variety of program management issues. Based on your understanding of the group, the program, and the program management, you can choose a few topics to focus discussion on in this session, or try to cover all topics quickly.

Facilitate discussion about the current status of communication within the project:

- Who is responsible for ensuring an effective overall system of communication?

- What is the communication structure (i.e., mobile phones, email, team meetings, supervisor meetings)?

- What tools are being used to facilitate communication (i.e., the ODCES mobile app Resources function)?

- How does it operate on a state, provider, and team level?

- Have there been breakdowns in communication?
  - Where?
  - When?
  - How can they be resolved?
- Are crisis counselors getting the information and support they need?
- How can program communication be improved?
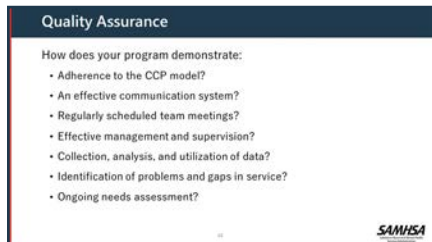
Ask about their current mechanisms for quality assurance.

How does your program demonstrate:

- Adherence to the CCP model?
- An effective communication system?
- Regularly scheduled team meetings?
- Effective management and supervision?
- Collection, analysis, and utilization of data?
- Identification of problems and gaps in service?
- Ongoing needs assessment?

The CCP may have a formal quality assurance process in place. If so, have the program leadership and participants describe it and how it is working. Or, **ask** participants to review the list on the slide and identify one or two they would like to enhance in the coming months.
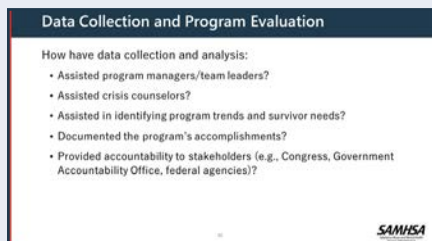
Facilitate discussion on how data collection has been useful in the program. The earlier discussion on data focused on interpretation of the data, but this section focuses on how data impacts the program's internal processes. **Focus** the discussion on how the answers to the questions on the slide will be captured and shared with stakeholders going forward.

How have data collection and analysis:

- Assisted program managers/team leaders?
- Assisted crisis counselors?
- Assisted in identifying program trends and survivor needs?

- Documented the program's accomplishments?

- Provided accountability to stakeholders (e.g., Congress, Government Accountability Office, federal agencies)?

Ask for examples of how data has been used to change aspects of the CCP to better serve the needs of the community. The trainer may also want to share some real-world examples with the group.
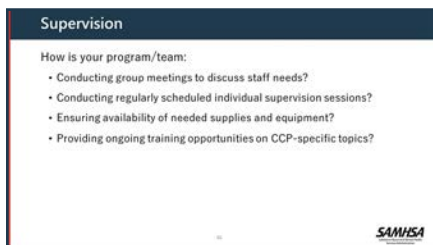
Facilitate a discussion of supervision in the program.
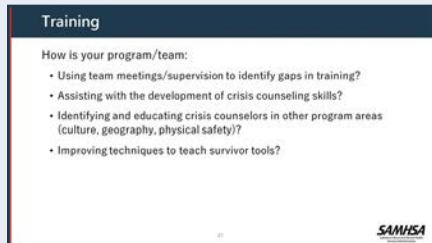
How is your program:

- Conducting group meetings to discuss staff needs?

- Conducting regularly scheduled individual supervision sessions?

- Ensuring availability of needed supplies and equipment?

- Providing ongoing training opportunities on CCP-specific topics?

Suggested talking points:

- If the participants are unfamiliar with supervision, as it is carried out in the mental health field, discuss what types of issues might be addressed in supervision (e.g., what happens in individual supervision).

- Supervisors need to ensure that new and existing staff understand the CCP model and the parameters of the program.

- At the start of the CCP, there should be daily all-staff meetings. Typical topics include necessary trainings, supervision techniques, and stress management.

- There should be regular meetings, in-service trainings, and open communication to ensure staff stay within the boundaries of the CCP and do not engage in non-allowable activities such as case management and advocacy.

- Identify staff needs:

  - By observing through face-to-face outreach with the team

  - Through group and individual support

  - Through training

- Address staff needs through the following:

    - Face-to-face outreach modeling and education

    - Supervision and education

   - Training focused on specific needs

Ask about the training provided by the program to staff.

How is your program:

- Using team meeting/supervision to identify gaps in training?

- Assisting with the development of crisis counseling skills?

- Identifying and educating crisis counselors in other program areas (culture, geography, physical safety)? Improving techniques to teach survivor tools?

Discuss any challenges and successes with supervision and training. What has worked best for the CCP teams? What could be improved?
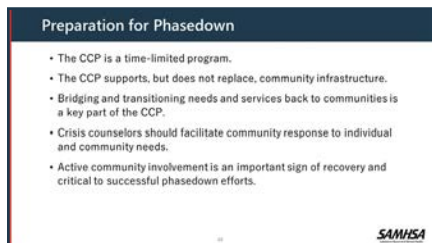
Introduce the concept of phasedown, and explain why it's important to pay attention to at midprogram:

- The CCP is a time-limited program.

- The CCP supports, but does not replace, community infrastructure.

- Bridging and transitioning needs and services back to communities is a key part of the CCP model.

- Crisis counselors should facilitate community response to individual and community needs.

- Active community involvement is an important sign of recovery and critical to successful phasedown efforts.

Suggested talking points:

- At this point in the program, the participants should be taking stock and doing a general assessment of these areas:

    - Individual and community needs

    - Where they are as a program

- Where they have been

- Where they want to go (e.g., additional outreach and intervention strategies, goals for the remainder of the program)

Ask what plans they have to begin preparing for phasedown.

Bring this session to a close, and transition to the last session on stress management.

Give the participants a quick stretch break if they need it before moving on to the next session.

Section 5: Stress Management *(45 minutes)*

5 minutes | **Session Introduction**

Introduce this session by saying that we want to promote a "marketplace of ideas" on stress management, as this is such a critical area for maintaining the health of the staff and for promoting survivor recovery.

Review the session objective:

- Apply techniques for managing stress.

40 minutes | **Stress Management Techniques**

Emphasize how important stress management is, for staff themselves and for role modeling for survivors.

Remind the staff that the CCP Toolkit includes a video on Stress Management Techniques, which can be found at https://www.youtube.com/watch?v=IqpCCnmwNVY. If time allows and the classroom has the proper audio/visual set up, show the video to the class. If not, encourage the participants to watch it on their own.

Ask participants to think about answers to these questions:

- What stress management techniques work well for you?
- What techniques have you introduced to survivors?

Give them a few minutes to reflect individually and make some notes in their workbooks.

Stress Management Techniques (cont.)

Stress Management Marketplace Activity
- With your group, share your stress management techniques.
- Choose one you'd like to market to the rest of the group.
- Create a poster advertising this technique.
- Identify two spokespersons.
- Share your findings with the larger group.

SAMHSA

Explain that we're going to create a marketplace for stress management techniques.

Tell participants to share their techniques at their tables and choose one that they will "market" to the rest of the group. Have them create a poster advertising the stress management technique they want to share with the rest of the group. (20 minutes)

Have each group identify two people who will stay with the poster to explain the technique to interested "shoppers" in the "marketplace." The first person—ideally the person who contributed the idea—will stay and explain the poster for the first 10 minutes of the marketplace; the second person will stay during the next 10 minutes of the marketplace.

Give the participants 20 minutes to mill around the "marketplace," learning about each group's stress management techniques. **Encourage** them to take notes on the new techniques they're learning.

After 10 minutes, **announce** that it's time to switch the poster presenters. Give the presenters time to switch; then, start up the marketplace again for another 10 minutes.

At the end of 20 minutes, have all the participants take their seats again. **Ask** these questions:

- What have you learned that you're excited about?
- What can you use yourself?
- What can you use with survivors?
- What can you use with your teams?

If time permits, check with participants about how well the program management and program systems/procedures are supporting them in managing their stress.

You could either facilitate a brief discussion, or do a suggestion box, where participants write down a suggestion for improving organizational stress management and hand it in. You then give the suggestions to the program manager for consideration and follow up.

Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Technical Assistance Center (DTAC)

SAMHSA DTAC supports SAMHSA's efforts to prepare states, territories, and local entities to deliver an effective behavioral health response during disasters.

Toll-free: 1-800-308-3515

E-mail: DTAC@samhsa.hhs.gov

Web: http://www.samhsa.gov/dtac

Bring this session to a close, and transition to the final segment of the training—applying your learning and course evaluation.

Remind participants that SAMHSA DTAC is available as a resource for information, assistance, and questions regarding the CCP.

Applying Your Learning and Course Evaluation
(15 minutes)

10 minutes | **Applying Your Learning**

Tell participants that what we're about to do is the most important part of any course. Studies have shown that if you don't use new skills you have acquired during training within 2 weeks of the course, those new skills are lost to you. So, taking a few moments to review your learning and set your goals to apply what you have learned is essential.

Have participants turn to the reflection worksheet in their workbooks and complete the worksheet there. Give them about 5 minutes to complete it.

Tell the participants to find a partner and share their plans with each other.

Encourage them to make a commitment to check back in with each other in 2 weeks to see if they're following through on the actions they've identified.

Give them about 5 minutes for their discussion.

Ask for a few examples of the following:

- Key learning

- Specific actions they intend to take to apply that learning

5 minutes Course Evaluation

Hand out the course evaluation form, and ask participants to complete it. If providing the course evaluation via a website link, share that link.

Encourage them to write in specific comments on the form, as the feedback is collected and used to improve future course deliveries.

Thank them for their time, hard work, and attention.

Training Feedback

The following pages include two different training feedback forms. One form is intended to be filled out by all those who were in attendance to participate in the training. The second form is meant to be filled out by the trainer(s) and program leadership.

Receiving feedback from both the trainer(s) and training attendees is greatly appreciated and serves several purposes:

- Your responses may be used to help us continue to improve upon the content when future training revisions occur.

- The feedback will allow our trainers to continue to improve upon their delivery of the material.

- Program leadership can identify gaps in knowledge or areas covered that could use additional discussion and determine what supplemental training may be useful for the program.

Please allow adequate time for training attendees to complete the training feedback form. The feedback can be obtained by either completing the paper form found at the end of the *CCP RSP Midprogram Training Participant Workbook* or by providing participants with an online survey link if one has been provided by SAMHSA DTAC.

Crisis Counseling Assistance and Training Program (CCP)

Training Feedback for Trainers and Leadership

CCP Name/Disaster Number: ⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯⎯

1. The content of this training module included all of the elements necessary for participants to adequately understand and deliver CCP services.

   STRONGLY DISAGREE   1   2   3   4   5   STRONGLY AGREE

2. The supporting materials, including slides, handouts, and instructor's notes, facilitated effective delivery of module content.

   STRONGLY DISAGREE   1   2   3   4   5   STRONGLY AGREE

3. The content of the training module was thorough and well organized.

   STRONGLY DISAGREE   1   2   3   4   5   STRONGLY AGREE

4. The material was adequately covered in the time allowed.

   STRONGLY DISAGREE   1   2   3   4   5   STRONGLY AGREE

5. The exercises and Trainer's Tips booklet contained activities that effectively facilitated learning.

   STRONGLY DISAGREE   1   2   3   4   5   STRONGLY AGREE

6. The overall training session was well received by the participants.

   STRONGLY DISAGREE   1   2   3   4   5   STRONGLY AGREE

7. What elements of this training session were most effective in facilitating learning?

8. What, if anything, would you change to improve the content or organization of the training materials?

Please return this form and all the participant evaluations to the state CCP director. Remember to ask the state CCP director to send copies of all forms to the Substance Abuse and Mental Health Services Administration (SAMHSA) Disaster Technical Assistance Center (DTAC) at dtac@samhsa.hhs.gov.