



PTSD Awareness Video Facilitator's Guide

For Staff in Healthcare Settings



www.ptsd.va.gov

2015

Table of Contents

Letter from the National Center for PTSD	1
About the Video.....	2
How to Use the Facilitator's Guide	4
<i>PTSD Awareness</i> Knowledge Check.....	6
Answers to Pre-/Post Knowledge Check	8
Reflection and Comprehension.....	10
Personalization: How you can make change within your workplace?	11
Additional Resources	12
<i>What is PTSD?</i> Fact Sheet.....	13

Letter from the National Center for PTSD

The National Center for Posttraumatic Stress Disorder works to advance the clinical care and social welfare of America's Veterans and others who have experienced trauma or who suffer from posttraumatic stress disorder (PTSD). As part of that mission, we created *PTSD Awareness*, a 15-minute video for employees in health care settings. The video is designed to help staff better understand, recognize, and respond in a sensitive way to behaviors related to PTSD. Managers and educators can use the video along with this Facilitator's Guide to lead training sessions with employees.

People with PTSD or a trauma history may act in challenging ways in certain situations. For example, they may startle easily, become anxious in a crowded waiting room, or seem numb or disengaged. Staff in a health care setting may misread these behaviors and react poorly, or simply not understand them.

By watching *PTSD Awareness* and discussing it afterward, staff will gain knowledge and skills that they can use when they are interacting with patients who may have PTSD. This guide was developed for trainers and others who will lead these discussions. Within the guide, you will find a description of the video and its major themes, optional discussion starters and guided activities, and handouts for staff to take with them after the screening.

We hope you find the video and guide useful, and we welcome your comments about your experience using them. Please e-mail us at nctpsd@va.gov.

Paula Schnurr, PhD
Executive Director
National Center for PTSD

About the Video

PTSD Awareness follows the experiences of three patients who are seeking care at a medical center and two staff members who work there. The patients are at the facility at the same time, but the video presents each of their stories separately. This gives the audience various perspectives to consider as the patients interact with staff, other patients, and one another. Through their actions and in interviews, the characters experience or discuss common PTSD symptoms, such as anger, discomfort in crowds, and traumatic reminders. The staff depicted in the video model and discuss the strategies they use when interacting with patients who may have PTSD. A narrator opens and concludes the video. At the end, the narrator reviews the symptoms of PTSD and how service providers can respond to each of the symptoms with awareness and sensitivity.

PTSD Awareness is available at the National Center for PTSD website: www.ptsd.va.gov

Character list (in order of appearance):

- Ms. Sondra King, patient
- Isaac, front desk clerk at the health care facility
- Mr. Don Mackey, patient
- Anna, front desk clerk at the health care facility
- Mr. Emilio Vasquez, patient

Key Messages in the Video

- Exposure to trauma can happen in many ways, including combat exposure, sexual or physical abuse, serious accidents, natural disasters, and terrorist attacks.
- Of those who experience trauma, most do not develop PTSD.
- Those who do develop PTSD may have symptoms that become more apparent under stress or in clinical settings like a hospital or doctor's office. If you work in these settings, it is important for you to know these symptoms.
- Symptoms of PTSD can include the following:
 - » Anger and irritability
 - » Discomfort in crowds
 - » Trust issues
 - » Startle response
 - » Numbing and avoidance
 - » Traumatic reminders
 - » Sleep problems
 - » Trouble concentrating
- All patients with PTSD and their families should be treated with courtesy and respect, even when behaviors are challenging.

- Providers and staff can use specific strategies to help patients with PTSD and their families. Being aware of PTSD symptoms is an important first step.
- Having a clear understanding of the challenges that people with PTSD and their families experience will better position providers and staff to help individuals with PTSD navigate the health care system.

EXAMPLES OF SPECIFIC STRATEGIES TO HELP PATIENTS WITH SYMPTOMS OF PTSD:

- » **Anger/irritability:** Try to de-escalate, be calm, listen.
- » **Discomfort in crowds:** Understand that patients may want to be near an exit, have a clear view of the entire waiting room, or wait somewhere else for their appointment.
- » **Trust:** Understand that patients may insist on only seeing their regular provider.
- » **Startle:** Avoid loud sounds or approaching a patient from behind.
- » **Numbing/avoidance:** Don't use touch or an overly cheerful attitude to try to coax someone out of his or her shell. Just be open and appropriate.
- » **Traumatic reminders:** Notice irritability, and understand that there may be a trauma reminder in the environment. Be calm, and try not to take behaviors personally.
- » **Sleep problems:** Understand that patients might be tired or irritable because of sleep difficulties.
- » **Trouble concentrating:** If a patient is having trouble remembering information, try repeating the information or writing it down.

How to Use the Facilitator's Guide

You can use *PTSD Awareness* and this guide to lead rich discussions with staff about the film's themes. Through watching the video, sharing examples of good practices, and reflecting on their own experiences, staff will be able to recognize the symptoms of PTSD. They will also learn strategies to support patients with PTSD and their families in stressful situations.

As a facilitator, you should:

- **Know that your role is not to lecture, but to encourage participation** and keep the discussion focused and flowing. Be prepared to accept reactions without judgment. When screening the video, allow participants to watch purposefully and critically. During discussion, ask them to reflect upon what they've seen, what new information they've learned, and how that information affirms or conflicts with their prior ideas and experiences. Then bring their attention back to their own situations and how they might tackle this issue within their own workplaces.
- **Keep the discussion from wandering** by referring back to scenes in the video. Allow participants to talk about their own experiences with individuals who may have had PTSD, but keep the conversation focused on how they handled those situations. Ask about best practices they or their colleagues have used and avoid a focus on "horror stories" of encounters that went wrong. Finally, gently guide participants to consider how their personal experiences or concerns reflect larger systems, structures, and policies.
- **Choose a range of questions and activities to engage your audience.** On the next page, you'll find a selection of discussion prompts. Choose the prompts that best fit your session goals, time frame, and audience. Options to frame the viewing and discussion include (1) before and after questions, (2) reflection and comprehension discussion starters, (3) questions focused on finding opportunities for action, or (4) a combination of all three.

Discussion Prompts

Choose the prompts and activities that best fit your session goals, time frame, and audience.

Before and After Discussion Starter

Activity Time: 10–15 minutes before the video, 20–30 minutes after. Total time, including screening the video, 50–60 minutes.

Purpose: To help people become more aware of their preconceptions and beliefs about PTSD

Have participants take the following knowledge check before watching the video. After the screening, use the knowledge check to guide the discussion toward the correct answers. For the final question, ask members of the audience to share their feelings and write their responses on a whiteboard or flip chart.

PTSD Awareness Knowledge Check

Complete the following questions.

1) Exposure to trauma can happen in many different ways. List up to five examples of traumatic events.

1. _____

2. _____

3. _____

4. _____

5. _____

2) Of those who experience trauma, most do not develop PTSD.

A. True

B. False

3) When might PTSD symptoms become more apparent?

A. Under stress

B. In clinical settings, such as a hospital or doctor's office

C. When trauma reminders are present

D. All of the above

4) List some of the symptoms of PTSD

1. _____

2. _____

3. _____

4. _____

5. _____

PTSD Awareness Knowledge Check

Complete the following questions.

5) List some strategies that providers and staff can use to help patients with PTSD and their families.

1. _____

2. _____

3. _____

4. _____

5. _____

6) How does my role in this organization affect someone living with PTSD?

Answers to Pre-/Post Knowledge Check

1) Traumatic events can include:

- » Combat exposure
- » Sexual or physical abuse
- » Serious accidents
- » Natural disasters
- » Terrorist attacks

Note: There are other potentially traumatic events not mentioned in the video. Keep in mind that only events that involve actual or threatened death, sexual violence, or serious injury can cause PTSD. Events that don't have these elements—even if they are very upsetting—cannot cause PTSD. For example, divorce, bankruptcy, losing a job, or learning about a spouse's affair are not causes of PTSD.

2) Of those who experience trauma, most do not develop PTSD.

- » True

3) When might PTSD symptoms become more apparent?

- » All of the above. Any of these situations—feeling under stress, being in a clinical setting, or experiencing trauma reminders—can make symptoms of PTSD more apparent.

4) Symptoms of PTSD can include:

- » Anger and irritability
- » Discomfort in crowds
- » Trust issues
- » Startle response
- » Numbing and avoidance
- » Traumatic reminders
- » Sleep problems
- » Trouble concentrating

Answers to Pre-/Post Knowledge Check

- 5) Strategies that providers and staff can use to help patients with PTSD and their families include being aware of the symptoms and how to respond appropriately. Examples:
- » Anger/irritability: Try to de-escalate, be calm, listen.
 - » Discomfort in crowds: Understand that patients may want to be near an exit, have a clear view of the entire waiting room, or wait somewhere else for their appointment.
 - » Trust: Understand that patients may insist on only seeing their regular provider.
 - » Startle: Avoid loud sounds or approaching a patient from behind.
 - » Numbing/avoidance: Don't use touch or an overly cheerful attitude to try to coax someone out of his or her shell. Just be open and appropriate.
 - » Traumatic reminders: Notice irritability, and understand that there may be a trauma reminder in the environment. Be calm, and try not to take behaviors personally.
 - » Sleep problems: Understand that patients might be tired or irritable because of sleep difficulties.
 - » Trouble concentrating: If a patient is having trouble remembering information, try repeating the information or writing it down.
- 6) Open answer, ask audience to share: How does my role in this organization affect someone living with PTSD?

Reflection and Comprehension

Activity time: Including screening the video, 60–90 minutes

Purpose: Foster discussion and deepen understanding of key ideas and concepts from the video, including PTSD symptoms and how staff can respond to them. This is a broader, more open dialogue that allows the audience to give personal reflections and share their own experiences if they choose.

Before the screening: Introduce the video and explain the purpose of the session

After the screening: Guided discussion questions

- 1) Starting the discussion with a specific scene in the video can help to focus the group quickly. Specific scene recall/reflection:
 - A. In the first scene, Sondra King (the African American woman whom we first see on her bike) arrives for her appointment. What were her concerns about being there? What did you notice about her communication with Isaac at the front desk? What did Isaac do that was helpful to Sondra? Not helpful?
 - B. How did you feel about the way Isaac reacted to Don Mackie being close to Sondra at check in? What did Isaac do that helped or hurt the situation when Mr. Mackie was getting angry about his appointment mix-up? What did Anna do to de-escalate the situation?
 - C. Think about the behavior Mr. Vasquez displayed in the scene where he is leaning against the wall. Would you have noticed his behavior as out of the ordinary? How would you have responded if you found a patient to be disengaged or disoriented? What did you notice about how Anna spoke to Mr. Vasquez that might have helped or hurt the situation?
- 2) Did the patients' actions or perspectives in the video align with what you have seen, read, or heard about PTSD?
- 3) In what ways did the film challenge ideas you held about PTSD? Did anything stand out as surprising in the film?
- 4) What are some best practices that you've used or witnessed among colleagues when interacting with patients who are exhibiting PTSD symptoms? [Consider writing some of the responses on a whiteboard or flip chart.]
- 5) What questions or issues surfaced during our discussion today or as a result of viewing this video that you would like to know more about?

Personalization: How you can make change within your workplace?

Activity time: Including screening the video, 75–90 minutes

Purpose: Help shift the attention away from the screen and onto opportunities for action

Before the screening: Introduce the video and explain the intentions for session

After the screening: Guided discussion questions

- 1) Take a moment to reflect on what you saw in the video.
- 2) Have you experienced interactions like the ones you saw in the video? What did you do that helped or hurt in those situations?
- 3) Specific scene recall/reflect:
 - A. In the first scene, Sondra King (the African American woman whom we first see on her bike) arrives for her appointment. What did you notice about her communication with Isaac at the front desk? What did Isaac do that was helpful to Sondra? Not helpful?
 - B. What did Isaac do that helped or hurt the situation when Mr. Mackie was getting angry about his appointment mix-up? What did Anna do to de-escalate the situation?
 - C. How would you have responded if you found a patient like Mr. Vasquez to be disengaged or disoriented? What did you notice about how Anna spoke to Mr. Vasquez that might have helped or hurt the situation?
- 4) Can you think of changes that could be made within your organization around PTSD awareness? Who can help to make changes where they are needed?
- 5) What initiatives are already underway that can improve the experiences of PTSD clients at your organization?

Additional Resources

The following list of resources can be e-mailed to participants after a session or printed as a handout:

- National Center for PTSD: Dedicated to research and education on trauma and PTSD. We work to assure that the latest research findings help those exposed to trauma. <http://www.ptsd.va.gov>
- AboutFace: Learn from Veterans how PTSD treatment has turned their lives around. <http://www.ptsd.va.gov/apps/AboutFace/>
- PTSD Overview: Take this multimedia course for a comprehensive look at PTSD and its treatment. http://www.ptsd.va.gov/professional/continuing_ed/ptsd_overview.asp
- Whiteboard videos: Watch these short animated videos to learn about PTSD and effective treatments. <http://www.ptsd.va.gov/public/materials/videos/whiteboards.asp>
- PTSD Consultation Program: Any provider treating Veterans can ask a question or request a consultation about anything related to PTSD. <http://www.ptsd.va.gov/professional/consult/index.asp>

Resources Especially for Primary Care Clinicians

Given the prevalence of exposure to trauma among both Veteran and civilian populations, consider taking the following steps with your primary care patients:

- Ask about prior trauma in Veterans and civilians alike.
- Ask about Veteran status, and take a military history from patients who self-identify as Veterans. Learn more about screening for military service from the Community Provider Toolkit. http://www.mentalhealth.va.gov/communityproviders/screening_howto.asp - sthash.dVLY6ZCz.dpbs
- Screen for PTSD symptoms using the Primary Care PTSD Screen. <http://www.ptsd.va.gov/professional/assessment/screens/pc-ptsd.asp>

What is PTSD? Fact Sheet

Most people have some stress-related symptoms after a trauma. If those symptoms don't fade after a month, it might be posttraumatic stress disorder (PTSD).

TREATMENT CAN HELP : <http://www.ptsd.va.gov>

Common Symptoms

- **Reliving the event:** Memories of the trauma can come back at any time and can be triggered by reminders of what happened. You may have bad dreams, or feel like you are going through the trauma again.
- **Avoiding situations that remind you of the event:** You may try to avoid places, people or things that bring back memories of the event.
- **Negative changes in beliefs and feelings:** The way you think about yourself and others changes because of the trauma. You may have trouble experiencing your emotions, think no one can be trusted, or feel guilt or shame.
- **Feeling keyed up:** You may be on the lookout for danger. You might become angry very easily.

Other problems following trauma

If you have PTSD you may also feel guilt, shame, or depression. Problems with coworkers, friends, and loved ones are common. Many people with PTSD abuse alcohol or drugs. Often, PTSD treatment can help these problems, too. The coping skills you learn to deal with PTSD work in other areas of your life.

Screening

Only a mental health or medical professional can tell you if you have PTSD. If you went through a trauma and answer “yes” to at least three of the questions below, you should have a PTSD evaluation.

In your life, have you ever had any experience that was so frightening, horrible, or upsetting that, in the past month, you:

- Have had nightmares about the experience or thought about it when you did not want to?
- Tried hard not to think about the experience or avoided situations that reminded you of it?
- Were constantly on guard, watchful, or easily startled?
- Felt numb or detached from others, activities, or your surroundings?

Treatment

Treatments for PTSD include psychotherapy (counseling) and medication. Sometimes, the two are used together. Cognitive behavioral therapy (CBT) is the best treatment for PTSD. There are different types of CBT, including Cognitive Processing Therapy and Prolonged Exposure.

Psychotherapy/Counseling

Cognitive Processing Therapy (CPT) CPT teaches you how to identify trauma-related thoughts and change them so they are more accurate and cause less distress.

Prolonged Exposure Therapy (PE) In PE, you talk about your trauma over and over until the memories no longer upset you. You also go to places that are safe, but that you have been staying away from because they are related to the trauma.

Stress Inoculation Training (SIT) SIT teaches patients a set of skills they can use to manage their anxiety. These skills might include relaxation, thought stopping, and positive self-talk.

Eye Movement Desensitization and Reprocessing (EMDR) EMDR involves thinking about images and feelings that distress you while doing rapid eye movements..

Medications*

Selective Serotonin Reuptake Inhibitors raise the level of serotonin in your brain. This can make you feel better. The two SSRIs that are approved by the FDA for PTSD are sertraline (Zoloft™) and paroxetine (Paxil™).

**Some doctors prescribe benzodiazepines (or “benzos”) for people with PTSD. They are often given to people who have anxiety. While they may be of some help at first, these drugs do not treat the core PTSD symptoms. They may lead to addiction and are not recommended for long-term PTSD treatment.*

Are you in crisis? Call 911

Call 911 or 1-800-273-TALK (8255)
www.suicidepreventionlifeline.org

Find PTSD treatment

www.ptsd.va.gov/public/where-to-get-help.asp

The Sidran Institute | (410) 825-8888

Mental Health Service Locator (SAMHSA) | (800) 662-4357

Veteran Help

Each VA Medical Center and many VA clinics treat PTSD
(877) 222-8387 or www.va.gov

www.ptsd.va.gov