

# Integrating Behavioral Health Technicians into the Full Spectrum of Military Mental Health Care: Supporting Warfighter Readiness through Provider Extender Optimization

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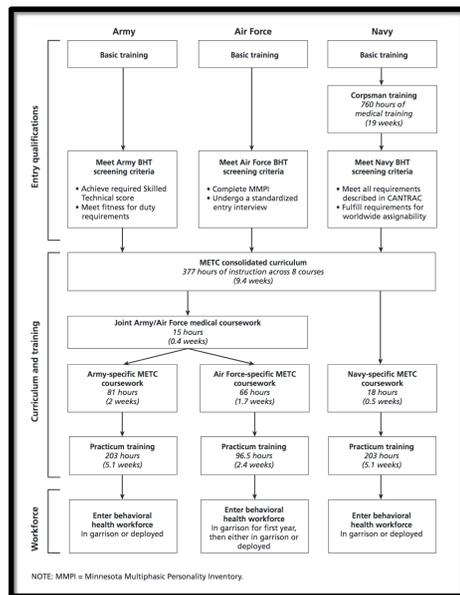
## Behavioral Health Technician (BHT) Introduction

- BHTs are enlisted Service members, civil service, and contract employees trained to conduct a multitude of tasks to support the military behavioral health mission in both garrison and combat operations worldwide.
- BHTs complete technical training to serve as care extenders to licensed mental health providers

## The Need for Optimizing BHTs in DoD

- BHTs can help meet demand for increasing behavioral health services, including screenings and evaluations
- BHTs extend behavioral health services in operational and deployed settings where other forms of access to these services are not available
- Essential to optimally utilize available BHTs

## BHT Selection, Training, and Competency



### Common methods of instruction:

- Didactic classroom instruction – lecture, demonstration, & online materials
- Supervised practical exercises – simulations & laboratory practice
- Experiential training – Directed Clinical Practicum in local clinical environments

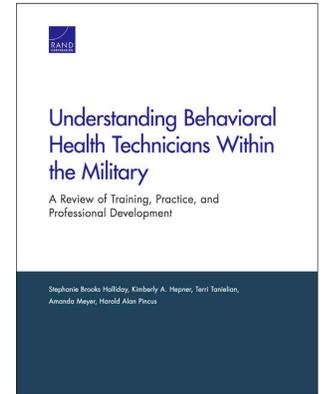
### Joint Service didactic training focus:

- Human Growth and Development
- Psychopathology
- Psychiatric Behavioral Interventions
- Interviewing Skills
- Psychological Testing
- Counseling
- Combat Operational Stress Control (COSC)

## BHT Scope of Practice

Screening and Assessment	Counseling and Psychosocial Interventions	Screening and Assessment	Counseling and Psychosocial Interventions
<ul style="list-style-type: none"> <li>Conduct intakes and biopsychosocial assessments</li> <li>Triage patients</li> <li>Assist with safety assessments</li> <li>Administer and score psychometric testing</li> <li>Performs medical tasks and special clinical procedures</li> <li>Inpatient support activities</li> </ul>	<ul style="list-style-type: none"> <li>Conducts or assists in treatment of patients</li> <li>Conducts or assists in facilitating group and individual counseling</li> <li>Implement brief, solution-focused interventions</li> <li>Lead psychoeducational groups</li> </ul>	<ul style="list-style-type: none"> <li>Conduct intakes and biopsychosocial assessments</li> <li>Triage patients</li> <li>Assist with safety assessments</li> <li>Administer and score psychometric testing</li> <li>Performs medical tasks and special clinical procedures</li> <li>Inpatient support activities</li> </ul>	<ul style="list-style-type: none"> <li>Conducts or assists in treatment of patients</li> <li>Conducts or assists in facilitating group and individual counseling</li> <li>Implement brief, solution-focused interventions</li> <li>Lead psychoeducational groups</li> </ul>

## BHT Utilization Research 2018 RAND Study



## Key Findings

- BHTs are trained as and expect to function as provider extenders in duties consistent with intended roles
- BHT clinical skills and readiness may atrophy without use
- Using BHTs for purely administrative work = inefficient use of resources
- Risk of degradation or loss of BHT clinical skills and resources in long term
- Retention of BHT identifiers on EHR encounters will facilitate future research
- Efforts underway to examine BHT utilization and efficiency

## Recommendations

- Train healthcare personnel on BHT roles and capabilities- when properly utilized, BHT skills and competencies continue to grow
- Use best practices common to civilian medical settings
- Focus BHT work
  - core evidenced based practices, skills for deployment/other settings
  - population and mission needs
  - common psych trends
- Formal guidance for BHT OJT and provider supervision
- Supervision and training on BHT self-care and managing dual roles/relationships
- Optimal BHT use may be most successful through provider-BHT Paired Team Model
  - BHT paired with supervising provider with closely aligned work, training and supervision
  - Facilitates learning, trust, and confidence

## Utilize BHTs as Provider Extenders

- Conduct initial, safety, and other screenings
- Triage patients
- Group and individual therapy
- Screening for groups
  - Group preparation and co-facilitation
  - Leading psychoeducational groups
  - Administering and tracking outcome measures
  - With approved certifications (e.g., CADC), BHTs can function as independent counselors with provider oversight.
- Assist with documentation (e.g., draft provider notes)

## Supervision of BHTs as Provider Extenders

### Supervision of clinical work

- DoD BHTs are unlicensed and operate under credentialed provider's license for clinical duties
- Format of BHT supervision varies across clinical settings
- Notes must be signed by credentialed provider
- Suicidal and homicidal ideation/behaviors must be assessed by the provider

### High quality supervision should include:

- Regularly observing full scope of BHT's clinical work
- Evaluating work quality and providing feedback
- Facilitating BHT self-assessment of clinical work
- Ensuring BHT acquisition of knowledge and skills by instruction, modeling, and mutual problem-solving

