DoD Opioid Overdose Education and Naloxone Distribution (OEND) Program:
Train-the-Trainer Model
XX Month 20XX

"Medically Ready Force...Ready Medical Force"
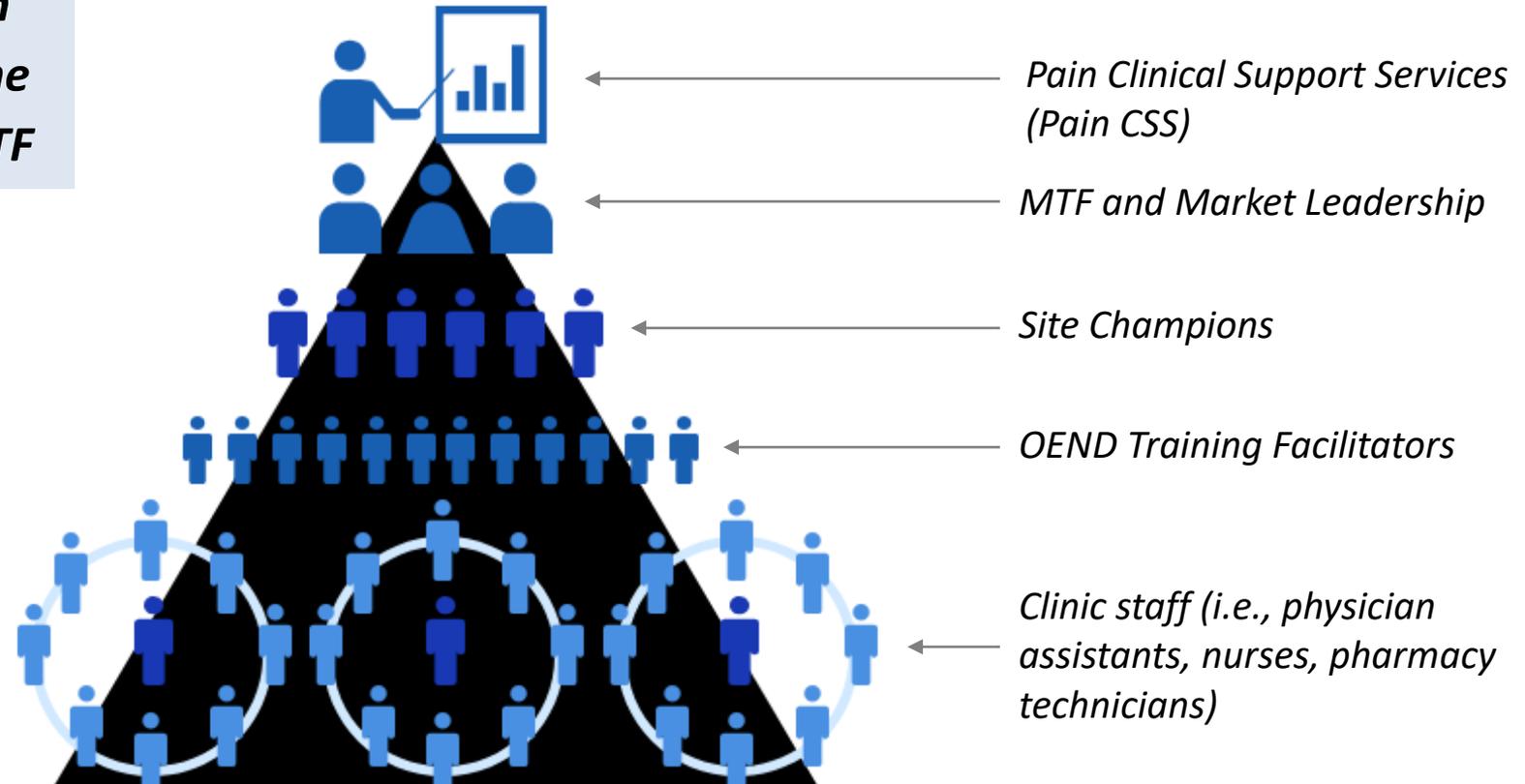
Why Train-the-Trainer?

- Based on 2012 study on the effectiveness of various Train-the-Trainer (TTT) programs:
  - Interactive methods are better than didactic
    - Increase knowledge
    - Improve clinical behavior
    - Produce better patient outcomes
  - TTT group and training manual is more effective than self-study
  - Employing multiple training approaches improves results

TTT Model Details

DHA Defense Health Agency

A site champion plays a pivotal role in ensuring program success, acting as the catalyst to behavior change at their MTF

At each level of training, trainers are able to tailor materials based on their understanding of their program participants.

Pain Clinical Support Services (Pain CSS)

MTF and Market Leadership

Site Champions

OEND Training Facilitators

Clinic staff (i.e., physician assistants, nurses, pharmacy technicians)

Impact of TTT
A Case Study

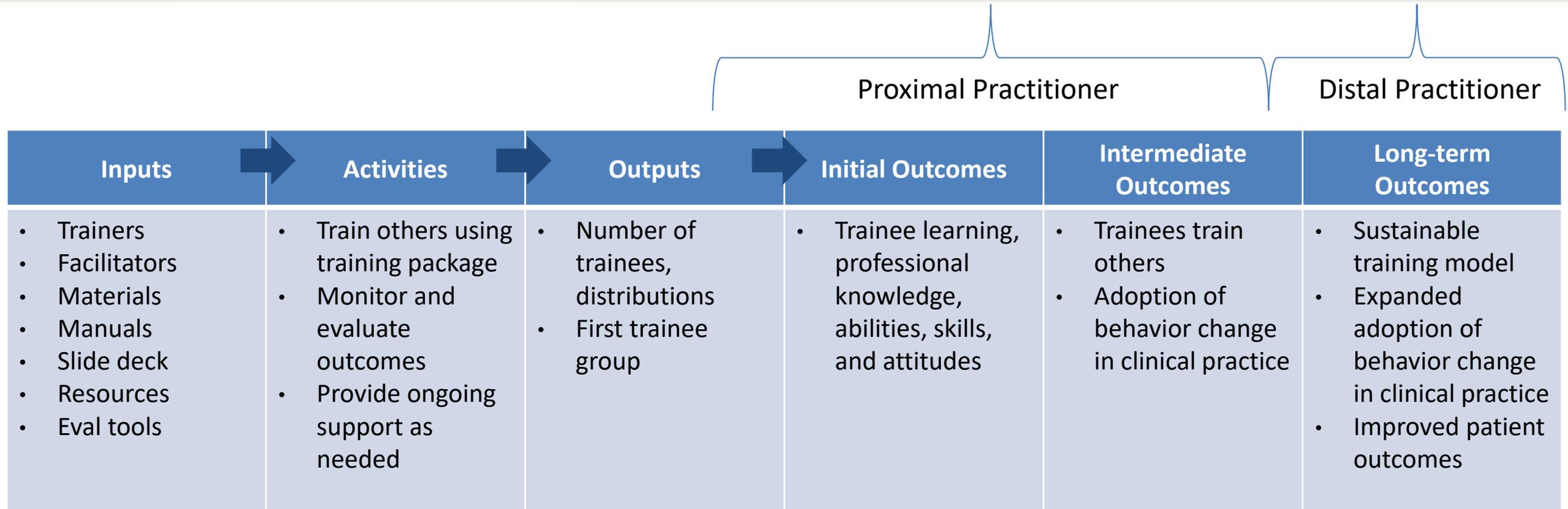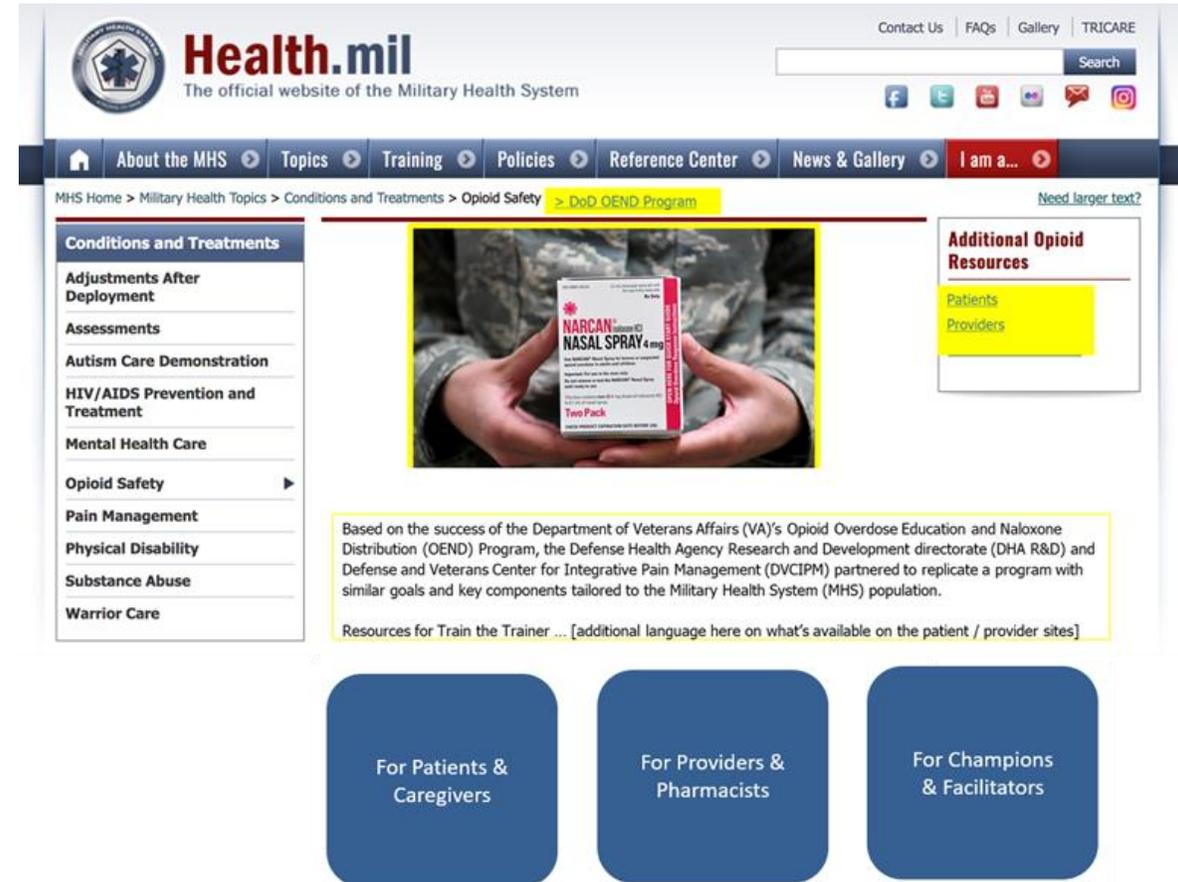| "Effectiveness of Train-the-Trainer HIV Education: A Model From Vietnam" |
|---|
| **Background** — The purpose of this project was to develop and sustain a national network of nurse-trainers who could provide ongoing HIV continuing education and training experiences to Vietnamese nurses. |
| **Outcome** — Recipients of the TTT workshops demonstrated:
• Increased HIV knowledge
• Increased willingness to provide nursing care for HIV-infected patients |
| **Conclusion** — The 87 nurses that were originally trained to be HIV trainers were able to train more than **67,000 health-care workers**, demonstrating the far-reaching impact of the TTT model. |

TTT Logic Model with Program Components

			Proximal Practitioner		Distal Practitioner
Inputs	**Activities**	**Outputs**	**Initial Outcomes**	**Intermediate Outcomes**	**Long-term Outcomes**
• Trainers • Facilitators • Materials • Manuals • Slide deck • Resources • Eval tools	• Train others using training package • Monitor and evaluate outcomes • Provide ongoing support as needed	• Number of trainees, distributions • First trainee group	• Trainee learning, professional knowledge, abilities, skills, and attitudes	• Trainees train others • Adoption of behavior change in clinical practice	• Sustainable training model • Expanded adoption of behavior change in clinical practice • Improved patient outcomes

Trainers gain feedback on use of information/value from stakeholder and adjust accordingly

Online Resources

■The OEND webpage will act as your one-stop shop for resources. The page provides resources for patients, prescribers, and champions, such as:

❑TTT Handbook

❑Patient Education Resources

❑Training Activities

❑CarePoint Instructions

❑Quick Reference Guide

health.mil/opioidsafety

TTT Program Components

The TTT Handbook will be distributed to champions to facilitate the program. Components include:

■ An overview of the OEND program mission and TTT model

■ Background on the training approach (i.e. facilitation techniques, evaluation methods)

■ Tailorable OEND program content (including a training deck, activity worksheets, CarePoint instructions, quick reference guide, and other resources)
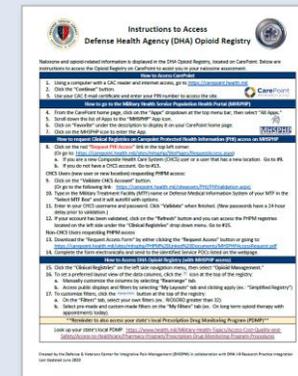
Examples:

Patient Education Brochure
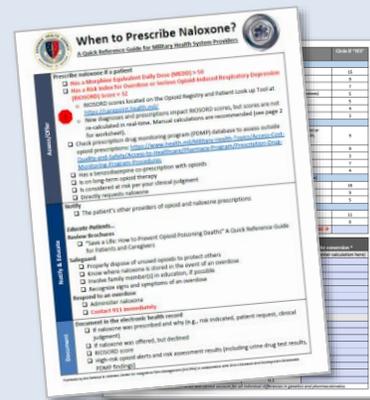
Naloxone Quick Reference Guide

CarePoint Instructions

TTT Handbook Outline

The TTT Handbook is organized into these 5 sections. These steps will help you implement the program at your MTF.

All resources for the OEND program will also be available online:

health.mil/opioidsafety

Get leadership involved

Understand your audience and identify clinics

Initiate participant communication and plan training

Disseminate and implement your training

Evaluate the success of your training and maintain feedback loop

Champion Reporting Responsibilities

■Program champions provide monthly updates via an online survey (<5 minutes)

❑Please register and complete surveys here: https://rc-dvcipm.hjf.org/surveys/?s=DX9XHNCY38

❑Once you register, a follow-up survey will be sent to you automatically each month

❑ Responses will be combined with naloxone prescribing data and shared with the Pain CSS and Market leaders on a monthly basis.

■Champions may also be asked to discuss their OEND experiences during Pain CSS teleconferences (~ 15-20 minutes). This can include, but is not limited to:

❑Challenges and accomplishments

❑Lessons learned and program adaptations

Key Training Components

Facilitation strategies and adult learning theory

OEND content

Activity selection and facilitation planning

Facilitation practice

Feedback, action planning and debrief

Key Takeaways

- The mission of the OEND program is to:
  - ❑ **Increase provider knowledge and skill** in opioid risk assessments and safety education
  - ❑ **Increase patient awareness and co-prescriptions of naloxone**
- The Train-the-Trainer model is intended to ensure sustainability of the program by identifying champions who will go on to be force multipliers in their area of influence.
  - ❑ **Champions** will conduct training with identified clinic trainers and act as the point of contact for the program
  - ❑ **Trainers** will conduct OEND training at local clinics; follow up with staff to ensure compliance and provide guidance on challenges

For more information, visit health.mil/opioidsafety

"Medically Ready Force...Ready Medical Force"

Back-up

Effective Strategies for Adult Learning
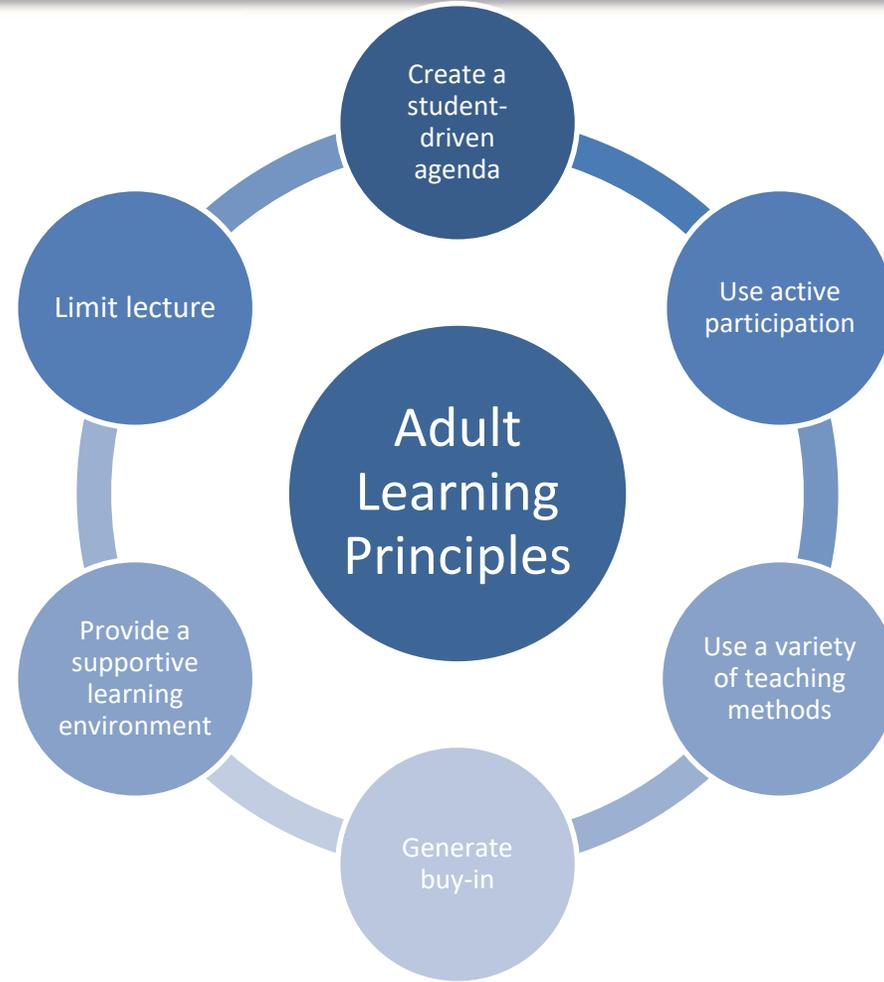
Effective Strategies for Presentation

Development
To develop a TTT session, you need to assess your pool of potential instructors. Design and develop presentations and guides that help the instructors to teach the material, conduct a session, and evaluate the participants' readiness to teach the material. For example, create an online survey to assess a new instructor's familiarity with the topics. Additionally, define all the materials required for the new instructor to teach the course, such as software, hardware and office supplies.
Adult learning a presentation strategies:
Recently I've facilitated several sessions on more effective ways to use PowerPoint in a training setting. The simple truth is that your PowerPoint slides, like any other element of your presentation design, should align with the fundamental principles of adult learning theory. Adult learners like to have some sort of control over what they're being asked to learn. So how can PowerPoint possibly support this principle? Believe it or not, slides don't actually need to go in order from start to finish. If you have content that doesn't need to build on previous points (or if you find your audience already possesses a deep understanding of the more fundamental parts of your content), you may wish to make your slide deck more dynamic and leave it to your participants to choose which parts of your content they feel would help them the most.
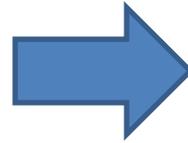
Effective Presentation Strategies
- ✓ Limit text on slides
- ✓ Use a consistent theme
- ✓ Put the bulk of information in the notes section
- ✓ Use slides to prompt participation
- ✓ Use visuals as needed