



U.S. ARMY

INSTRUCTOR GUIDE



DIRECTORATE OF PREVENTION,
RESILIENCE AND READINESS



Ask, Care, Escort *Suicide Prevention Training* *Practicing ACE Module* *for DA Civilians*

ACE Base +1

September 2023

VERSION 1.3

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Introduction

The Army Suicide Prevention Program was instituted by CSA General John A. Wickham in 1984. Since that time, suicide prevention and awareness has evolved. In 2009, Ask, Care, Escort (ACE) training was introduced to update existing suicide prevention training and to respond to a rise in suicide rates.

ACE training introduced suicide prevention and intervention concepts that had proven successful outside of the Army. Its primary goals were to increase suicide awareness and improve the ability of Soldiers to identify team members who may be suicidal and get them to help.

In 2018, ACE training was updated to highlight its use not only during a crisis, but also before one occurs by incorporating Army team building and unit cohesion concepts. This training is aligned with the Center for Disease Control and Prevention's strategic comprehensive public health approach to suicide prevention.

In 2022, the ACE suicide prevention and intervention material was updated yet again and coined ACE Base + 1. The training now consists of a base module along with a menu of "+1" modules that the unit's command team can choose from based upon the unit's needs. Together, the base module and the +1 module make up the mandatory one hour of annual suicide prevention and intervention training.

In addition to the tailored training approach, the training is now designed to be more interactive and conversational. In contrast to a traditional "annual briefing," ACE Base +1 is an "annual conversation" at platoon level where Soldiers in the platoon are able to discuss how they can take care of one another on a human level as it pertains to suicide prevention and intervention.

In 2023, the Army's suicide prevention and intervention training expanded to include a tailored curriculum for the Soldier's Circle of Support members and for DA Civilians. DA Civilians interact with a variety of populations including Soldiers, Soldiers' Circle of Support members, fellow DA Civilians, and their own personal Circle of Support. The Circle of Support includes anyone that the DA Civilian considers to be a priority within their support system, such as a spouse, significant other, parent, sibling, other family member, mentor, and friend. The intent is that offering DA Civilians the same knowledge and skills while using the same language and strategies can enable conversation between DA Civilians, Circle of Support, and Soldiers regarding suicide prevention and intervention. What's more, it can promote effective communication, bolster protective factors like increased cohesion and connection, and increase suicide prevention efforts within the whole Army Family.

Intent

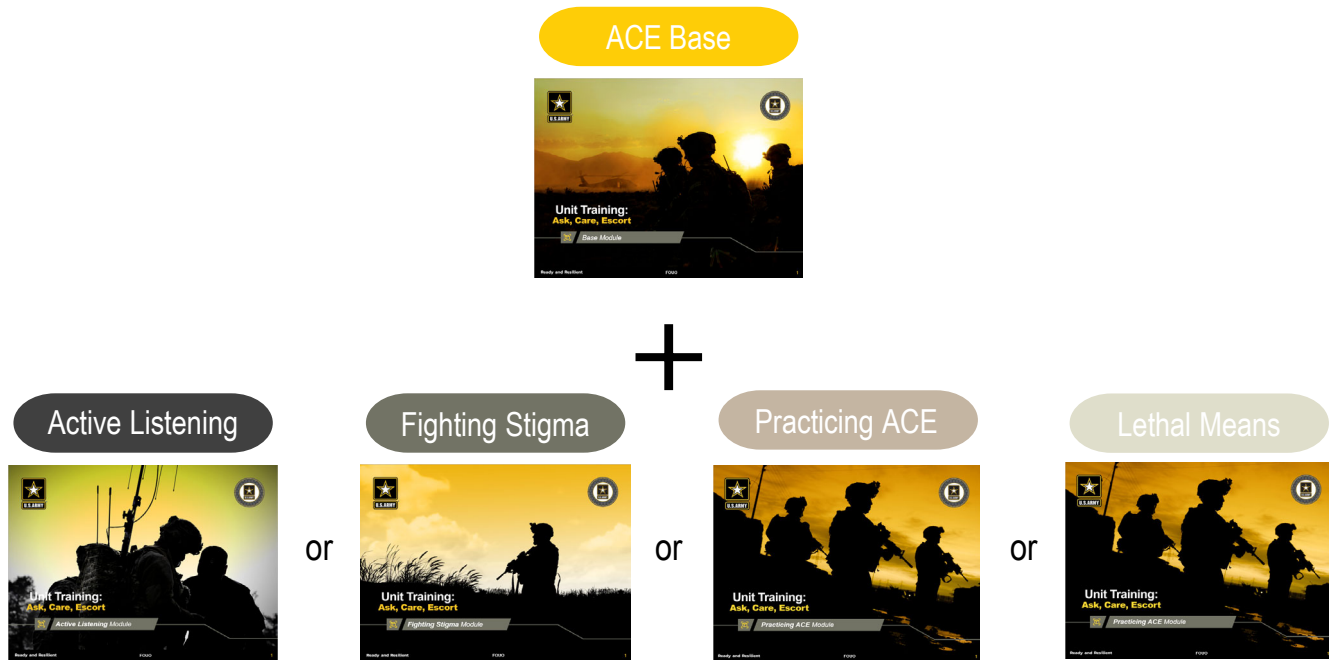
Cohesive efforts: It is strongly recommended that this training be offered around the same time frame that Soldiers receive the ACE Unit Training. According to AR 600-63, ACE suicide prevention and intervention training must be offered to Circle of Support members on an annual basis. The ACE Base for DA Civilians module resembles the content and format of the ACE Base module for Soldiers but has been tailored for DA Civilians.

A majority of the examples, discussions, and activities are focused on how a DA Civilian might apply ACE concepts with Soldiers. The Soldier-focused examples are not to discount the importance of other people (e.g., family members, friends, coworkers) or relationships that participants have with others; instead, it is done intentionally to keep the training focused on the learning concepts. Also, it is the most universally relevant focus given every participant attending is there due to having vested interest in supporting Soldiers and the Army mission.

Facilitated discussion and engagement: This training is designed to be facilitated by a single instructor and delivered in an interactive, discussion-based format (rather than conventional lecture or didactic format). Because this module utilizes group interaction, it is highly recommended that it be led by an instructor who is able and willing to elicit participant engagement through facilitating meaningful discussions and practical exercises. The practical exercises are essential in allowing participants the opportunity to try out the Ask, Care, Escort process strategies in a safe, non-threatening environment and develop competence and confidence to use the strategies in real-life scenarios.

Delivered in-person to small groups: The ACE training for DA Civilians is intended to be delivered in person and it is highly recommended that this training be conducted with small groups (fewer than 40). In-person training allows for optimal engagement and also fosters relationship building amidst the participants. For example, new friendships and support networks may be established among those attending this class. However, there may be circumstances that warrant a virtual training option in order to be realistic and inclusive to all DA Civilians who wish to participate (e.g., DA Civilians being geographically scattered, child-care constraints, work schedules). Trainers and command teams are advised to use their discretion to determine the best mode of delivery without compromising its value.

Training Requirements: The U.S. Army’s requirement for annual suicide prevention training is for Soldiers to complete one hour of training that includes the “ACE Base” module along with one of the “+1” modules, and for DA Civilians to be offered annual training as well.



Note: Each module should be trained to standard and not to time, it is most effective when time is allowed for in-depth group discussion and participation. To maximize the benefits of this training, allow for extra time for dialogue and interaction.

Training Package Components: The complete “ACE Base +1” training package consists of five PowerPoint® presentations (i.e., ACE Base, Active Listening, Fighting the Stigma, Practicing ACE, and Lethal Means) and a SmartGuide with key information to be discussed for each slide (see notes page iv for SmartGuide overview).

Training Precautions: The ACE suicide prevention and awareness training deals with sensitive information and may trigger painful memories or other issues for training participants. It is possible that someone attending the training may have experienced thoughts of suicide or may have experienced a loved one who has struggled with suicidal thoughts, ideation, or worse – died by suicide.

If you are not a chaplain or behavioral health provider, it is recommended that you have someone from the chaplain’s office or Behavioral Health Services on call during your training session. Be sure to coordinate before the training and obtain their name, title, and consent to act as an immediate resource if needed. Provide them with the date, time, and location of the training; on the day of the training, be sure to have the number(s) at which they can be reached or another plan for reaching them.

The mention of any non-federal entity and/or its products is not to be construed or interpreted, in any manner, as federal endorsement of that non-federal entity or its products.

Training Preparation:

Content: ACE Training is the U.S. Army's annual suicide prevention training, which is mandatory for Soldiers (IAW AR 600-63) and to be made available to DA Civilians. The material is based on the most current research and academic literature on suicide prevention and follows educational best practices. The training is designed to enable the instructor to successfully lead participants through suicide prevention concepts with interactive activities and discussions to prompt critical thinking. For the training to be most effective, it is advised that instructors review all content in advance.

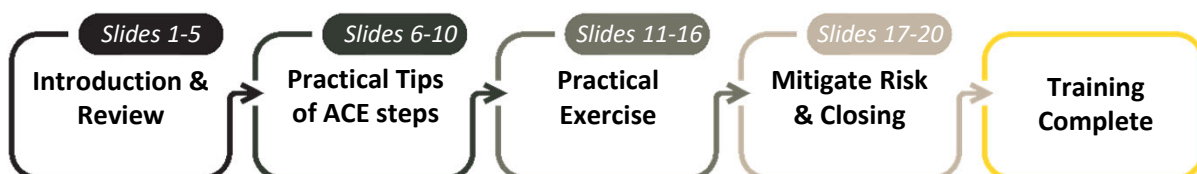
When instructing, follow the content as written. Insert personal stories/examples as appropriate. Prompts are written into the SmartGuide to highlight times when personal stories/examples can be most valuable. There are many benefits of sharing a personal story or example. For instance, stories/examples can help a trainer to capture the audience's attention, gain common ground with the audience, and engage the audience on a deeper level. Most importantly, effective use of personal stories or examples can help participants gain better contextual understanding of the material being taught.

The following guidelines can help ensure effective use of personal stories and examples. The story/example

- serves a clear purpose, specifically it reinforces the training objective/content
- helps participants to gain a better contextual understanding about the concepts
- does not distract participants from the focus of training (e.g., be mindful of using potentially triggering or traumatizing examples/stories)
- is simple, concise, and easy to follow/understand

Remember, sharing your personal stories/examples is to benefit the participant, not yourself. The story/example should highlight the content, not you as a person (e.g., avoid the mistake of making the training about yourself). Lastly, it is highly recommended that you practice your stories/examples before using them in a training session. Rehearsing the story/example can improve effective delivery, especially if the story/example is one that could be emotional for you to share.

Flow and Timing: This training module is comprised of four main sections.



Training Preparation (continued):

Language: Suicide can be an uncomfortable topic to discuss, and it can be difficult to find the words to talk about it. As researchers continue to learn more about suicide and those impacted by it, the language used continues to evolve. For example, the term “committed suicide” perpetuates the idea that suicide is a criminal act, which can be stigmatizing. Instead, consider the phrase “died by suicide” or “attempted suicide”.

Participants may unintentionally use stigmatizing language, as not everyone understands the harmful impact of these words. It is recommended that during the training, participants are allowed to use the words they feel comfortable with to promote open conversation; however, it is recommended that the instructor supports participant usage of destigmatized language and use those words themselves.

Important concepts: When Soldiers and DA Civilians collectively implement the ACE process, use Active Listening and intentionally Fight the Stigma, it creates culture of trust and cohesion. Consequently, a culture of trust and cohesion encourages help-seeking behavior; Soldiers and DA Civilians know that when they need someone, other members of the Army Family (e.g., Soldiers, Circle of Support members, DA Civilians) will have their back. As the trainer, work to present the material as a facilitated discussion so the participants are learning the material but also learning from one another and potentially growing their support network.

ACE Training Facilitation Strategies:

Review the SmartGuide prior to the training session. Take notes on when you may use different facilitation strategies to promote an effective learning experience for participants.

Facilitation Strategies	When/How to Use
<p>Asking Quality Questions - Asking quality questions is important for generating participation and group discussions, which is why scripted questions have been included within the material.</p>	<p>Use closed-ended questions for a check on learning or to get a group consensus. Use open-ended questions when you want to generate discussion. Restate your question when it seems unclear. Poll the audience to get a show of hands, then ask participants to provide examples or explain their rationale. Let participants know, when appropriate, if there is “no right or wrong answer for this question,” which can ease the pressure on the group.</p>
<p>Efficient Instructions - Efficient instructions for exercises are clear and concise directions resulting in participants' understanding of the intent of the exercise, what actions they need to take, and how long they have to complete the work.</p>	<p>Include timings in your instructions to help participants understand how in-depth their discussions should be. Provide time prompts such as, “one minute left,” to keep the group on track during activities. Demonstrate lengthy instructions with another individual.</p>
<p>Conducting Effective Discussions - Discussions can sometimes get off track. It is important to be purposeful when leading a conversation about a particular topic or activity.</p>	<p>Effective discussions are learner-centric; keep the conversation moving forward, and include a summary with key takeaway points. If restricted in your available time, consider having partners/small groups discuss then select a few representatives to share with the larger group.</p>
<p>Handling Challenges Effectively - There can be many challenges that occur when teaching a class. Having strategies for challenges that are likely to arise can help you be more prepared.</p>	<p>Be prepared to handle difficult questions, manage emotionally-charged contributions, and allow the participants time to process what you have just said or asked (be okay with silence). Utilize on-call resources (e.g., chaplain or Behavioral Health) if/when necessary.</p>
<p>Be aware of timing - Pace yourself to ensure there is sufficient time for practical exercises and group discussion.</p>	<p>Leave ample time to review instructions, execute exercises, and hold discussion. If restricted in your available time, consider having volunteers demonstrate an activity for the whole group rather than working in pairs.</p>

Instructor SmartGuide Format:

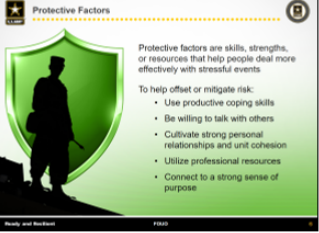
This SmartGuide has been designed to be user-friendly while containing as much information as possible to help you present this suicide prevention training module.

At the beginning of the module is a very short introduction for the trainer that explains the intent of the material.

When notes pages are printed and the booklet is opened, you will see the format below. On Side A is an image of the slide, a statement of slide intent (i.e., the target), and then key points and sample talking points. Key points and sample talking points may continue on to Side B when necessary.

The key points are highlighted in yellow and they briefly describe what must be covered to meet the intent of the slide. These are followed by more details or instructions.






The key points tell you what you need to do, while the bulleted notes explain how to do it.

<p>ACE Unit Training- Base Module</p>  <p>Protective factors are skills, strengths, or resources that help people deal more effectively with stressful events</p> <p>To help offset or mitigate risk:</p> <ul style="list-style-type: none"> • Use productive coping skills • Be willing to talk with others • Cultivate strong personal relationships and unit cohesion • Utilize professional resources • Connect to a strong sense of purpose <p>Describe protective factors and explain the importance of intentionally strengthening them for oneself and others around them.</p> <p>1. Define and describe protective factors.</p> <ul style="list-style-type: none"> • Protective factors are skills, strengths, or resources that help people deal more effectively with stressful events. • Protective factors help offset or mitigate risk. Some examples of protective factors include <ul style="list-style-type: none"> - Using productive coping skills, like problem-solving, deep breathing, or considering another perspective on an issue - Being willing to talk with others about the things going on in your life - Cultivating strong personal relationships and contributing to a strong unit cohesion - Utilizing professional resources when needing help and also when looking to be proactive with personal or professional development, and - Connecting to a sense of purpose, like religious beliefs, your core values, or being in an influential role in another person's life. <p>Record your own notes here:</p> <p>6-A</p>	<p>ACE Unit Training- Base Module</p> <p>2. State that it is important to consistently work to improve or strengthen the protective factors for oneself along with those of fellow Soldiers.</p> <ul style="list-style-type: none"> • Protective factors can be enhanced. Many military trainings such as resilience training and the "plus one" modules of ACE like active listening, aim to bolster protective factors of Army Soldiers. • But it requires personal ownership, too. Just like routine physical training, it is important that you work to strengthen your protective factors and those of your fellow Soldiers on a regular basis. • Take a look at the protective factors on the slide. Consider which one or ones you could benefit from enhancing. <p><i>[NOTE: Pause for a brief moment (e.g., 5 seconds). For the sake of time, this is not meant to be a question with responses, but simply a quick internal reflection.]</i></p> <ul style="list-style-type: none"> • As a Soldier, you are part of a team. Your actions influence the protective factors of your fellow Soldiers. For example, being part of a unit that supports each other helps people feel connected. Healthy, strong connection to others is a core protective factor. <p>3. Transition.</p> <ul style="list-style-type: none"> • Let's look at how you can use the ACE process to bolster protective factors. <p>Record your own notes here:</p> <p>6-B</p>
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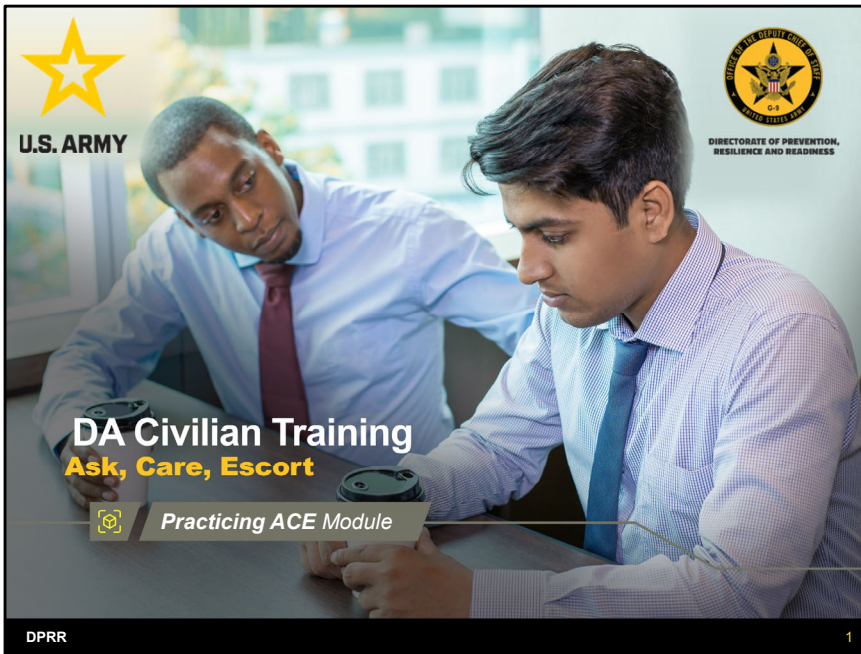
When you start preparing to train the module, you should read all of the detailed information. When you become more familiar with the material, the highlighted key points will be enough to remind you how to train each slide effectively.

SmartGuide Symbols:

The following symbols are used throughout the ACE Base +1 material.

Training Module Symbol Guide		
Symbol	Represents	Explanation
	Timing	This symbol indicates the amount of time allotted for a given section of the material.
	Target / Intent	This symbol indicates the main function or rationale for a given slide.
1.	Key Point	Numbers are used to indicate the main points that must be addressed in order to meet a given slide's target / intent.
•	Sample Talking Point	Bullets are potential talking points that a trainer can choose to use to elaborate on key points or to review as context to the key points.
[NOTE]	Note to Trainer	Bracketed text indicates a note to the trainer which is not intended to be read aloud. These provide hints on how to present the material and tips to avoid potential issues that may arise within a given topic.
	Exercise	This symbol indicates the start of an exercise or activity. To avoid down-time, keep an eye out for these and plan accordingly.
[?]	Discussion Question(s)	This symbol identifies when there is a non-rhetorical discussion question(s) in the instructional content that follows.
	Continue	This symbol indicates that the training material for a given slide continues onto the next page.
	Stop	This symbol indicates that the training material for a given slide ends on this page.

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Record your own notes here:



Introduce the module (and yourself, if necessary) and state the value of active participation.

1. Introduce the module (and yourself, if necessary).

- Welcome to the second part of your annual ACE suicide prevention training, specifically the Practicing ACE module.



2. State that active participation can help enhance skill-building and strengthen connections with others.

- Fully engaging in the training discussions and exercises can help enhance your training in ACE skills and also strengthen connections with fellow participants, which will build protective factors within the Army.


[NOTE: This is a natural transition to the next slide.]




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 **Concrete Experience** 
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OFFICE OF PREVENTION, RESILIENCE AND READINESS

Many service members that have reported having suicidal thoughts or a suicide attempt since joining the military have indicated that they **did not** talk to anyone or seek help.

 What are some potential reasons that could keep a person from implementing the ASK, CARE, ESCORT process?

DPRR 2

 **Discuss challenges that a person may face that could interfere with implementing the ASK, CARE, ESCORT process.** [?]

1. Share the reality about many Soldiers not seeking help when needed.

- Many service members who have reported suicidal thoughts or a suicide attempt since joining the military have indicated that they did not talk to anyone or seek help.

[NOTE: This information was included in the notes of the ACE Base module. It is used here for the purpose of DA Civilians considering how taking initiative to ASK how someone is doing could make a positive difference.]

2. Highlight that suicide prevention involves both reaching out for help if one needs it and also people actively engaging with a person and intervening if there are noticeable concerns.

- While it is encouraged that each person take initiative to seek help or find support from others to talk about their struggles, this information shows that it is not always the case.
- There were likely opportunities for others to notice potential risk factors and there may have been missed opportunities to employ ACE and specifically ASK how the person was doing.



Record your own notes here:

Record your own notes here:

3. Discuss reasons that might contribute to someone not engaging another person and implementing the ASK, CARE, ESCORT process.

- **[ASK]** What are some potential reasons that could keep someone from engaging another person who appears to be struggling and implementing the ASK, CARE, ESCORT process?

[NOTE: Allow for responses. Possible examples include


- *not wanting to put the other person in a position that they might feel embarrassed*
- *assuming the person will open up on their own time if they want to talk; a belief that asking would be invading a person's privacy*
- *wanting to avoid either party from feeling awkward or embarrassed*
- *not sure how to ask or how to start the conversation*
- *uncertain whether you can handle the situation well if they do disclose thoughts of self-harm]*


4. Acknowledge that the type of relationship that exists between the two people involved may bring about unique challenges to overcome.


- There may be some slight differences in how it feels to ASK, CARE, and ESCORT someone based on the relationship you have with that person.
- For example, you might feel more or less anxious depending on how close you are with the other person or the level of trust in the relationship.
- Consider how using ACE might look or feel differently if the other person is a good friend versus a person you don't know very well. Or, it might feel differently if they are a leader or a subordinate.
- Despite the differences, everyone deserves to have someone who has their back and is able and willing to help.

5. Transition.

- This training will help you overcome some of these challenges so that you might be that person that someone is able and willing to talk to and they the help they need.

 **Training Purpose**

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To strengthen suicide prevention and intervention skills through practical application activities and discussions

ACE techniques and procedures need to be rehearsed in order to maintain proficiency

DPRR 3



State the training purpose and emphasize the importance of practicing ACE.

1. State the training purpose.

- The purpose of this module is to strengthen suicide prevention and intervention skills through practical application activities and discussions.

2. Provide an overview of the module.

- During the first part of the training, we will discuss the potential challenges you might face when using ACE in real life, and you will work together to determine strategies to overcome them.
- You will also be introduced to two skills that can enhance your communication and your effectiveness throughout the ACE process.
- The second part of the training will include a simulation training exercise where you and a partner will act out a scenario. This will be an opportunity to put your skills to the test and get feedback from your partner.
- We will then wrap up the module by reviewing ways to strengthen protective factors within yourself and your DA Civilian community.



Record your own notes here:

3. State that this training uses Soldier-focused examples to ensure relevance for all participants but that ACE concepts, skills, and strategies are applicable in supporting anyone.

[NOTE: If the Practicing ACE module is trained directly after the ACE Base module, then this key point may not need to be addressed again.]

- In today's training a majority of the examples, discussions, and activities will be focused on how a DA Civilian might apply ACE and active listening concepts with a Soldier.
- The Soldier-focused examples are not to discount the importance of other people or relationships in your lives such as colleagues, friends, and family members.
- The Soldier-focused examples are simply the most relevant given every participant attending this training today is here because of having a vested interest in a supporting Soldiers and the Army mission.
- Please note, though, that the concepts, skills, and strategies you learn today can help you provide support to anyone, not just Soldiers.



4. State the importance of practicing ACE.


- To maintain proficiency, just like maintenance of other skills, ACE techniques and procedures need to be rehearsed and refined.
- This training will enhance your competence in effectively applying ACE to reduce the risk of suicide.
- As a result, this training can increase your confidence in your ability to respond appropriately when you recognize concerning behaviors from a person who is struggling with a life event, or is in a crisis thinking about and/or planning suicide.

[NOTE: This is a natural transition to the next slide.]

Record your own notes here:



 **Review of ACE** 

ASK. CARE. ESCORT. ACE  **SUICIDE INTERVENTION**

ACE is an acronym intended to help remember the actions to take when assisting a team member facing a crisis and/or at risk for suicide.

Similar to CPR or Buddy Aid, apply **ACE** as an immediate response:

- Assess the situation by **ASKing** if help is needed
- Offer **CARE** to stabilize and provide safety
- **ESCORT** to a helping resource to ensure a safe outcome

DPRR 4

Record your own notes here:



Review ACE as a suicide prevention tool.

1. Review ACE as a suicide prevention tool to mitigate risk.

- As a reminder, ACE is a simple way to remember the immediate actions to take for helping a team member in need of assistance.
- Like CPR or Buddy Aid, assess the situation by first **ASKing** if help is needed, then providing **CARE** to stabilize and provide safety, and finally providing safe **ESCORT** to helping resources to ensure a positive outcome.
- Early application of ACE principles can help mitigate suicide risk by reducing the chances that a problem becomes a crisis or has an adverse outcome, such as suicide.

2. Transition.

- Let's do a quick review of the signs that can help you to assess the level of risk, and thus guide your actions with using ACE.



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U.S. ARMY **Recognize the Signs to Assess the Risk** **DEPARTMENT OF DEFENSE** **INSTITUTE OF PREVENTION** **RESILIENCE AND READINESS**

WARNING SIGNS
Indicate or signal *active* suicidal thinking and/or behaviors, meaning they are time sensitive and require immediate action.

RISK FACTORS
Events and/or characteristics that indicate the *potential* for suicidal thoughts and/or actions

PROTECTIVE FACTORS
Behaviors, characteristics, or supports that reduce risk and encourage healthy behaviors

DPRR 5

 Use the traffic light metaphor to provide a brief refresher of protective factors, risk factors, and warning signs that can help participants understand and identify risk levels.

[NOTE: If this module is trained immediately after the Base module, then this slide can be skipped over.]

1. Provide a brief review of warning signs, risk factors, and protective factors.

- Warning signs, risk factors, and protective factors all have a role in identifying risk.
- Let's do a quick review.
- Red light warning signs indicate **immediate risk**; they are indicators or signals that usually occur just prior to a suicide event, meaning they are time-sensitive, requiring immediate and rapid intervention.
- Yellow light risk factors indicate the **potential risk** for suicidal thoughts and/or actions. They do not always represent an emergency or crisis; however, when the number of risk factors increase, then the risk for suicide becomes greater.
- For example, a poor diet, lack of exercise, and a family history of heart problems indicates an increased risk for a heart attack. In the same way, financial distress, relationship issues, and increasing isolation are factors that represent a greater risk for suicidal thinking and/or actions.



Record your own notes here:

- Green light protective factors are behaviors, characteristics, or conditions possessed by individuals, families, and/or units that aid in the management of stressful life events and work to mitigate the potential for suicide.

2. State that how a person uses ACE will differ depending on the risk level they are responding to.


- Being aware and alert to the signs and indicators can help you assess a person's risk level for self-injury or death by suicide.
- Furthermore, how you use ACE will differ depending on the risk level you are responding to. You may recall in the ACE Base module how you uniquely applied ACE to bolster protective factors, to mitigate risk if noticing risk factors, and to respond to mitigate a crisis when noticing warning signs.

3. Transition.


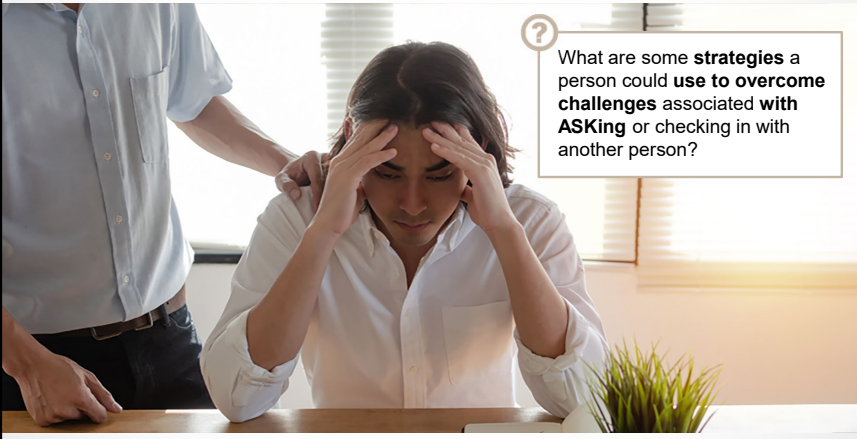
- Now that we have refreshed our understanding of what ACE is and how to recognize risk levels, let's get in some practice using ACE.

Record your own notes here:





Practical Application: Strategies to ASK

? What are some **strategies** a person could **use to overcome challenges** associated with **ASKing** or checking in with another person?

DPRR 6



Facilitate a discussion of the practical application of ASK, such as identifying strategies to overcome potential challenges.

[?]

1.

Facilitate small group discussion about strategies a person might use to overcome challenges and take initiative to ASK how another person is doing.

- ASKing questions to check in can be challenging, regardless if there are indicators of yellow-light risk factors, red-light warning signs, or even when things seem steady with green-light protective factors.
- Having strategies to overcome the potential challenges or discomfort that you might feel about ASKing or checking in on a person can help you open the lines of communication.
- In small groups of 3-4 people, discuss the following:
- **[ASK]** What are some strategies someone could use to overcome challenges associated with ASKing or checking in with another person?

[NOTE: Allow to discuss as a small group. Then, restate the question and allow the groups to share their ideas with one another. Possible examples include

- drawing motivation from personal or family values like loyalty to others or Personal Courage to do what is right
- being proactive to build connection, rapport, and trust]



Record your own notes here:



2. Affirm that the strategies they have identified will aid them in effectively implementing the ACE process and making a positive difference in someone else's life.

- With these strategies, you are more equipped to “break the ice” with someone who may be struggling with a life event or may be in crisis.
- The techniques you've just identified can help you effectively implement the ACE process, and more importantly, can make a positive difference in someone's life.

[NOTE: This is a natural transition to the next slide.]

Record your own notes here:



 **Practical Tips: ASK** 
U.S. ARMY DEPARTMENT OF DEFENSE
RESILIENCE AND READINESS

- Be **direct**
 - Asking direct questions will give you the most direct, clear answers
- Have **strategies** to overcome challenges
- **Trust** that the benefits of ASKing outweigh any perceived costs
 - It is better to ask and be wrong than not to ask and have something terrible happen
 - Checking in with someone shows you have their back, which can help increase your connection and level of trust

DPRR 7



Provide some helpful considerations when it comes to ASKing someone about suicide.

1.

Provide some helpful considerations when it comes to ASKing someone about suicide.

- Here are some additional things to keep in mind when ASKing someone about suicide.
- Be direct. It's important to get a clear response.
- Consider what might hold you back from ASKing, such as your own personal challenges, and consider the strategies that may help you to overcome them.
- Trust that the benefits of ASKing outweigh any perceived costs. For example, ASKing may seem awkward or like you are butting in, but to overcome that discomfort, know this: it's better to ask and be wrong than to not ask and have something terrible happen.
- More than likely the person will thank you for asking about their well-being and now knows you have their back, which can help increase your connection and level of trust.


2. Transition.

- ASKing is the first step. Asking a question to check in with another person does more than give you valuable information; the act of asking also shows that you CARE.





Record your own notes here:

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Practical Tips: CARE






ACTIVE LISTENING

Listening thoughtfully and deliberately to capture the nuances of what the speaker is communicating (ATP 6-22)

- Attentive and open posture
- Make appropriate eye contact
- Use facial expressions that reflect the speaker's emotion
- Give affirmative nods or affirming responses like "I see" or "go on"
- Summarize what is said to ensure understanding
- Ask open-ended questions to gain clarity and depth of understanding



EMPATHY

The ability to recognize, understand, and appreciate another person's situation, motives, perspectives, and feelings (adapted from ADP 6-22)

- Listen with an open mind
- Allow the speaker to finish sharing and refrain from giving unsolicited advice or your perspective
- Ask thoughtful questions with a genuine curiosity
- Acknowledge and accept their feelings as they are without trying to change how they feel

DPRR 8

Record your own notes here:



Provide an overview of active listening and empathy and how the skills can enhance the ACE process.

[SLIDE BUILDS]

1. Introduce two skills that can help a person engage in the CARE step of ACE.

- When you ASK a question, it can demonstrate you CARE, but how you listen matters too. There are two skills that can help you when engaging in the CARE step of ACE: active listening and showing empathy.

2. Provide an overview of active listening.

- Listening is essential for effective communication. There is a difference between passively listening and actively listening. The latter takes intention and effort.
- Active listening implies listening thoughtfully and deliberately to capture the nuances of what the speaker is communicating. Techniques that support active listening include
 - nonverbal behaviors like an attentive and open posture, making appropriate eye contact, affirmative nods, and facial expressions that reflect the speaker's emotion
 - verbal behaviors like providing affirming responses like "I see" or "go on," summarizing what is said to ensure understanding, and asking open-ended questions to gain clarity and depth of understanding



- Benefits of active listening include gaining a shared understanding of events, circumstances, and emotions involved in the conversation and it communicates back to the speaker that they are heard, respected, and cared for.

Record your own notes here:

3. Provide an overview of the skill of empathy.

[CLICK TO ADVANCE]

- Empathy is a skill that can also help you to understand a person and their experiences at a deeper level. Specifically, empathy is the ability to recognize, understand, and appreciate another person's situation, motives, perspectives, and feelings.
- One way to demonstrate empathy is to engage in active listening behaviors. Other ways to show empathy include
 - putting aside your viewpoint and feelings and listening with an open mind
 - allowing the speaker to finish sharing and refraining from giving unsolicited advice or your perspective
 - asking thoughtful questions with a genuine curiosity and not with a planned agenda
 - acknowledging and accepting their feelings as they are without trying to change how they feel


4. Explain how active listening & showing empathy can enhance the ACE process and support suicide prevention efforts.

- Engaging in the skills of active listening and showing empathy helps to build trust and rapport that, in turn, can bolster the protective factor of strong connections and can lead to more open and honest communication that gives more insight into how to best CARE for and if necessary, ESCORT the person.

5. Transition.


- Once you have ASKed a question to open up lines of communication and have shown you CARE through active listening and showing empathy, now you've determined it is time to ESCORT.





Practical Application: Strategies to ESCORT

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Establish realistic expectations: The person you are helping may provide resistance.

- What are some strategies a person might use to overcome potential challenges or resistance when trying to ESCORT another person to a helping resource?
- What are some ESCORT strategies if you are alone with a person in crisis?
 - How might you handle the ESCORT process if you are talking to a person in crisis on the phone or over social media?

DPRR 9

Record your own notes here:



Facilitate a discussion of the practical application of ESCORT, such as identifying strategies to overcome potential challenges. [?]

[NOTE: The point of the discussions on this slide is not to determine which resource someone would use/ ESCORT another person to; the point is to discuss how they are going to help that person get to or utilize that resource.]

1. Establish realistic expectations about the ESCORT step of ACE.

- In an ideal world, when you move to the ESCORT step of ACE, the person you are helping will willingly and readily go with you/be escorted to the resource. This may not always be the case, however. The person you are helping may provide some resistance.
- For example, they may politely decline and say they will visit or call the resource later. They may insist they feel better now and there's no need for further action. Or, they may blatantly and violently refuse.

2. Allow participants to discuss strategies someone might use when trying to ESCORT a person to a helping resource and they are facing resistance.

- When facing any difficult situation, it is always best to be as prepared as possible. So, in your small groups you will collaborate on ideas to support the practical application of the ESCORT step of ACE.



- **[ASK]** What are some strategies a person might use to overcome potential challenges or resistance when trying to ESCORT another person to a helping resource?

[NOTE: Allow for participants to discuss as a small group. Then, restate the question and allow the groups to share their ideas with one another. Possible responses include

- if the person said “yes” to suicidal thoughts, be direct with the person and clearly state that because they said “yes,” that it is your duty and responsibility to ensure they get help
- ask the person if there is anyone from their support circle that they’d like to have accompany them to the helping resource along with the two of you
- include the person in identifying the helping resource that they will agree to be ESCORTed to]

Record your own notes here:

3.

Allow participants to discuss how they might handle the ESCORT process if they are (1) alone with the person and (2) talking to the person in crisis on the phone or over social media.

- Now, discuss with your small group what your approach or strategies might be in two particular scenarios.
- **[ASK]** What are some ESCORT strategies if you are alone with a person in crisis? And, how might you handle the ESCORT process if you are talking to a person in crisis on the phone or over social media?


[NOTE: Allow for small group discussions. Then, ask groups to share a few of their ideas. Examples might include


- in-person but alone: call 988 and putting a crisis line on speaker
- over phone/social media: determine their location so help can be sent while maintaining contact until help arrives]


4. **Transition.**

- Let’s review some final considerations in regard to ESCORTing a person that is in crisis.



 **Practical Tips: ESCORT**

U.S. ARMY 



When someone is in crisis, **do not leave them alone, especially** if they are suicidal.

DPRR 10



Provide some important considerations when it comes to the ESCORT step of ACE.

1. Provide some important considerations when it comes to ESCORTing someone who is in crisis.

- When someone is in crisis, do not leave them alone, *especially* if they are suicidal.
- If they refuse to go with you to a helping resource, use your phone to call for help and/or ask someone else to get help.
- If they are suicidal, it may be best to call and have the help come to you. Remember, NEVER leave a person in crisis or who is suicidal alone.


2. Transition.

- Now that we have worked on the fundamental parts of ACE, you are well-equipped and prepared for a simulation training exercise.

Record your own notes here:



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Practical Exercise: Simulation Instructions

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Applied Exercises

The **purpose of this practical exercise** is to provide you an opportunity to practice your ACE skills through a simulation training exercise.

- 1. Pair up and determine** who will be **Partner 1** and **Partner 2**. During the simulation exercise, one partner will portray someone struggling with a problem and the other will be listening and taking actions (ACE) to respond appropriately.
- We will conduct two rounds: **Alpha and Bravo**. Partner 1 will be practicing ACE first in Alpha round.
- Prior to each round, **you will be given background information** for your specific role and **instructions** for the simulation exercise.

DPRR 11



Set up the practical exercise.



1. Set up the practical exercise.

[NOTE: For this exercise, it is best to have the participants pair up. Space teams out if possible.]

- The purpose of this practical exercise is to provide you an opportunity to practice your ACE skills through a simulation training exercise.
- For this exercise, you will break away from your small groups and pair up.
- You and a partner will each take on a role as either someone struggling with a problem or an active listener ready to use ACE to respond appropriately.
- We will conduct two rounds: Alpha and Bravo. Each partner will get an opportunity to play both roles.
- Lastly, but importantly, immerse yourself in this activity and take it seriously. It is important to practice having tough conversations so that you are able to use ACE skills when needed in real-life events.

Record your own notes here:

[NOTE: If the training has an odd number of participants, then a group of 3 will be necessary. In this case, give clear direction for the third person to assume the role as observer and to take notes of sustains and improves to offer valuable feedback to the group.]



2. Instruct the participants to decide who will be Partner 1 and who will be Partner 2.

- Before we move on, decide who will be Partner 1 and Partner 2.
- For the first simulation exercise, Alpha round, Partner 1 will be practicing ACE and Partner 2 will be the individual facing some life struggles.


3. Transition to the role-specific instructions.

- On the next slide, you will be given the background information about your character and what you are expected to do during the simulation exercise.

[NOTE: Before transitioning to the next slide, be sure every one is paired up and has identified which partner number they are so they are ready to read their respective instructions on the next slide.]


Record your own notes here:





Practical Exercise: Simulation ALPHA

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Applied Exercises

Partner 1

Background: You are with a person from your professional community who has had some recent personal problems and lately appears downcast and is keeping to themselves. They told you their situation seems "hopeless" to them.

Instructions: Employ ACE and practice using **active listening** and showing **empathy** for the person sharing their problems.

Partner 2

Background: A person in your professional community asks if you are okay. Recently, you've been going through a lot, such as

- Breaking up with a significant other
- Not sleeping well
- Receiving a negative counseling
- Self-medicating (e.g., drinking more to "help" with sleep)

But you have not thought about ending your life.

Instructions: During the conversation, be sure to tell them about your recent difficulties, and your changes in mood and behavior.

DPRR 12

Record your own notes here:



Conduct Simulation Alpha.



1. Ask the participants to review their respective roles and instructions.

- When you are finished reading your specific role's background and instructions, let me know by giving me a thumbs up.

[NOTE: Provide as much time as needed for everyone to be comfortable with their individual role, yet do not provide too much time where they can study their partner's background and instructions.]

2. Conduct the Simulation Alpha.

- Using the information you just read about your character role, you will have to simulate the scenario and act out the conversation.
- Once the time is up, you will debrief with your partner to provide and receive feedback.
- You may begin.


[NOTE: Keep track of time and monitor the simulation exercise. If groups end really early, encourage them to continue on with the simulation.]

Once it appears most groups have finished their conversation, then transition to the guided team debrief on the next slide.]

[NOTE: This is a natural transition to the next slide.]




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Partner Debrief: Simulation ALPHA

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Applied Exercises

Use the following questions to guide your feedback to your partner based on their role and responsibilities. *You do not need to discuss each one.*


- What strategy/approach was used to “break the ice” and ASK/initiate conversation? Was it effective?
- Did Partner 1 express empathy? If so, how?
- What behaviors did Partner 1 use to show they were actively listening?
- Did Partner 1 ask a direct question such as “Are you thinking about suicide?” If so, how did that go?
- Partner 1: Did you pick up on any risk factors or warning signs from Partner 2?
- What strategy/approach was used to Escort? Was it effective?

DPRR 13

Record your own notes here:



Instruct the partner groups to debrief; encourage them to use the debrief questions as a guide for giving specific and effective feedback.



1. Instruct the partner groups to debrief; encourage them to use the debrief questions as a guide for giving specific and effective feedback.

- I will give you time to debrief Alpha round.
- Use the debrief questions on the slide as a guide for giving specific and effective feedback to your partner based on their role and responsibilities. You do not need to answer each one.

[NOTE: Allow for partner feedback. Use your discretion if more time is needed due to teams providing valuable feedback to one another.]


2. Instruct the participants that they will switch roles and transition to Bravo round.

- Now you will switch roles. Partner 2 will now be the one to practice using ACE.
- Next you will be given the background information and instructions for your respective role.

[NOTE: This is a natural transition to the next slide.]




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Practical Exercise: Simulation BRAVO

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Applied Exercises

Partner 1

Background: A person in your professional community asks if you are okay. Recently, you've been going through a lot, such as

- Accruing a lot of debt and your family is harping on you to figure it out
- Worrying over being passed over for promotion
- Losing interest in things and can't concentrate at work or home

You've thought of ways to end your life but have not made any specific plans.

Instructions: During the conversation, be sure to tell them about your recent difficulties, and your changes in mood and behavior.

Partner 2

Background: A person in your professional community has been acting different lately. You've noticed slight changes over time, and now they appear downcast and preoccupied. Recently this person has said on several occasions, although somewhat sarcastically, that some days are totally hopeless and there's no point in living.

Instructions: Employ ACE and practice using **active listening** and showing **empathy** for the person sharing their problems.

DPRR 14

Record your own notes here:



Conduct Simulation Bravo.



1. Ask the participants to review their respective roles and instructions.

- When you are finished reading your specific role's background and instructions, let me know by giving me a thumbs up.

[NOTE: Provide as much time as needed for everyone to be comfortable with their individual role, yet do not provide too much time where they can study their partner's background and instructions.]

2. Conduct the Simulation Bravo.

- Just like in the Alpha round, you will simulate the scenario that will be followed by a debrief with your partner to provide and receive feedback.
- You may begin.


[NOTE: Monitor the simulation exercise. If groups end really early, encourage them to continue on with the simulation exercise.]

Once it appears that most groups have finished their conversation, then transition to the guided team debrief on the next slide.]


[NOTE: This is a natural transition to the next slide.]



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Partner Debrief: BRAVO



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Applied Exercises

Use the following questions to guide your feedback to your partner based on their role and responsibilities. *You do not need to discuss each one.*

- What strategy/approach was used to “break the ice” and ASK/initiate conversation? Was it effective?
- Did Partner 1 express empathy? If so, how?
- What behaviors did Partner 1 use to show they were actively listening?
- Did Partner 1 ask a direct question such as “Are you thinking about suicide?” If so, how did that go?
- Partner 1: Did you pick up on any risk factors or warning signs from Partner 2?
- What strategy/approach was used to ESCORT? Was it effective?

DPRR 15

Record your own notes here:



Instruct the partner groups to debrief; encourage them to use the debrief questions as a guide for giving specific and effective feedback.



1. Instruct the partner groups to debrief; encourage them to use the debrief questions as a guide for giving specific and effective feedback.

- Like before, I will give you time to debrief Bravo round.
- Use the debrief questions on the slide as a guide for giving specific and effective feedback to your partner based on their role and responsibilities. You do not need to talk about each question.

[NOTE: Use your discretion if more time is needed due to teams providing valuable feedback to one another.]

2. Transition.

- Now that we have completed the simulation training exercise, let's do an AAR.



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After Action Review

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Applied Exercises

- State the intent of the simulation training exercise.
- Describe and discuss what happened in the scenarios.
 - ❑ What did it feel like to ask if your partner was considering suicide?
 - ❑ At any time, was it uncomfortable to ask about the other person's issues? If so, how did you work through that?
 - ❑ What differences did you notice in the ACE experience from when the person responded "yes" or "no" to having suicidal ideations?
- Review what went well and what could be improved.
 - ❑ What were some overall sustains from your and your partner's use of ACE in the simulation? Improves?
- Discuss lessons learned that could be used for a real-life event.
 - ❑ What is a key takeaway that you learned from participating in this simulation exercise that you can use to help you prevent suicide in your unit?

DPRR 16

Record your own notes here:



Conduct the practical exercise AAR.



1.

Restate the intent of the simulation training exercise.

- The intent of the simulation exercise was to provide an the opportunity to practice using ACE skills to support a person who is struggling in order to mitigate the risk of suicide.

2.

Describe and discuss what happened in the scenarios, specifically how it felt to ask their partner if they were considering suicide.

- Another goal of the exercise was to practice asking about suicide in a direct and empathetic way.
- **[ASK]** What did it feel like to ask if your partner was considering suicide?

[NOTE: Allow for responses.]

- **[ASK]** At any time, was it uncomfortable to ask about the other person's issues? If so, how did you work through that?

[NOTE: Allow for responses.]



Record your own notes here:

3. Discuss the difference between Alpha and Bravo conversations, specifically when the person responded “yes” to thinking about suicide.

- One key difference in Alpha and Bravo round was that in Bravo round the person facing life challenges had said “yes” to having suicidal ideations.
- **[ASK]** What differences did you notice in the ACE experience from when the person responded “yes” or “no” to having suicidal ideation?

[NOTE: Allow for responses. Use the following talking point to supplement participant responses, if necessary.]

- When a person responds “yes” and affirms they are having suicidal thoughts, it can change the **intensity** and **direction** of the conversation. It can create a **sense of urgency to ESCORT** the person safely and quickly to an emergency resource.

4. Review what went well and what could be improved.

- **[ASK]** What were some overall sustains from your and your partner’s use of ACE in the simulation?

[NOTE: Allow for responses.]

- **[ASK]** What were some improves? Or, what might you do differently if encountering this situation in real life?

[NOTE: Allow for responses.]

5. Discuss lessons learned that could be used for a real-life event.


- **[ASK]** What is a key takeaway that you learned from participating in this simulation exercise that you can use to help you prevent suicide in your unit?

[NOTE: Allow for responses.]

6. Transition.


- Engaging in ACE can help mitigate risk of suicide. Another suicide prevention strategy is to get ahead of the risk and build protective factors.





Mitigating Suicide Risk with Protective Factors

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RESILIENCE AND READINESS

Techniques that work to mitigate suicide risk:



INDIVIDUAL

- Build on successful life management skills
- Maintain connectedness
- Seek a sense of purpose or meaning in life



CIRCLE OF SUPPORT

- Maintain suicide prevention knowledge and intervention skills
- Cultivate an environment supportive of help-seeking behaviors
- Promote and participate in relationship-building activities that build and sustain high levels of cohesion

KEY POINT: Setting conditions to promote cohesion and build trust helps to **mitigate the risk for suicide** by increasing the chances help is requested before problems become unmanageable.

DPRR 17



Review techniques that bolster protective factors that can help to mitigate suicide risk.

1. State that part of suicide prevention is taking a proactive approach and building protective factors.

- You may recall from the ACE Base module that part of suicide prevention is taking a proactive approach and building protective factors that can help mitigate the risk of suicide.
- Protective factors exist at the individual level as well as at the unit level.

2. Briefly review ways to bolster individual protective factors.

- Individually, we all have protective factors that can be built upon and some that we may need to add.
- Here are a few ways you can bolster individual protective factors:
 - build on successful life management skills and pursue goals: Establishing short-, mid-, and long-term goals can help to determine a personal way ahead
 - maintain connectedness with others in and outside of your work community: connecting with a respected leader; seeking a mentor and/or spiritual advisor can help refine life goals
 - seek a sense of purpose or meaning in life



Record your own notes here:

3. Briefly review ways to bolster protective factors collectively with DA Civilians.

- Furthermore, each of us can impact protective factors collectively with other Soldiers, Soldiers' Circle of Support, DA Civilians, and our own Circle of Support.
- Here are a few ways you can help bolster protective factors on a collective level:
 - maintain suicide prevention knowledge and intervention skills like those you've learned and practiced today
 - apply positive leadership skills to promote help seeking decisions
 - promote and participate in relationship-building activities that build and sustain high levels of cohesion

4. Explain how key protective factors like connectedness and trust help to mitigate suicide risk.

- Connectedness and trust are key protective factors that help to mitigate suicide risk.
- Staying connected helps to increase awareness of the common behaviors and moods of those around us, improving our ability to recognize the signals of someone facing life challenges.
- Strong connections with others helps to build trust, thus increasing the chances that people within your workplace, your community, or your own personal Circle of Support will feel comfortable reaching out in times of difficulty and helping to mitigate the risk for suicide.
- Building a culture of trust helps remove help-seeking barriers, increasing the chances that a person will reach out for help before a crises occurs.

[NOTE: This is a natural transition to the next slide.]

Record your own notes here:



Resources

Non-Emergency Resources

- Unit Chaplain
- Behavioral Health
- Military OneSource
- Psychological Health Resource Center
- Real Warriors Campaign
- Vet Center Call Center
- Army Community Services (ACS)
- Army Wellness Center (AWC)
- Ready & Resilient Performance Center (R2PC)
- Holistic Health & Fitness (H2F) Personnel
- Military Family Life Counselor (MFLC)

Emergency Resources

- Chain of Command
- Military Police
- Emergency Room
- Crisis Line: 9-8-8 + 1
- Local Emergency: 9-1-1
- OCONUS 9-1-1
 - Germany: Dial 112
 - Italy: Dial 112 or 118
 - South Korea: Dial 119
 - Japan: Dial 119 or 110
- Military & Veteran's Crisis Line
 - Text: 838255
- Crisis Text Line
 - Text: HOME to 741741

DPRR 18

Record your own notes here:



Provide a concise review of non-emergency and emergency resources and ask participants if there are any other resources to share with the group.

1.

Provide a concise review of Non-Emergency and Emergency Resources.

- If you recall from the ACE Base module, there are two types of resources:
 - if an individual is suicidal, you will need to know the **emergency resources** to use under those circumstances
 - if an individual is not suicidal, you still need to connect them with **non-emergency resources** that can help them with their difficulties
- Non-emergency resources vary by location and environment. This is not a comprehensive list.
- General resources vary by location and can change frequently; the ones listed apply to all service components.



2. Ask participants to share other local or accessible resources they are aware of.

- **[ASK]** What are some other local or accessible resources that might be helpful for others to know?

[NOTE: Allow participants to share resources. If this question was already asked and answered from the base module then just remind them of the shared resources/refer back to that list.]

3. Transition.

- Now that we've got in some reps for practicing ACE, let's talk about your next steps.

Record your own notes here:



 **Next Steps: Plan to Implement** 

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RESILIENCE AND READINESS


What is **one thing** you plan to do within the next week or two **that can help lower the risk of suicide** within Soldiers, Soldiers' Circle of Support, fellow DA Civilians, and your own Circle of Support?



Preventing suicide requires taking **proactive steps**

DPRR 19

Record your own notes here:

 **Ask participants to consider their next steps in implementing what they've gained from today's training and encourage them to talk about suicide prevention with others. [?]**

[SLIDE BUILDS]

1. Ask participants to identify one thing to implement from today's training in the next week or two that can help lower the risk of suicide.

- Throughout a typical day or week, you have many opportunities to apply what you've learned today.
- **[ASK]** Based on what we've covered today, what is one thing you plan to do within the next week or two that can help lower the risk of suicide with those in your community?

[NOTE: Allow for responses. Encourage participants to consider specific, tangible actions. Examples may include

- *identifying a specific person in my community and check in to see how they are doing*
- *drawing on one of my personal values when tempted to avoid uncomfortable conversations*
- *inviting a friend or family member over for dinner*
- *making an effort to ask more open-ended questions to improve active listening skills*
- *reminding myself to just listen (receive and acknowledge) when others are sharing their problems with me rather than being quick to offer solutions or ways to fix the situation]*



2. Encourage participants to talk to Soldiers, coworkers, and members of their own personal Circle of Support about effective strategies to prevent suicide.

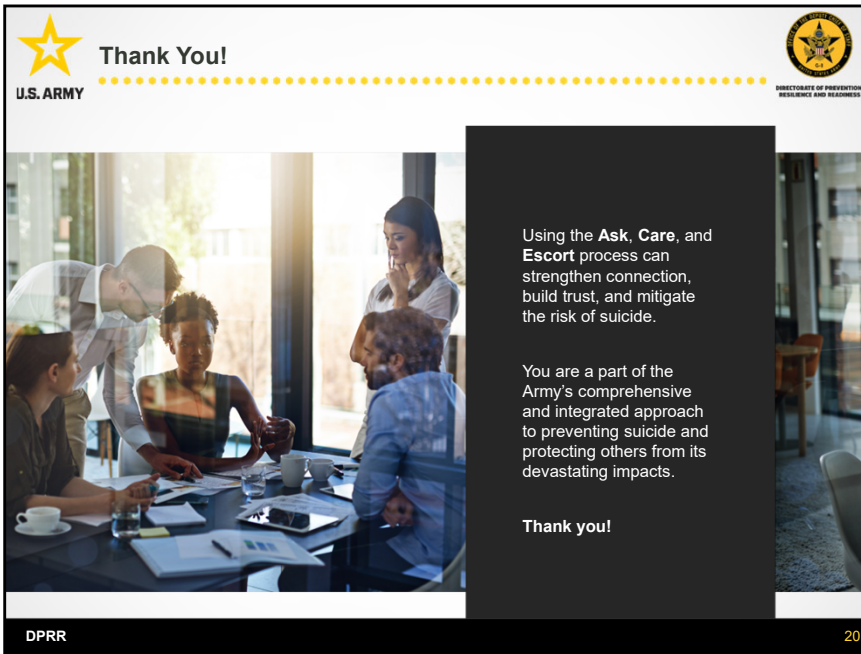
[CLICK TO ADVANCE]

- Preventing suicide requires taking proactive steps.
- In addition to the plans you all have just shared, here are some proactive steps you might consider taking with Soldiers, coworkers, and other members within your community:
 - look for opportunities to use active listening to enhance communication and connection and to build trust
 - ask who they feel most comfortable talking with if there is ever a concern or moment of crisis, and share that same information with them about you
 - talk about which resources you and they might find most helpful and put the contact information in your phones
 - when they are facing a challenge, encourage them to use resources proactively such as when there is even a hint of concern rather than waiting until it's a crisis situation, and you yourself seek help early and proactively to role model this proactive and preventative behavior

[NOTE: This is a natural transition to the next slide.]

Record your own notes here:





Record your own notes here:



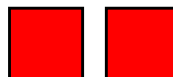
Empower participants to engage with and support others by employing the ACE process, and thank participants for attending.

1. Empower participants to engage with and support others by employing the ACE process.

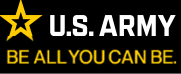
- This training provided you with realistic expectations and practical experience that will help you to effectively engage with and support others in your community. Using the Ask, Care, Escort process can strengthen connection, build trust, and mitigate the risk of suicide.
- Remember, you are part of the Army's comprehensive and integrated approach to preventing suicide and protecting others from its devastating impacts.
- The Army and its people need you to concentrate your efforts in the prevention strategies within your control and influence, which you have gained from today's training.


2. Thank participants for attending.


- Thank you for attending today's training. Your participation is evidence of your support and care for Soldiers, Soldiers' Circle of Support, fellow DA Civilians, and members of your own personal Circle of Support.



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 **U.S. ARMY**
BE ALL YOU CAN BE.

Post-Training Survey 


https://wrair.gov1.qualtrics.com/jfe/form/SV_aXFrN0d3WYotlii
**Participants: You have just completed
the ACE Practicing ACE module.**
Completing the survey will assist the DPRR in determining the effectiveness of training and will inform curriculum revisions during the next update cycle.
If you received the Base module prior to this module, please select the Base + Practicing ACE option on the survey.

Record your own notes here:



Introduce Post-Training Survey

1. Introduce survey.

- Before we dismiss, please take a few moments to complete the ACE Post-Training Survey.
- The survey was developed by the Walter Reed Army Institute of Research on behalf of the DPRR.

[NOTE: Emphasize the importance of the survey.]

- Completing the survey will assist the DPRR in determining the effectiveness of training and will inform curriculum revisions.
- Participation is optional and responses are anonymous.
- You can access the survey by either scanning the QR code with your phone or by going to the website URL, which is shown in blue.
- Please note the module you are surveying and select the matching bubble on your survey.

[NOTE: Participants should only take survey at the end of the base module if it is the only module trained. If a second module is trained, check the box that represents the ACE Base + (appropriate subsequent module) Example: ACE Base + Active Listening.]

[NOTE: For survey issues, contact CPT John Eric M. Novosel-Lingat at johneric.m.novosel-lingat.mil@health.mil]

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