



2022 NSCA TACTICAL ANNUAL TRAINING #NSCATactical22

CONFLICT OF INTEREST STATEMENT

I have no actual or potential conflict of interest in relation to this presentation.



Holistic Health and Fitness (H2F) Implementation

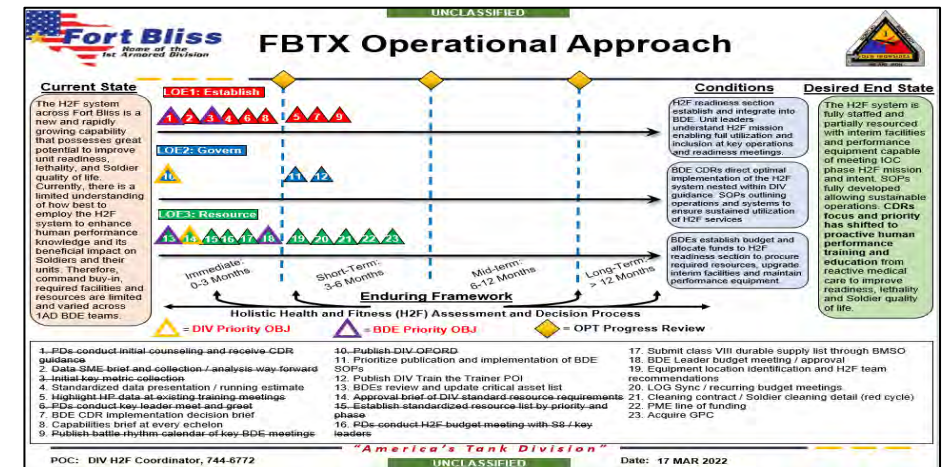
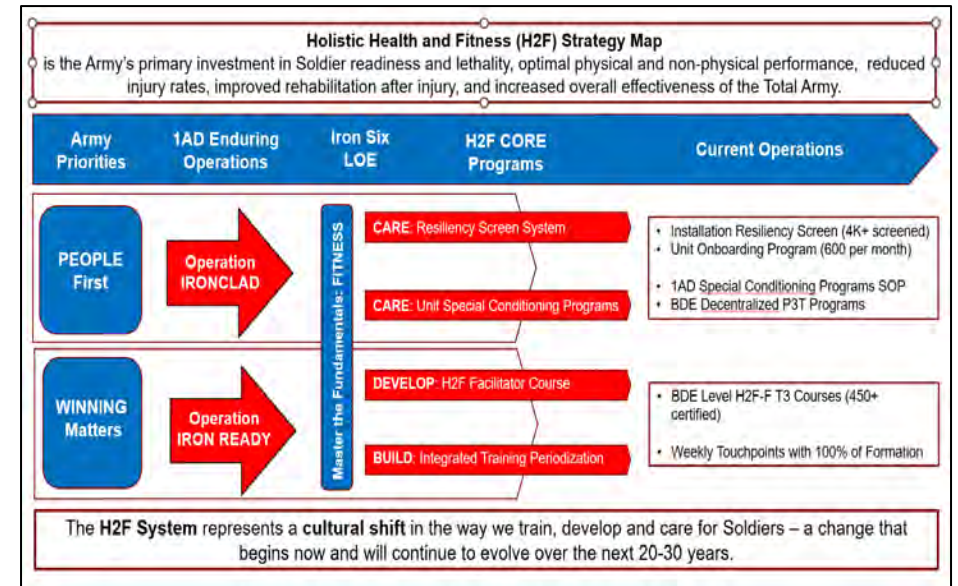


Problem Statement:

How does an Army Division implement a human performance system for 30K Soldiers given strategic but limited operational level guidance and the Senior Mission CMD's intent while allowing individual teams freedom of movement to creatively address unit specific concerns?



FBTX Implementation Model

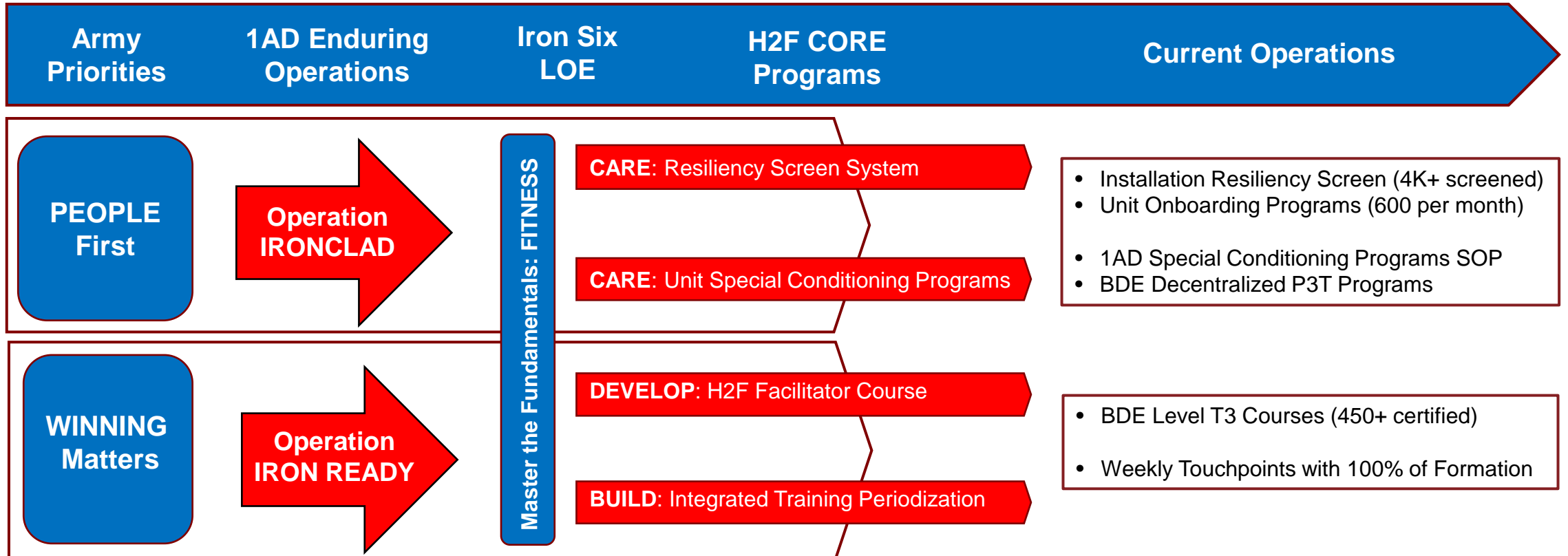


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 H2F Implementation at Echelon

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Holistic Health and Fitness (H2F) System

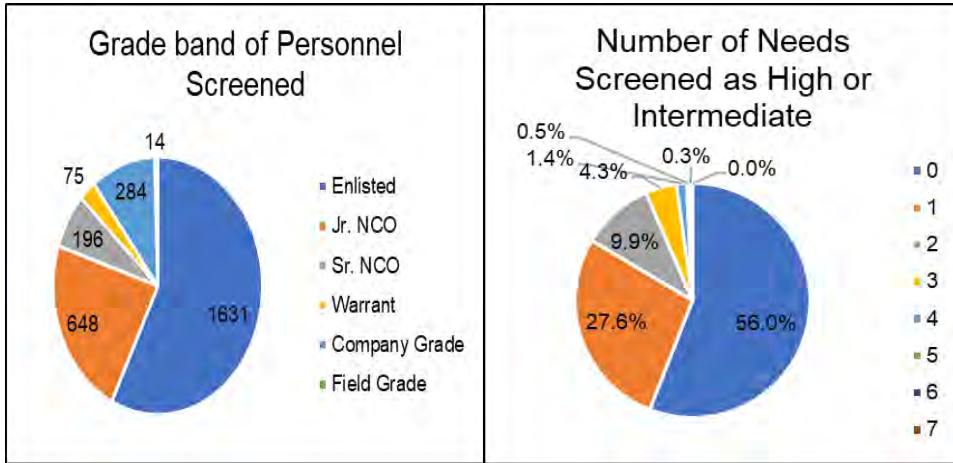
is the Army's primary investment in Soldier readiness and lethality, optimal physical and non-physical performance, reduced injury rates, improved rehabilitation after injury, and increased overall effectiveness of the Total Army.



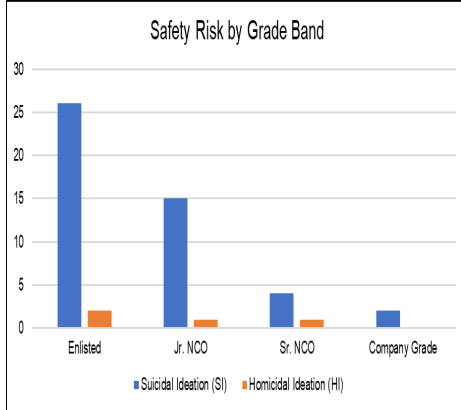
The **H2F System** represents a **cultural shift** in the way we train, develop and care for Soldiers – a change that begins now and will continue to evolve over the next 20-30 years.

Resiliency Screen Analysis (JAN-MAY 2022)

Number In-Processed	Number Screened
2929	2848

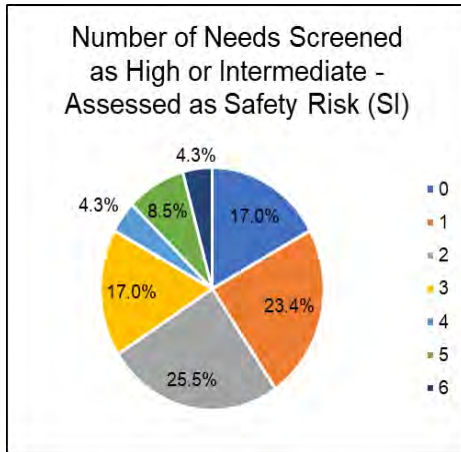


BLUF: 47 SMs identified for elevated risk for self-harm and 4 at elevated risk for harm to others. Two-thirds of those at risk for self-harm screened at higher needs in one to three categories. Three of the top four areas where SMs assessed as higher levels of need fall within a H2F Readiness domain.



	Social Connections	Relationship Stress	Financial Stress	Legal Stress	Health Stress	PCS Problems	Other Stressors	Spirituality	Sleep	Substance Use
Social Connections	239	50	17	5	34	18	5	81	98	22
Relationship Stress		168	31	15	42	23	8	41	75	16
Financial Stress			111	12	25	26	6	25	40	11
Legal Stress				37	7	6	3	6	15	3
Health Stress					252	27	14	61	97	15
PCS Problems						87	6	17	32	5
Other Stressors							43	6	14	3
Spirituality								538	142	40
Sleep									567	34
Substance Use										133

Grade Band	Top Needs
Overall	Sleep, Spirituality, Health Stress, Social Connections
Enlisted	Spirituality, Sleep, Social Connections, Health Stress
Jr. NCO	Sleep, Spirituality, Health Stress, Social Connections
Sr. NCO	Sleep, Health Stress, Spirituality, Social Connections
Warrant	Spirituality, Sleep, Social Connections, Health Stress
Company Grade	Spirituality, Sleep, Health Stress, Substance Abuse
Field Grade	Sleep, Health Stress, Substance Abuse



SI Risk	Social Connections	Relationship Stress	Financial Stress	Legal Stress	Health Stress	PCS Problems	Other Stressors	Spirituality	Sleep	Substance Use
Social Connections	16	6	3	1	8	1	0	8	11	1
Relationship Stress		10	3	1	4	2	1	5	7	0
Financial Stress			4	0	4	1	0	3	4	0
Legal Stress				2	1	1	1	1	2	0
Health Stress					17	1	0	10	15	0
PCS Problems						2	1	1	2	0
Other Stressors							1	0	1	0
Spirituality								20	17	0
Sleep									32	0
Substance Use										1



Holistic Health and Fitness (H2F) Implementation

People

Increase Quality of Life

Lethality

Increase Operational Readiness

The Future

Increase Operational Longevity



Holistic Health and Fitness (H2F) System

Philosophy: The Readiness Paradigm



Are your Soldiers prepared to Deploy, Fight, and Win?

- High levels of Physical and Non-Physical Skills
- High levels of Technical/Tactical Proficiency
- Rugged Durability

Do your Soldiers have the Specific Skills required for Operational Readiness?

- MOS Specific Physical Preparedness
- Cognitive Performance Strategies shifting towards deployment
- MOS/METL Specific Technical/Tactical Skills

Do your Soldiers have the General Skills required for Operational Readiness?

- Performance values exceeding minimum requirements
- Actionable knowledge of all Readiness Domains (Physical, Nutrition, Sleep, Mental, Spiritual)
- Warrior Tasks and Battle Drills

Are your Soldiers healthy?

- Injury and illness free
- Meeting minimum health & fitness standards
- Psychosocial health assessment data
- Administrative metrics

Holistic Health and Fitness (H2F) System

Methodology: Readiness, Longevity, and Quality of Life Programs

People First

Special Conditioning Programs

Restorative programs intended to facilitate an Accelerated Return to Duty

Reconditioning Physical Readiness Training

Training and Testing Improvement Programs

Army Body Composition Program

Pregnancy and Postpartum Physical Training

New Arrival Onboarding Program

2 Day event with introduction to Soldier resources, orientation to H2F, physical readiness & resiliency screenings, and initial H2F training

H2F Topics include:

- Sleep Hygiene, Tactical Mindset/Mindfulness Training, Injury Mitigation, Healthy Fueling Options
- Basic Movement Patterns Instruction and Screening
- Psychosocial Resiliency Screening



Winning Matters

Field Performance Programs

Comprehensive physical and non-physical training systems, designed for austere environment implementation, consisting of Programs, Leader Training, and Material Distribution.

Strength and Conditioning: Field PRT programs w/ and w/o GiB availability

Injury Control: MSK Evaluation/Treatment Guides for Medics and standardized MSK Class VIII "Injury Control Kit"

Mental/Sleep Readiness: Field Sleep and Focus/Attention Strategies

Nutritional Readiness: Field Fueling Strategies

H2F Facilitators Course

48-hour Human Performance Course, consisting of academic and hands-on instruction in Exercise Science topics. Directed towards extending the reach of the H2F Human Performance Team and facilitating implementation of the H2F system at all echelons

Topics include:

Basic human movement patterns, progressions/regressions/modifications, energy systems, fundamentals of coaching, leading group PRT, facility/equipment, basic programming

Holistic Health and Fitness (H2F) System

Return on Investment: Medical Metrics

Criterion	Approved Measure of Effectiveness	Method or Source to Measure	*Proposed* Measure of Performance	Description
Deployable/Readiness MRC3	% by unit with MRC3	MODS and EProfile - USARIEM	% by unit that have at least 1 H2F touchpoint per week	Units with H2F teams will see long-term increases in unit deployability and readiness of Soldiers. (Integrated Training Periodization)
Attrition due to Injury	# of initiation/referral for medical boards	TRANSPROC and EProfile - USARIEM	Pending	A training program with professional oversight will decrease the number and severity of injuries. Will take 2 years to measure. Establish baseline.
Limited Duty Profiles (injuries receiving a profile only)	% of Soldiers with limited duty profiles > 30 days	EProfile - USARIEM	% of unit special conditioning (SC) population attending respective program (SC Utilization)	The number of Soldiers on profile for musculoskeletal injuries and behavioral health issues may increase initially due to easier access to care; anticipate the amount of time that Soldiers are on profile should decrease. (Unit Special Conditioning Programs)
Permanent Profiles (P3 and P4 non-deployable only)	% of Soldiers receiving permanent profiles	Eprofile - USARIEM	Pending	Number of Soldiers receiving permanent profiles for injuries and behavioral health issues should decrease. H2F will not change an existing permanent profile. ~1 year to measure.
Medical Referral to Network (Musculoskeletal/ Behavioral Health)	# of Soldiers needing purchased care	Military Health System Data Repository – USARIEM/MEDCOM	Pending	The increase in access to specialized care will decrease the need for local MTF to refer Soldiers to the network due to lack of appointments. Will take ~1 year of data to measure.
Medical Cost Avoidance (Musculoskeletal/ Behavioral Health)	medical cost avoidance due to health care (\$)	Military Health System Data Repository – USARIEM/MEDCOM	Pending	Expect a decrease in medical expenses over the course of a year. Will take ~1 year to measure.
Suicides	# of Suicides attempts	DoD Suicide Event Report - USARIEM	% of Soldiers that have conducted Resiliency Screen within 30 days of arrival and annually thereafter	Units with H2F may have a decrease rate of suicides, attempts; lengthy time to confirm due to duration of investigation. (Resiliency Screen System)
Substance Abuse (alcohol/drugs) Tobacco Use	in # of Alcohol/Drug profiles and separations Tobacco use decrease	EProfile - USARIEM	Pending	Units with H2F may see a decrease in alcohol/drug profiles, but may see increase in self-referral. Tobacco use may decrease.

- = Medical Metric
- = Performance Metric
- = Administrative Metric
- = Program Metric



Holistic Health and Fitness (H2F) System

Return on Investment: Performance and Administrative Metrics

Criterion	Approved Measure of Effectiveness	Method or Source to Measure	*Proposed* Measure of Performance	Description
Weapons Qualification	# of Soldiers improving marksmanship	Unit records/DTMS – FORSCOM and USARIEM	Pending	Improvement in rifle marksmanship scores.
ACFT Performance	ACFT pass rates and improvement of scores by event	DTMS – USARIEM and FORSCOM	# of H2F-F certified Soldiers per unit	Expect to see increasing ACFT pass rates and improving individual ACFT event scores over the next 1 year. (H2F Facilitator Course)
Body Composition	# of Body Composition Failures	DTMS – USARIEM and FORSCOM	% of meal card holders utilizing Warrior Restaurant	Expect to see reduction in Soldiers who do not meet Army Body Composition Program Standards. (H2F Enterprise Menu)
Functional Training	# of Soldiers passing schools	ATRRS – TRADOC & USARIEM	% of unit attending special schools (SS) training (SS Utilization)	Higher graduation rates for Airborne, Air Assault, Pathfinder, SFAS, Master Gunner, Master Driver, Ranger School, EIB, ESB, EFMB, Sapper.
Reenlistment Rate (1st Term Soldiers)	# of 1 st Term Soldier reenlistments	Retain System - Army G1 Retention Office	Pending	Units with H2F personnel demonstrate more positive command climate and increased reenlistment rates. Current time snapshot.
First Term Soldier Attrition	# of 1 st Term Soldier attrit before initial enlistment contract	FORSCOM	% of Soldiers that have attended Green Platoon within first 90 days of arrival	Expect reduction in Soldiers that fail to complete initial enlistment (post IET). (Resiliency Screen System)
Initial Entry Attrition Rates	# of Soldiers that attrit IET and \$ per Soldier	ATRRS – TRADOC CIMT	Pending	Expect reduction in Soldiers that fail to complete Initial Entry Training.
Quality of Life	# of Soldiers that have improved quality of life	QOL Surveys – TRADOC CIMT IMCOM G9	Pending	Improved behaviors/attitudes/personal satisfaction for Soldiers in H2F-resourced brigades. Improved installation behaviors/attitudes/satisfaction.

- = Medical Metric
- = Performance Metric
- = Administrative Metric
- = Program Metric



Holistic Health and Fitness (H2F) System

Friction, Risk, and Opportunities

- Friction:
 - Combatting decades of a traditionally reactive human performance paradigm.
 - Creating an appropriate balance between Operational Readiness, Operational Longevity, and Overall Quality of Life.
 - BDE H2F assets being tasked to support higher level initiatives.
- Risk:
 - Continuity of operations on two fronts when BDE deploys.
 - Only 17% of H2F Staff (MIL) slated to deploy full time in support of BDE.
 - Hiring/staffing strategies
- Opportunities:
 - Prioritizing proactive training and education at echelon (BN SCCs, H2F-F Course, Special Conditioning Programs, 1-on-1 treatment)
 - CIV Deployment
 - Bridging the gap between the MIL, CIV agencies, academia, and the private sector IOT increase Soldier Readiness and Lethality.





People are our Business!!! Readiness is our Mission

RFCT Mission Statement

The Ready First Combat Team staff enables/supports the 1st Armored Division and assigned FORSCOM units in order to provide combatant commanders with Ready forces prepared to deploy to worldwide contingencies, conduct Decisive Action, sustain readiness, and accomplish assigned missions independently or as part of a larger force.

Ready 6 Guidance

1. Build an effective Remedial and Reconditioning program
2. Increase utilization and awareness of the program
3. Combat focused performance programming

H2F Enduring Mission Statement

H2F provides a holistic multi-disciplinary service through all five H2F readiness domains (Physical, Nutrition, Mental and Sleep, Spiritual) to ensure Soldier readiness and lethality for optimal performance on and off the battlefield.

H2F RFCT Guiding Principles

1. People are our business. Readiness is our Mission!!!
2. Make H2F the best part of every Soldier's day.
3. Tribe Pride!!! Sweep the Shed!!!

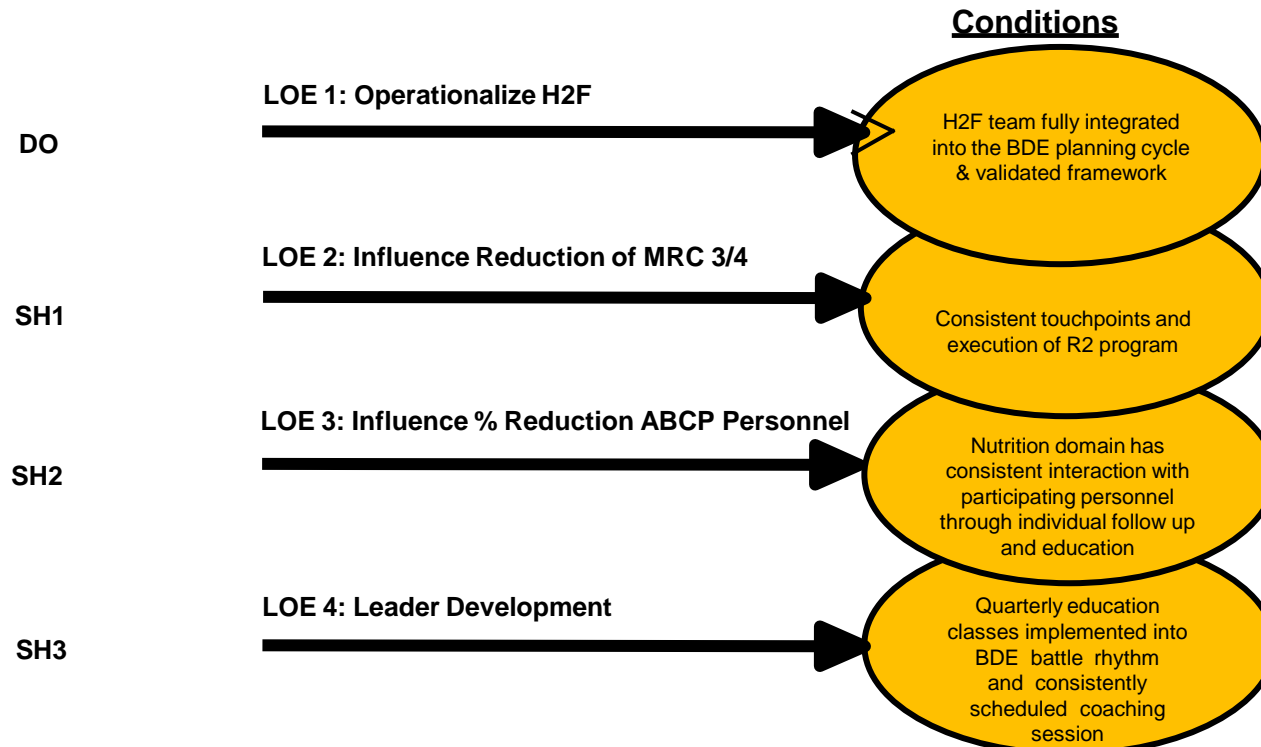


Operational Approach

Given the current time constraints to prepare for an upcoming deployment, limited space and resources, and H2F manning shortages, how does H2F provide consistent and effective services across all readiness domains to optimize Soldier readiness and lethality?

Current

- H2F 30% manning
- BCT Centralized
- 2-37 dedicated COF space and resources to facilitate services
- Sporadic scheduling with BNs
- Inconsistent performance touchpoints
- Inconsistent Leader understanding of H2F strategic purpose
- Lack of leader buy in & understanding



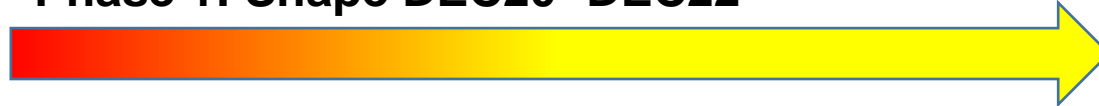
H2F Team provides effective and consistent integrated multi-disciplinary services that result in:

- Effective implementation process
- Increase in availability of deployable Soldier
- Reduction in # of personnel enrolled in the ABCP
- Increased leader understanding and utilization of the H2F program within the RFCT.

Strategic Vision

The Ready First Combat Team H2F effectively integrates as an enhancing capability into the BDE planning cycle and implements programs and services to positively impact readiness, affect culture change, and assist leaders at echelon to achieve training objectives.

Phase 1: Shape DEC20- DEC22



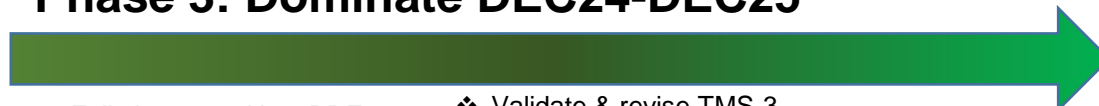
- ❖ Build relationships
- ❖ Understand the culture
- ❖ Gather resources
- ❖ Domain enhancing capabilities
- ❖ ROI 1 ★
- ❖ Build the framework
- ❖ Capture baseline data
- ❖ Assessment Framework
- ❖ Develop Talent Management Strategy (TMS)
- ❖ Foster institutional relationships

Phase 2: Seize the Initiative DEC22-DEC24



- ❖ Assess & revise RAP
- ❖ Domain enhancing capabilities
- ❖ Assess & revise TMS
- ❖ Build on institutional relationships
- ❖ Assess domain enhancing capabilities
- ❖ Integrate into BDE planning cycle
- ❖ Validate & revise TMS-2
- ❖ Validate Train the Trainer (T3) concept
- ❖ ROI 2 ★

Phase 3: Dominate DEC24-DEC25



- ❖ Fully integrated into BDE Ops
- ❖ Assess & revise RAP
- ❖ ROI 3 ★
- ❖ Validate & revise TMS-3

Conditions

- Task organized at BDE and BN level.
- Conducting training with 35% of BN personnel.
- Initial enhancing capabilities in IOC.
- Dedicated MFT courses available to H2F

- Actively involved in BDE planning cycle.
- T3 and facilitator concept as an established battle rhythm.
- Special Conditioning programs at minimal capacity.
- 1st Round of LDR turnover complete

- Established efficient and effective steady state ops.
- Sufficient data collection to accurately assess ROI of the last 5 years.
- Institutional collaboration established between - H2F and USAPFS
- 2nd round of LDR turnover complete

★ Assessment framework review

Operationalize H2F

- ❖ **H2F RAP:** Process by which the Ready First Team operationalizes H2F services within the BDE to capture baseline data and assess effectiveness of the programs and services.
- ❖ **Program Utilization:** Spreadsheet used to capture utilization within specific metrics to gain understanding of areas of interest within the BDE and allocate resources to areas of greatest need.
- ❖ **Visibook:** Scheduling software that allows the H2F team to manage access to care more effectively.
- ❖ **Assessment Framework:** Where do we want to go and are we going the right way?

Day 1 RAP 0630-0830

Admin: Complete questionnaires on SB

- ❖ Download SB App, General Intake, Sleep, Stress, Spiritual Assessment

Day 2 RAP 0630-0830

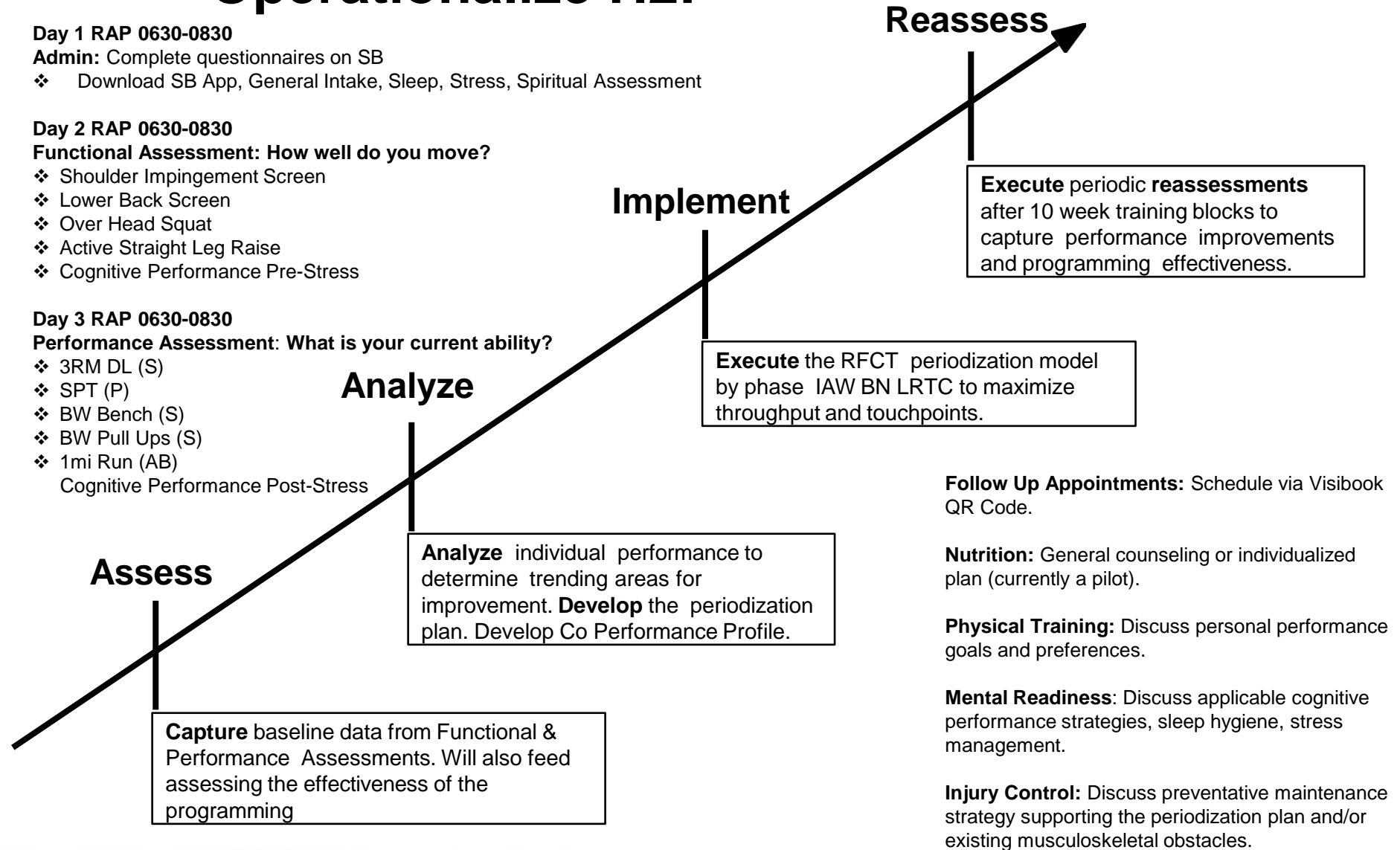
Functional Assessment: How well do you move?

- ❖ Shoulder Impingement Screen
- ❖ Lower Back Screen
- ❖ Over Head Squat
- ❖ Active Straight Leg Raise
- ❖ Cognitive Performance Pre-Stress

Day 3 RAP 0630-0830

Performance Assessment: What is your current ability?

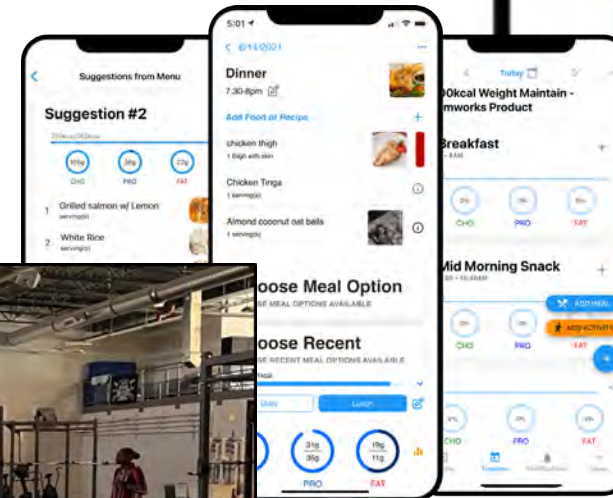
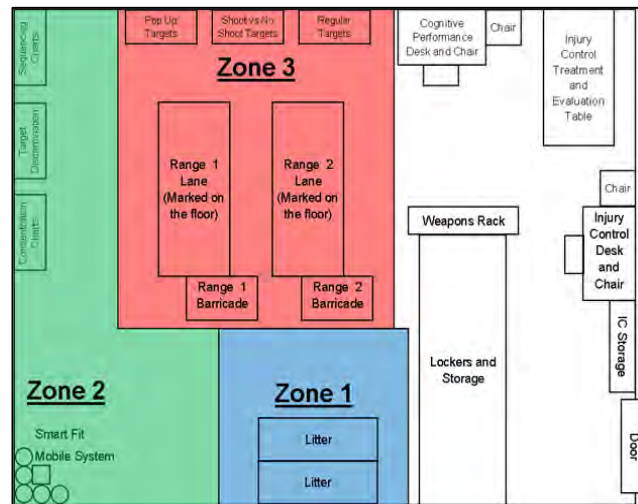
- ❖ 3RM DL (S)
- ❖ SPT (P)
- ❖ BW Bench (S)
- ❖ BW Pull Ups (S)
- ❖ 1mi Run (AB)
- Cognitive Performance Post-Stress



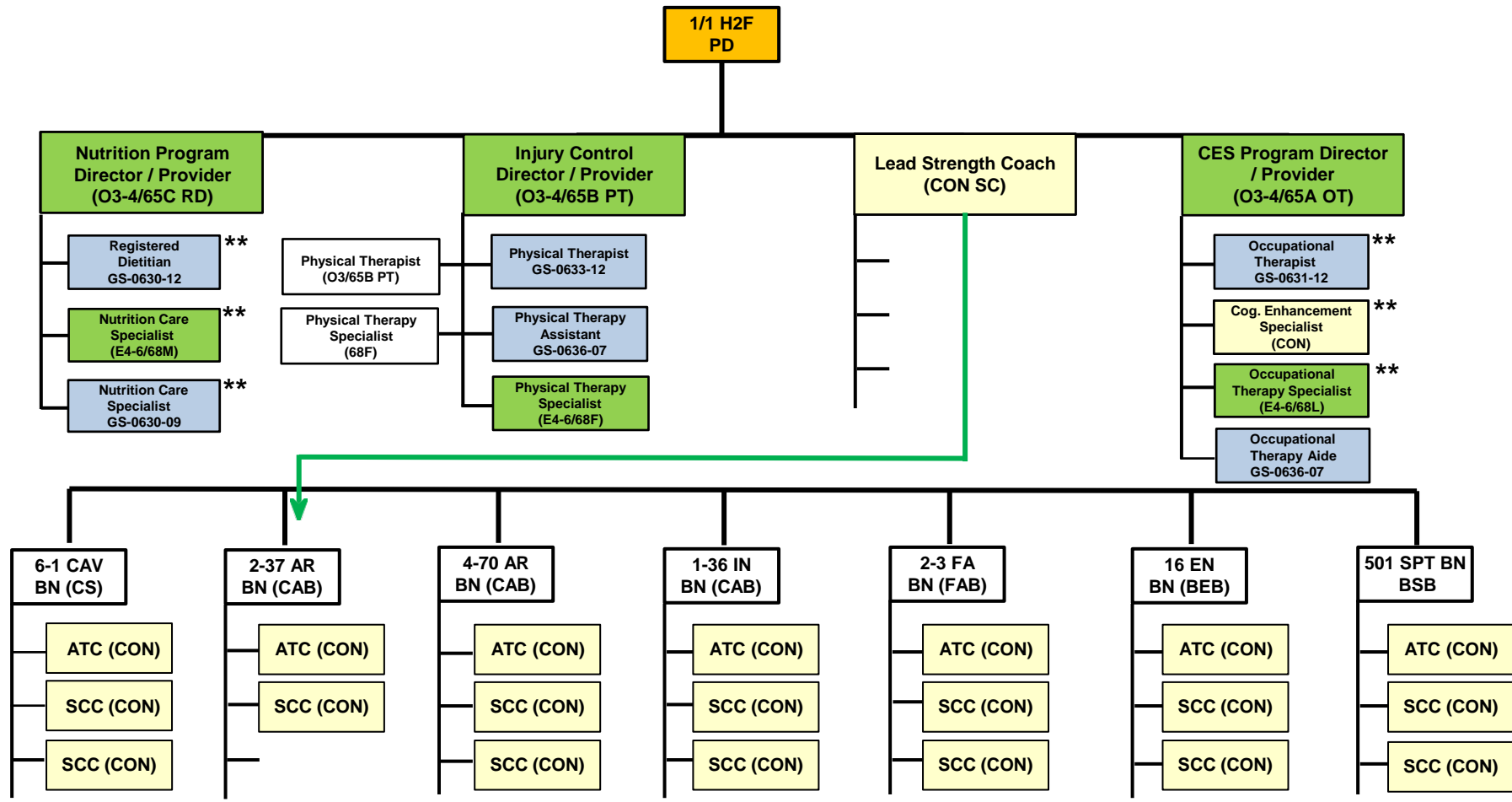
H2F Program Domain Enhancers

H2F Program Initiatives

- ❖ Smartabase (Leader Dashboards, AM Wellness Checks)
- ❖ Notemeal
- ❖ H2F-Facilitator Course
- ❖ Brain Enhancement Center (BEC)



H2F Task Organization (FOC)



— Lead SCC primary responsibility is to support the RFCT HHC and will support the assigned SCC to the BSB when needed

**Rotating schedule for specialty services to support the subordinate units on a weekly basis

■ Military, Deployable Capability (6)
 ■ Contractor-based Capability (22)
 ■ DAC, Deployable under AUG TDA (7)
 Already assigned to BSB in a BCT (2)



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QUESTIONS



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