

THE VISN 5 MIRECC MATTERS

An Electronic Publication of the VA Capitol Health Care Network
(VISN 5) Mental Illness Research, Education, and Clinical Center

October 20, 2006 Volume 7, No. 4

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MHICM STUDY

Submitted by Eric Slade, PhD

The VISN5 MIRECC is pleased to announce a new project funded by VA Health Services Research and Development Service. The title of the project is, "Access Criteria and Cost of Mental Health Intensive Case Management (MHICM)". The purpose is to evaluate potential alternatives to the "high hospital use" criterion, which is one of the standards currently applied to determine a patient's eligibility for MHICM services.

What is MHICM?

MHICM is an intensive service designed to support functional independence among veterans with serious mental illness (SMI). It provides patients with access to a virtual "hospital without walls" available 24- hours-a-day, 7-days-a-week, and which can travel to the patient wherever he/she is located. MHICM services are delivered by integrated, multidisciplinary teams. MHICM teams seek to deliver high quality services that provide intensive, flexible community support, improve health status, reduce psychiatric inpatient hospital use and dependency, improve community adjustment, functioning and quality of life, enhance satisfaction with services; and reduce treatment costs. At the end of Fiscal Year 2005, the VA had 92 MHICM teams in operation, and another eight were in development.

MHICM's High Hospital Use Criterion

In designing the VA's MHICM Program, the planners anticipated that, because of MHICM's relatively high cost per patient (currently around \$7,000) and its limited availability, MHICM could not be made available to all patients with SMI. Thus, in FY 2000, the VA stipulated that to qualify for MHICM, patients must have more than 30 psychiatric inpatient days or three or more psychiatric hospitalizations in the prior year. This became known as the MHICM "high hospital use" criterion.

At the time, the fiscal rationale for the high hospital use criterion was sound because MHICM, and the Assertive Community Treatment model on which MHICM is based, has been shown to substantially reduce hospital use among SMI patients who have a history of high hospital use. VA planners anticipated that MHICM would be affordable if access were limited to these patients, because the costs of MHICM would be largely or completely offset by reductions in their hospital use. Over time, however, the "high hospital use" criterion has become outdated. Since the standard was introduced, inpatient psychiatric utilization has declined dramatically. As a result, fewer of the SMI patients for whom MHICM services are intended meet the high hospital use criterion, and consequently, fewer can be considered for MHICM enrollment. This change threatens to cut off from MHICM many of the VA's most vulnerable patients.

The MHICM Study

To make the best decisions regarding access to MHICM services, the VA needs information about the alternatives to its current high hospital use criterion. Therefore, Dr. Eric Slade (Principal Investigator) and Dr. Lisa Dixon, VISN 5 MIRECC, and Drs. Marcia Valenstein and John McCarthy, Ann Arbor VA Serious Mental Illness Treatment Research and Evaluation Center (SMITREC), are conducting research to provide this information. Using data from the SMITREC's National Psychosis Registry and the Austin Automation Center, the MHICM study team is analyzing the effects of MHICM on treatment costs and services utilization, both overall and conditional on total numbers of inpatient days and hospitalizations occurring in the year prior to enrollment. We will then explore the implications of specific changes to the high hospital use criterion, such as requiring fewer prior inpatient days or basing eligibility on total prior year costs.

Family Forum: Implementing Family Services for Persons with SMI in the VA: Barriers, Facilitators, and Solutions

Submitted by Aaron Murray-Swank, PhD

Involving the family in care is widely recognized as a key component of high-quality treatment for persons with schizophrenia and other serious mental illnesses (SMI). However, there is often a troubling gap between best practice recommendations and routine care with respect to family involvement. The VA Mental Health Strategic Plan has placed a high priority on closing this critical gap.

The VISN 5 MIRECC was recently involved with organizing a national meeting focused on family services for veterans with SMI. "Family Forum: Implementing Family Services for Persons with SMI in the VA: Barriers, Facilitators, and Solutions" was held on September 18-19, 2006, at the Maritime Institute

in Linthicum, Maryland, and sponsored with support from VA Central Office. The Family Forum brought together 40 experts to share information on implementing family services within the VA, the barriers and facilitators to family programs, and novel innovations in service delivery. The goals of the family forum were to: (1) generate recommendations to advance the implementation and sustainability of current and developing family programs in the VA; (2) forge collaborative relationships between VISNs implementing family services; and (3) develop a research agenda which establishes the next questions to be answered in the field.

Participants in the family forum included key stakeholders involved in implementing and developing family services for veterans with SMI within the VA, including policymakers, administrators, researchers, clinicians, and family members. The lively forum engaged these key stakeholders in dialogue and problem-solving around critical issues with respect to implementing family services. Working relationships were forged amongst VA participants involved in implementing family services in many VISNs across the county. A number of immediate and longer-range goals were established, and a plan has been put into place to follow up on the productive work accomplished during this session.

Participants from the VISN 5 MIRECC included: **Lisa Dixon, MD, MPH; Alan Bellack, PhD, ABPP; Aaron Murray-Swank, PhD; Alicia Lucksted, PhD; and Amy Drapalski, PhD.** Drs. Dixon and Murray-Swank served on the planning committee and core faculty for this meeting.

WELCOME TO NEW MIRECC STAFF

Wendy Potts, MS, was recently hired at the Division of Services Research (DSR) as the Study Management Unit Director. Before joining DSR, she managed projects for HIV

positive individuals at the Maryland AIDS Administration. Prior to that, she worked for the MIRECC and Center for the Behavioral Treatment of Schizophrenia as a research assistant. We are pleased to have her return to the MIRECC family and know that she will make a significant contribution to DSR.

Welcome also to **Andrew Darchuk, MS**, who joins the MIRECC as a Research Assistant. Andrew received his Masters degree in clinical psychology from Ohio University and is nearing completion of his Ph.D. He completed his pre-doctoral internship at the Hazelden Foundation in Center City, MN, and has primary research and clinical interests in the field of addictions treatment and psychotherapy process research. He will be working as a group therapist for the

Behavioral Treatment of Drug Abuse in SPMI Patients study, and will be recruiting research participants for several MIRECC projects.

GOOD-BYE AND THANKS

Shyon Loo, MS, recently left the MIRECC to pursue graduate studies in England. Shyon was a Research Assistant for the MIRECC and the Center for the Behavioral Treatment of Schizophrenia, and conducted neuropsychological and psychosocial assessments for several research projects. We wish him the best with his new endeavors.

UPCOMING EVENTS

Monthly SGA Consultation Seminar

November 2, 2006 (first Thursday of every month)

1:00 - 2:00 PM

MIRECC conference room, BVA (6A-168)

or PPVA VTel conference room, Bldg 364

or call 800-767-1750, code 79846

There has been increasing concern, both within and outside of the VA, about the metabolic side effects of second generation antipsychotic medications (SGAs). VAMHCS clinicians are encouraged to bring their difficult or complicated SGA cases to this seminar for consultation and advice. All VA clinicians are invited to attend even if you don't have a case to present. Your consultants are **Dr. Robert Buchanan** from the MIRECC Psychopharmacology Clinic and Maryland Psychiatric Research Center, and **Dr. Julie Kreyenbuhl** from the MIRECC.

“Mental Illness: Pathways to Recovery” Family Conference

November 4, 2006

8:30 AM – 1:00 PM

Baltimore VAMC Auditorium

Veterans and their families/caregivers are invited to attend this half-day conference presented by the VISN 5 MIRECC. Alicia Lucksted, PhD, will present information about the recovery model and the impact of family/caregivers' involvement in the recovery process. Support services in both the VA and the community will be highlighted, and consumers who are involved with the National Alliance for the Mentally Ill (NAMI) will present a workshop entitled “In Our Own Voices”. In addition, Bette Stewart will present information about the NAMI “Family to Family” Program.

For more information, please contact Cynthia Clark, RNC, at Cynthia.clark2@med.va.gov or by phone at 410-605-7298.

Maryland Schizophrenia Conference

November 7, 2006
8:00 am - 4:30 pm
Martin's West
6817 Dogwood Road
Baltimore, MD

For more information, visit www.mdschizconf.org or call the Maryland Psychiatric Research Center at 410-402-7666.

Recovery-Oriented Small Grants Program

Application Deadline

December 1, 2006

The VISN 5 MIRECC offers a small grant mechanism to fund recovery-oriented clinical and educational innovations in response to the VA's Action Agenda to transform VA mental health services to a recovery model. This program especially encourages (but is not limited to) proposals such as: creating, adopting, or launching new recovery-oriented clinical, self-help, or related projects (or expanding existing ones to reach more veterans), new programs to educate staff, veterans, and/or family members of veterans about mental health recovery models, or specific recovery-oriented services/programs. The first round of applications were received September 1, 2005, and reflected a diversity of VA programs and innovative ideas.

For more information, or to receive an application, please contact Alicia Lucksted, PhD, MIRECC Recovery Coordinator, at Alicia.Lucksted@va.gov, 410-605-7451 or 410-706-3244.

Schizophrenia And Other Mental Illnesses: Involving The Family, Improving Care

This one hour, three-part (20 minutes each) DVD program highlights the importance of including families in the treatment of patients with schizophrenia and other mental illnesses. This program is highly recommended for families, patients, clinicians, policy makers and the general public. For a copy, contact Fran Broomall at fran.broomall@va.gov or 410-605-7000, x 4740.

VISIT OUR WEBSITE AT
<http://www.va.gov/VISN5mirecc>