



The VISN 2
Center of Excellence
at Canandaigua



Research on Suicide Prevention in the VA

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Two Centers in the VA that focus solely on Suicide Research - others also conducting research on suicide

- VISN 19 MIRECC in Denver, Colorado, established 10/01/04; Dr. Larry Adler, Director
- Center of Excellence at Canandaigua, New York, established 08/17/07; Dr. Kerry L. Knox, Director

Mission - VISN 19 MIRECC

The mission of the MIRECC is to study suicide with the goal of reducing suicidality in the Veteran population.

To carry out this mission members of the MIRECC:

- Mentor researchers in the area of suicidology
- Focus on cognitive and neurobiological underpinnings that may contribute to suicidality

Mission- VISN 19 MIRECC

- Develop evidence-based educational and clinical materials to identify and optimally treat Veterans who are suicidal
- Provide consultation regarding assessment and treatment planning for highly suicidal Veterans
- Collaborate with others in the study and treatment of Veterans who are at risk of suicide

Improving Veterans' Lives

We aim to reduce suicide by identifying the neuropsychological and neurobiological means by which executive dysfunction contributes to suicidality.

- Executive dysfunction involves problems with planning and executing tasks. Research suggests that this area of impairment is associated with suicidality.

- Executive dysfunction has been identified in individuals with the following conditions who are at increased risk for suicide:

- substance abuse (SA)
- traumatic brain injury (TBI)
- post traumatic stress disorder (PTSD)
- bipolar disorder
- schizophrenia

Nomenclature

- The Blue Ribbon Panel Workgroup recommended the adoption of “standard nomenclature/definition for suicide and suicide attempt that is consistent with other federal organizations.”
- The MIRECC Suicide & Self-Harm Classification (SSHCC) System was conceptualized across health disciplines with ongoing feedback from mental health professionals.

QUERI - Nomenclature

Dr. Brenner received a QUERI grant titled Implementation and Refinement of the Suicide Classification System.

- The study will further develop and adapt the MIRECC SSHC System and Clinical Tool for implementation in diverse VA treatment settings and assess its impact on healthcare system processes pertaining to the assessment and management of suicide risk.

Blister Packaging Medication

Dr. Gutierrez received funding from the MOMRP for a grant titled Blister Packaging Medication to Increase Treatment Adherence and Clinical Response: Impact on Suicide-Related Morbidity and Mortality.

- Medication overdoses account for substantial numbers of suicide-related behaviors, including in Veterans.
- The goal of this study is to determine if medication administration via blister packaging is associated with an increase in treatment adherence and a decrease in suicide-related overdoses among the high risk population of Veterans discharged from psychiatric inpatient units.

Suicide, TBI, and Substance Use Disorders

Dr. Yurgelun-Todd received funding for a Merit Review project titled Neurobiology of Suicide Risk in Traumatic Brain Injury and Substance Abuse.

- This study is aimed at identifying neurobiologic factors that are associated with neuropsychological function, suicidal ideation, and recovery in TBI patients with and without a substance abuse or dependence disorder.
- It is proposed that Veterans with both TBI and co-morbid substance abuse will have higher levels of cognitive dysfunction and that increased dysfunction will directly correlate with elevated risk for suicide.

Executive Dysfunction and Suicide in Psychiatric Outpatients and Inpatients: New Merit Award funded through ORD - RR&D Merit Review Award

Dr. Lisa Brenner received a new Merit Award funded through ORD- RR&D entitled: Executive Dysfunction and Suicide in Psychiatric Outpatients and Inpatients

- This study will assess decision making in the context of an interaction between suicide and TBI. Findings will also allow for exploratory analyses aimed at identifying associations between performance on measures of executive functioning and psychological distress. Executive functions are high-level abilities that influence more basic abilities like attention, memory and motor skills
- Results are expected to increased understanding regarding the relationship between executive dysfunction and suicide in those with TBI. Such results could directly impact assessment and intervention strategies.

Mission - Center of Excellence at Canandaigua

The mission of the Center of Excellence (COE) at Canandaigua is to investigate effectiveness of population based initiatives and clinical interventions to reduce Veteran deaths from suicide and to reduce the morbidity due to suicidal behaviors in Veterans.

To carry out this mission members of the COE:

- Study large population based initiatives in the VA
- Focus on clinical interventions for high risk Veterans
- Are developing a web-based repository of evidence based/best practices for suicide prevention in the VA, including new data from studies not yet published.

Research on Population Based Initiatives in the VA

- Evaluation of the effectiveness of VA's 24 hour Suicide Crisis Line
- Evaluation of the effectiveness of the National Suicide Prevention Coordinator Program
- Evaluation of the effectiveness of VA's Chat Line

Population Based National Initiatives in the VA

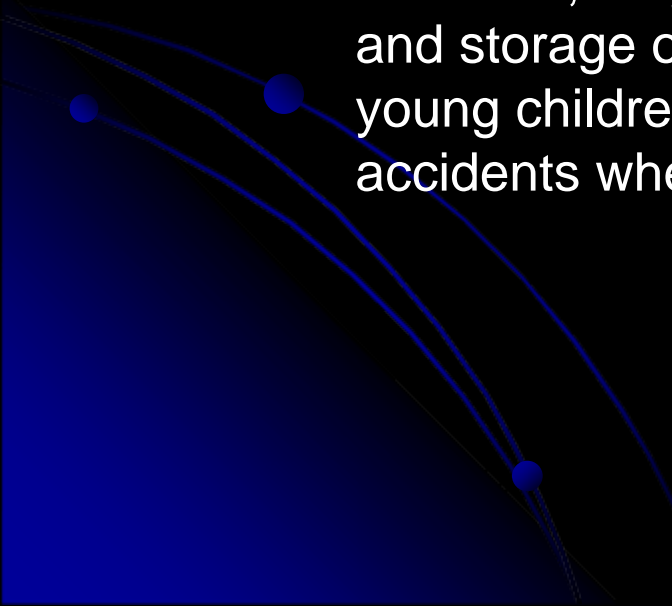
- Evaluation of the effectiveness of VA's Public Awareness Campaigns
- Dr. Bossarte and Dr. Knox of the COE are conducting an evaluation of VA's Public Health Awareness Campaigns in seven cities. As of December 17, 2009, over 5,000 surveys have been completed in 7 implementation cities and 4 control cities to capture community awareness, knowledge, and willingness to seek help from a crisis line prior to the campaigns. Veteran household were over-sampled. Post campaign survey work has begun in two implementation cities.

Population Based Initiatives in the VA

- Awareness of VA's 24 hour Suicide Crisis Line in these seven implementation and four control cities will be compared with utilization rates of mental health services in the local VAMC.
- Longitudinal cohort study planned to study the relationship between actual exposure to public health messages and long term outcomes

Population Based Initiatives in the VA

- **Project ChildSAFE**

- Gun safety is increasingly a high priority as more and more service members have returned from Operation Iraqi Freedom and Operation Enduring Freedom. No one can be better trained than these men and women in the care and use of firearms under conditions of deployment.
 - However, they may not have previous experience in the care and storage of guns in the home, and many of them have young children who all too often can experience gun accidents when they find unlocked firearms in their homes.
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Population Based Initiatives in the VA

- Project ChildSAFE

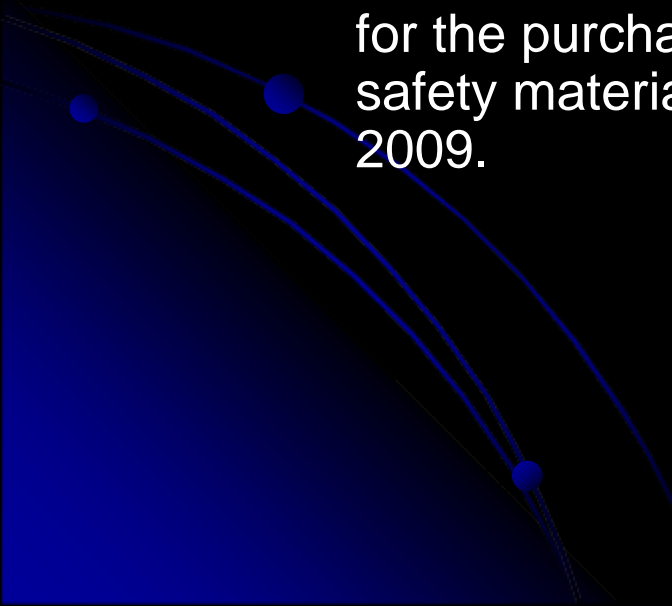
- Gun safety as a theme has been addressed by the Army through its Battlemind Training for returning troops. Firearm safety has been supported by the Department of Justice (DOJ) and by the shooting, hunting, and firearms industry through the development and dissemination of the National Shooting Sports Foundation's (NSSF) Project ChildSafe.'

- DOJ has provided support to numerous State and local police departments to distribute tens of millions of Project ChildSafe's gunlocks together with the accompanying firearm safety educational materials.

Population Based Initiatives in the VA

- Project ChildSAFE
 - Project ChildSafe is the nation's largest, most comprehensive firearm safety education program. It is administered by the National Shooting Sports Foundation and is funded by a U.S. Department of Justice grant, with additional funding from the firearms industry.
 - Since 2002, Project ChildSafe has distributed 35,000,000 gunlock safety kits in 50 states and the U.S. Territories, and formed partnerships with governors, lieutenant governors, mayors and approximately 15,000 law enforcement agencies. Additional information about Project ChildSafe can be found at www.projectchildsafe.org.

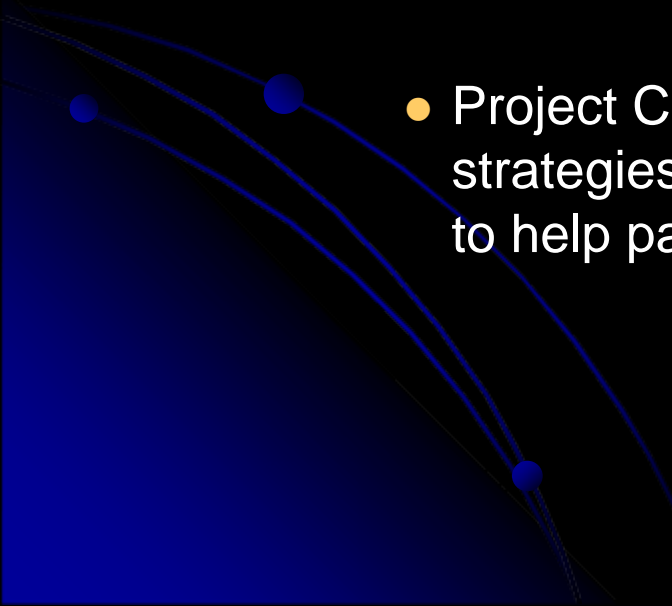
Population Based Initiatives in the VA

- Project ChildSAFE
 - In an Executive Decision Memo dated July 17, 2008, the Under Secretary for Health endorsed Project ChildSafe and required that the project be implemented in each VA Medical Center.
 - Since that time, VA has established collaboration with the National Shooting Sports Foundation, developed contracts for the purchase of materials, and begun to ship firearm safety materials to the Medical Centers as of December 15, 2009.
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Population Based Initiatives in the VA

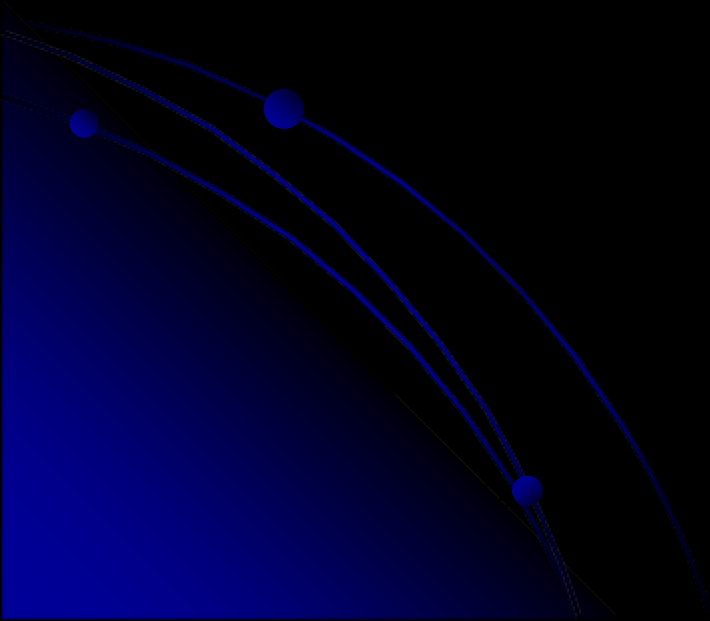
- Project ChildSAFE
 - Project ChildSafe materials being shipped to Medical Centers will include gun lock safety kits and additional firearm safety educational materials. Each kit includes a cable-style gun locking device and a safety brochure.
- Additional materials include:
 - NSSF's Firearms Responsibility in the Home brochures
 - NSSF's DVD containing the videos Firearms Safety Depends on You, MacGruff The Crime Dog on Gun Safety and It's Your Call: Playing It Safe Around Guns

Population Based Initiatives in the VA

- Project ChildSAFE
 - Additional materials include:
 - Project ChildSafe posters, decals and display boxes
 - Project ChildSafe Handbooks suggesting lock distribution strategies, sample press releases and other information to help partners run a successful program
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Population Based Initiatives in the VA

- Initial Research on VA's Family Firearm Safety Program:
 - Dr. Robert Bossarte: Descriptive Study of Veterans and their Families Who Accept Gunlocks During the First Year of Implementation ("early adopters")



Clinical Interventions Initiatives in the VA

Safety Planning Intervention: SAFE VET
Demonstration Project: Suicide
Assessment and Follow-up Engagement:
Veteran Emergency Treatment:

- o **Kerry L. Knox, Ph.D.**
- o **Glenn Currier, M.D.**
- o **Gregory K. Brown, Ph.D.**
- o **Barbara Stanley, Ph.D.**

Blue Ribbon Report

Encouraged the VA to reach out to community emergency departments to improve care for veterans at risk for suicide behavior, and recommended the development of “evidence-based interventions that can be used with veterans in both VA and community EDs...”

Blue Ribbon Work Group on Suicide Prevention in the Veteran Population (2008)

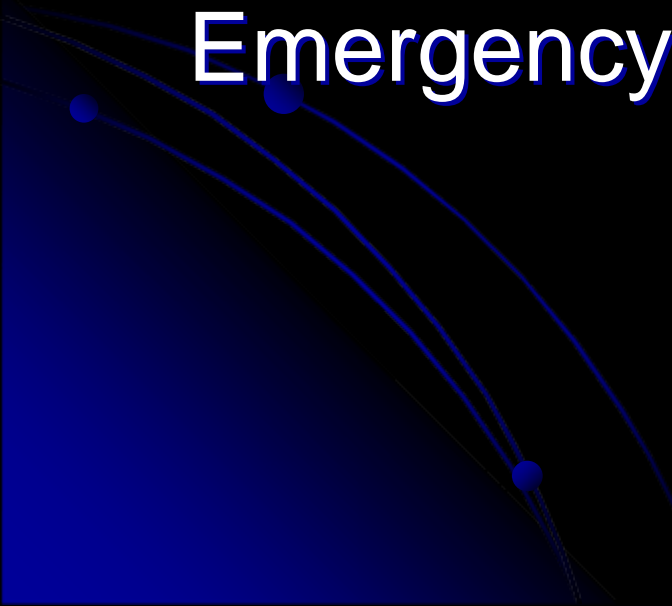


SAFE VET

- The Safe Vet project was created in response to this report
- The VA Central Office provided funding for the SAFE VET project
- Project Executive Committee: Kerry Knox (Project Director), Gregory K. Brown, Glenn Currier, Barbara Stanley

SAFE VET Vision

Develop a delivery system that will enhance the care of suicidal veterans in both community and VA Emergency Departments (EDs)

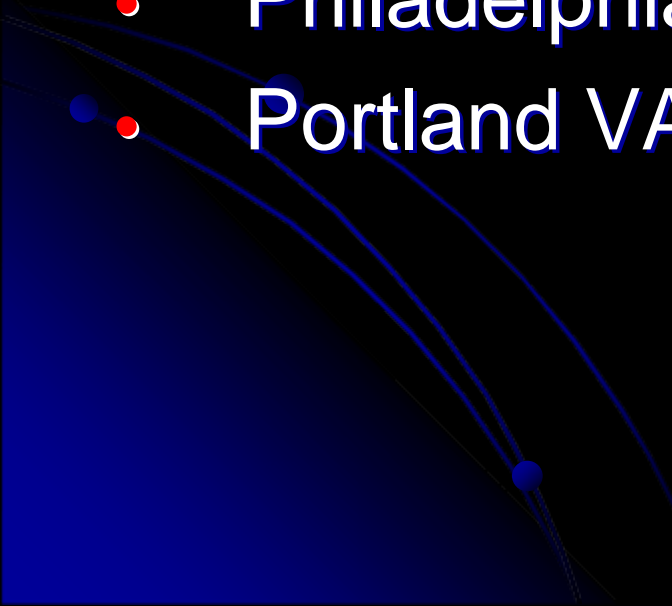


SAFE VET Goals


Designed to enhance care by:

- (1) Improving the identification of suicidal veterans in VA and Community EDs
- (2) Linking suicidal veterans to appropriate VA services
- (3) Providing a brief ED-based intervention to reduce suicide risk (safety planning intervention) and enhance retention in outpatient treatment
- (4) Ensuring that veterans receive appropriate follow-up care

Current SAFE VET Demonstration Sites

- Buffalo VAMC
 - Denver VAMC
 - Manhattan VAMC
 - Philadelphia VAMC
 - Portland VAMC
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Project Timeline

- SAFE VET approved in February 09 by the VA Office of Mental Health with a 2 year time horizon
 - Possibility of expansion as roll-out continues
 - This funding includes a program evaluation, but does not include a formal research component
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Collaboration with the Army and VISN 19 MIRECC

A Brief Intervention to Reduce Suicide Risk in Military Service Members and Veterans

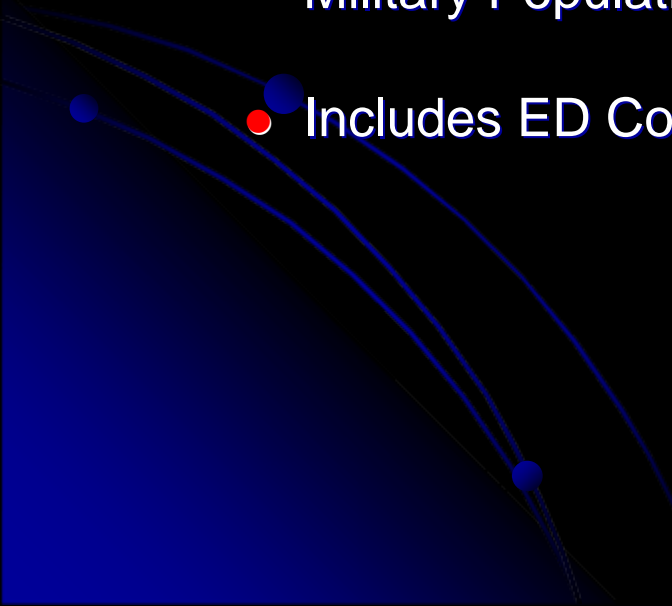
Suicide Prevention and Counseling Research (SPCR)

Funding Opportunity Number: W81XWH-08-MOMRP-SPCR2 (Military Operational
Medicine Research Program)

- Principal Investigators (alphabetical):
- Lisa Brenner, Ph.D., Gregory Brown, Ph.D. Glenn Currier, M.D., MPH, Marjan Holloway, Ph.D. , Kerry L. Knox, Ph.D., Barbara Stanley, Ph.D.
- Participating Institutions (alphabetical):
- Columbia University; University of Pennsylvania; University of Rochester; Uniformed Services University of the Health Sciences;
- VA VISN 2 Center of Excellence, Canandaigua;
- VA VISN 19 Mental Health and Research Clinical Center, Denver

“A Brief Intervention to Reduce Suicide Risk in Military Service Members and Veterans”

This Funding from the Military Operational Medicine Research Program (MOMRP) permits:

- Added Evaluation of Research Outcomes to SAFE VET
 - Expansion of the Use of the Safety Planning Intervention in Military Population (SAFE MIL)
 - Includes ED Control Sites
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“A Brief Intervention to Reduce Suicide Risk in Military Service Members and Veterans”

- Project spans the active Army and the VA by developing and adapting a single intervention for suicidal individuals that can be used while on active duty and then as a veteran
- Two projects:
 1. Adapts and evaluates Safety Planning Intervention for inpatients at WRAMC
 2. Provides research support to directly assess outcomes in SAFE VET
 3. SAFE VET includes an intensive follow-up strategy that will ensure continuity of care; effectiveness of this care will be evaluated longitudinally.

Areas of Clinical Research in the COE

- Areas of emphasis under study and/or interventions by the COE:
- Veterans who reattempt suicide
- Veterans with substance use disorders
- Veterans with PTSD and/or sleep disorders
- Women Veterans with a history of trauma
- Veterans identified as moderate risk for suicide
- Peer Support Programs

Areas of Clinical Research in the COE

- COE investigators are collaborating with SMITREC investigators in conducting a chart review study of attempted suicides in VISN 2 and VISN 11. The case review utilizes a comprehensive template to identify mental health and/or substance abuse conditions, chronic pain, and traumatic brain injury. Review of all attempts in VISN 2 completed, data analysis underway

Future Directions

- Emphasis on establishing an evidence based database on programs and interventions for suicide, specific to military and Veteran populations
 - Methodological challenges of research in real world environments
 - Critical need to move scientific evidence forward coupled with the urgency to take action to immediately address reducing deaths from suicide
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