



Communiqué

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Associate Director for Research Training

Patricia Dubbert, Ph.D.
Associate Director for Improving Clinical Care

Meet the SC MIRECC Researcher Geri Adler, Ph.D., M.S.W.

Q. What is your area of interest in mental health research and/or clinical practice?

I am a gerontologist interested in many aging-related topics including dementia care and gerontological social work practice.

Q. What active projects do you have going?

I am working on several projects. One is creating a guide for older Veterans on mental health services provided by the VA. Another is a partnership project with VISN 16 CBOCs, with the goal of fostering relationships with our rural clinics, by providing resources and products, as well as a list of services available from the SC MIRECC. This project also involves conducting a needs assessment to better understand CBOC staff needs. Finally, I am leading an educational effort to bring training to CBOC providers via a monthly Live Meeting presentation on topics pertinent to rural mental health. Down the road, I plan to begin work on an

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SC MIRECC Renewal Series: Improving Access by Using Technology for Distance Delivery of Clinical Services

For some time, the VA has worked to open more “portals” for delivering health and mental health services for Veterans, including establishing CBOCs and providing mental health services more broadly within VA medical centers, such as in primary care. Other approaches to improving access to care have been devised and tested by SC MIRECC investigators. Following are descriptions of projects that have focused on the use of technology to improve access to care and delivery of services that SC MIRECC investigators have worked on over the past five years.

Using Telemedicine to Deliver Treatment. (John Fortney, Ph.D.). Over the past decade, Dr. John Fortney has led a series of projects to provide mental health care through telemedicine. In an early VA Health Services Research & Development (HSR&D) funded study, Veterans were treated for depression in small rural VA CBOCs in VISN 16 by off-site depression care teams using telemedicine technologies. This multi-site randomized effectiveness trial (n=375) found that patients who received telemedicine services were more likely to respond to treatment, experience remission of symptoms, report larger gains

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Alzheimer's disease education initiative and other projects related to geriatric mental health.

Q What are the implications or potential benefits of your research?

I hope my research has practical implications for clinicians. For example, much of my background has been in dementia care, especially as it relates to driving decision-making. Becoming unable to drive has serious ramifications to quality of life and can lead to depression and social isolation. Not surprisingly, driving modification and cessation are difficult topics to broach with patients and their families. Since most of us will outlive our ability to drive, the issue needs to be addressed in a sensitive and pro-active manner. Just like retirement from work, we need to plan for when we can no longer drive.

Q How did you get started in this area of research?

My interest in gerontology has been long-standing. My grandparents raised me and my interest in helping older adults stems initially from that experience. Much of my career as either a clinician or researcher/academician has been in aging related work. I especially became interested in dementia care after joining the Minneapolis VA's Geriatric Research, Education & Clinical Center many years ago. As the clinic's social worker, one of my responsibilities was to talk with Veterans and their families about modifying and, more often, stopping driving. It was almost always an emotional and protracted discussion that I soon realized was not well understood or studied.

Q What person or experience had the most influence on your research career?

Being a Social Work Hartford Faculty Scholar during my stint as an associate professor at the University of South

Carolina certainly solidified my interest in aging. I got to meet a lot of influential people in the field, was mentored by Dr. Amy Horowitz at Fordham, sent to Stanford to improve my teaching skills, and received funding for dementia research. It was great!

Q You've recently taken over as the coordinator of the SC MIRECC Clinical Educator Grant program. What advice do you have for clinicians who are interested in applying for a grant?

I encourage clinicians to think about their practice and some of the interesting, innovative activities they are involved with that they think others could learn or benefit from. A Clinical Educator Grant gives clinicians an opportunity to share their expertise. VISN 16 mental health staff, student trainees in mental health or others who are collaborating with someone in mental health can apply. Here are a few tips -- First, as you are forming your general idea talk with co-workers, experts in the field, and SC MIRECC staff. Keep in mind that your project must fit the SC MIRECC mission of serving rural and other underserved Veterans. It is important that your idea is unique and not duplicative. Second, consider collaborating with a colleague. It can make the tasks more doable, help with meeting deadlines, and is often very satisfying. Finally, submit a well-written proposal. Ask a trusted colleague and/or SC MIRECC site leader to read it before you submit. Use any feedback they give you to revise your proposal because if they don't understand it we probably won't either! The call for applications has just been announced with an August 1 submission deadline. I am looking forward to a diverse group of proposals." (Editor's note--see page 6 for the call for applications.)

Q How can people get in touch with you if they have questions about your work?

My email address is Geri.Adler@va.gov and my phone number is 713-794-8660. ♦

ATTRIBUTION: ACKNOWLEDGEMENT OF MIRECC RESEARCH SUPPORT/EMPLOYMENT

SC MIRECC researchers and educators have a responsibility to ensure that the SC MIRECC receives proper credit for SC MIRECC-supported studies or projects in articles, presentations, interviews, and other professional activities in which the results of those projects are publicized or recognized. All investigators should credit the SC MIRECC if they receive either direct or indirect support from the SC MIRECC. For example, "This work was supported in part by the VA South Central (VISN 16) Mental Illness Research, Education, and Clinical Center." If you receive salary support from the SC MIRECC, you should list the SC MIRECC as an affiliation.

What Is New in SC MIRECC Education

Education is one of the primary functions of the SC MIRECC. It's in the name! The SC MIRECC Education Program serves as a conduit for new research findings to become routine clinical practice in the VA. We offer many educational opportunities to VISN 16 clinicians and mental health services that would not be available in Networks without a MIRECC. Our communication, training, educational research, and product development and dissemination activities have made a significant impact on mental health care in VISN 16 and nationally.

Communication

The SC MIRECC internet site and the monthly *Communiqué* newsletter you are reading now (<http://www.mirecc.va.gov/visn16/>) are our two principal means of communicating with our various stakeholders in VISN 16 – frontline clinicians, program managers, clinical leaders, and administrators – and outside our Network, such as our academic affiliates, consumer advocacy groups, mental health research centers, other MIRECCs, and VA Centers of Excellence. Now in its 14th year, each *Communiqué* issue has information about the SC MIRECC, summaries of new research findings, announcements about educational opportunities, descriptions of critical clinical issues (e.g., recovery), and profiles of investigators.

Our 5-year-old Website has an incredible reach. It receives tens of thousands of visits a year. The clinical education products are the most popular features of the Web site and are available to the public free of charge. Visitors can download print media, such as manuals and brochures, from the Web site. Some products, like the Parenting Toolkit (<http://www.mirecc.va.gov/VISN16/providers/VeteranParentingToolkit.asp>) and the Traumatic Brain Injury Brochures (<http://www.mirecc.va.gov/VISN16/providers/TUFF.asp>) are web-based and can only be accessed online. Electronic media, such as CDs and DVDs, must be ordered. SC MIRECC educational products were downloaded nearly 15,000 times in 2011 and over 31,000 times since 2007!

In 2010, we launched the Mental Health Practice, Research and Education Portal (MH PREP; <https://vaww.visn16.portal.va.gov/SiteDirectory/mhp/default.aspx>) for VA providers. The MH PREP is an intranet Web site specifically designed to facilitate communication with and

between VA community-based outpatient clinic (CBOC) providers. The MH PREP hosts information for CBOCs, such as announcements about educational programs and discussion forums. Though less familiar than the *Communiqué*, use of the MH PREP is growing with over 500 users.

Training

We have always tried to provide training that benefits mental health clinicians across VISN 16. Currently, we are offering a 5-week, web-based course on motivational enhancement therapy (MET) for non-licensed substance use providers (e.g., addiction therapists, rehabilitation counselors, professional counselors, and nurses). This is a rare opportunity for non-licensed providers to participate in training. The MET course is hosted by the Brown University Center for Addiction and Alcohol Studies Distance Learning Program. The first class of 50 providers just started. A second class begins at the end of June. We are also supporting a new web-based *Working with Couples* program, which was developed by Drs. Michelle Sherman, Michael Kauth, Ursula Bowling, and Alan Doerman. About 50 clinicians are currently evaluating this 6-module program. After they finish reviewing the evaluation data and making program revisions, *Working with Couples* will be available online, free of charge.

We host a monthly continuing education program, the *CBOC Mental Health Rounds*, on the second Wednesday of the month at 8:00 a.m. CT. This program is broadcast through Microsoft Live Meeting and by telephone. Topics focus on clinical issues relevant to CBOCs, although mental health providers at all VISN 16 facilities can participate. Participants earn one hour of free continuing education credit. Currently, we are exploring how to expand the program to other VISNs, starting with VISN 6.



Michael Kauth, Ph.D.

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Educational Research

Early on, SC MIRECC education programs were largely didactic. While didactic programs are useful for conveying information and increasing knowledge, we quickly learned that knowledge alone does not lead to significant and sustained changes in clinical practice. As a result, we focused more attention on skills training and follow-up support for adoption of the new skills. We were one of the first MIRECCs to use and report on incorporating implementation strategies in training efforts (Sullivan, Blevins, & Kauth, 2008). After successfully using implementation strategies in a psychosocial rehabilitation skills training, we applied these same strategies to adoption of cognitive behavioral therapy (CBT) in 20 clinics (Kauth, Sullivan, Blevins, Cully, Said, Teasdale, & Landes, 2010). We are currently using these strategies to promote rapid implementation of telemental health for PTSD at VISN 16 CBOCs.

Product Development and Dissemination

The Clinical Educator Grants Program is one of the primary ways that we develop new educational products. Frontline providers can apply for small amounts of funding (up to \$10,000 for multi-site projects) to develop innovative and exportable clinical education products that are consistent with the SC MIRECC mission. More than 100 clinicians have been awarded these grants over the years and have produced many excellent products (available at <http://www.mirecc.va.gov/VISN16/clinicalEducationProducts.asp>). One such clinician, Dr. Wright Williams at the Houston VA, created a DVD that archived the stories of ex-prisoners of war (POWs) with whom he had worked. With a goal of inspiring hope in returning Veterans, many of them dealing with PTSD, Dr. Williams used his \$5,000 grant to work with a very talented (and generous) videographer and several motivated ex-POWs to produce an incredibly moving DVD called *Resilience to Trauma*. We have distributed hundreds of these DVDs to clinicians, Veterans, and family members of Veterans.

The key to obtaining a Clinical Educator Grant is to work

closely with your nearest SC MIRECC site leader in Houston, Little Rock, New Orleans, or Oklahoma City (visit <http://www.mirecc.va.gov/VISN16/personnel.asp> for more information). You can also work with someone in the SC MIRECC Education Core (email Geri.Adler@va.gov for more information). See page 6 to read about the 2013 call for applications.

Outside of the Clinical Educator Grant program, we develop products to fit various clinician and consumer needs. For example, we created a readable, visually engaging, four-color brochure called the *Guide to VA Mental Health Services* for Veterans and their family members. The *Guide* describes policy requirements for mental health services at all VA facilities and is available at http://www.mirecc.va.gov/MIRECC/VISN16/docs/Guide_to_VA_Mental_Health_Srvcs_FINAL12-20-10.pdf, where it has been downloaded more than 5,000 times. We have also distributed more than 7,000 hard copies of the *Guide* to VA medical centers, CBOCs, Veteran Service Organizations, mental health advocacy groups, mental health professional organizations, and state Veteran organizations. The *Guide* has been our most popular educational product. We are currently revising the *Guide* to reflect updated VA policy and creating a version for older Veterans.

The SC MIRECC Education Program is broad and dynamic. We have one of the strongest Education Programs of any MIRECC, for which I am enormously proud. More importantly, we are making a difference in the kind, and quality, of mental health care delivered in VISN 16 and that, I believe, is making a difference in the mental health outcomes of the Veterans we serve.

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Attention all VA mental health providers!

Visit the VISN 16 Mental Health Practice, Research and Education Portal (MH PREP) to interact with other mental health providers about clinical care issues, access educational products and services, and discover the latest continuing education opportunities. The MH PREP is accessible from a VA computer at <https://vaww.visn16.portal.va.gov/SiteDirectory/mhp/default.aspx>. ♦

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in mental health status and health-related quality of life, and report higher satisfaction with depression care (Fortney, Pyne, Edlund, Williams, Robinson, Mittal, et al. 2007; Deen, Fortney, Pyne, 2011). A follow-up National Institute for Mental Health (NIMH) funded study (n=364) conducted at Federally Qualified Health Centers in Arkansas found that patients who received telemedicine-based care (with off-site support from a telephone depression care manager, telephone pharmacist, tele-psychiatrist, and tele-psychologist) had similar results. Recently, Dr. Fortney began a HSR&D-funded project to evaluate the effectiveness of telemedicine-based collaborative care for Veterans with PTSD who are treated at CBOCs in VISN 16 and VISN 22 (n=265). Finally, Dr. Fortney has received a Research Infrastructure for Services Program grant from NIMH to continue his work in adapting evidence based mental health practices for rural Federally Qualified Health Centers.

Home-based Telemental Health (Kristen Sorocco, Ph.D.). This SC MIRECC funded project evaluates the feasibility of implementing the VA's Oregon Rural Telemental Health project in VISN 16. The Oregon project successfully piloted use of inexpensive webcams and commercial encryption software on Veterans' home computers to deliver psychotherapy services.

Prolonged Exposure Therapy via Smartphone (C. Laurel Franklin, Ph.D.). This ongoing SC MIRECC pilot study is testing the feasibility of using the video conferencing capability of smartphones to deliver prolonged exposure therapy to Veterans. In addition to providing therapy in a location that is more convenient to Veterans (e.g., home), use of smartphone's video conference capabilities also allows therapists to conduct exposure exercises with Veterans in avoided settings rather than "in vivo".

Stress Resilience Training for Deploying Soldiers (Jeffrey Pyne, M.D.). This Department of Defense-funded study seeks to identify objective pre-deployment predictors of post-deployment mental health outcomes and test two pre-deployment resiliency trainings. This study has completed pre-deployment assessments on 427 Virginia Army National Guard members, including biological responses to virtual reality environments; and has delivered two pre-deployment resiliency training interventions using (i) heart rate variability biofeedback training with a video game interface and (ii) computerized cognitive bias training.

StressEraser as adjunctive treatment for PTSD (Timothy Kimbrell, M.D. & Jeffrey Pyne, M.D.). This ongoing SC MIRECC pilot project is examining the feasibility of using the StressEraser as adjunctive treatment for PTSD among CBOC patients. A portable device designed to be used at home, the StressEraser measures the effects of breathing on the parasympathetic system and guides patients on how to use this information to remain calm.

Increasing Engagement with OIF/OEF Veterans (John Crilly, Ph.D.). This project, currently underway, has a text messaging component in which appointment reminders and supportive text messages are sent to Veterans who have had one visit to the VA.

Care management Smartphone App (John Fortney, Ph.D.). This ongoing pilot project is developing a smartphone application to automate many clinical activities traditionally delivered by a telephone care manager as part of the PCMH initiative. The MobileDSS application allows patients to monitor symptom severity, medication adherence and side effects and to transmit this information to their providers.

Maintenance therapy Smartphone App (Ellen Teng, Ph.D.). This ongoing SC MIRECC pilot project is developing a smartphone application to support maintenance therapy for patients completing intensive weekend CBT for panic disorder. Three modules are being developed for the smartphone application including psychoeducational materials, a set of coping strategies (e.g., breathing retraining, thought challenging, and exposure to situations exercises), and screens to help users track panic attacks and other anxiety related symptoms.

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ANNOUNCEMENTS

FY2013 Clinical Educator Grants Call for Applications

Do not miss your chance to submit a proposal for the FY2013 SC MIRECC Clinical Educator Grant program. These small grants (up to \$10,000 for multi-site projects) are designed to help clinicians develop innovative clinical education tools that benefit the mental health care of rural and other under-served Veterans. The SC MIRECC is especially interested in funding projects that involve collaborations between medical centers and community-based clinics.

Examples of past projects include a CD-ROM compendium of pain management information and tools for clinicians who treat Veterans with substance abuse, a manual to conduct psychoeducational workshops for returning Iraq and Afghanistan Veterans and their families about readjustment issues, and a DVD of ex-POWs telling their stories about internment and their struggle with PTSD symptoms and how they have managed to survive and thrive in their lives. The Clinical Educator Grants program has produced more than 30 excellent clinical education products that the SC MIRECC makes available to clinicians free of charge. Additional products can be found at <http://www.mirecc.va.gov/VISN16/clinicalEducationProducts.asp>.

If you have a great idea for an educational tool to improve care delivery, this may be the opportunity that you are looking for! **The deadline for submitting a proposal is August 1, 2012.** For more information about the Clinical Educator Grants, contact Dr. Geri Adler at Geri.Adler@va.gov or Dr. Michael Kauth at Michael.Kauth@va.gov.

- Download Application at <http://www.mirecc.va.gov/VISN16/docs/CEGApplication2013.pdf>.
- Download Example Application 1 at http://www.mirecc.va.gov/VISN16/docs/Sample_application_I.pdf.
- Download Example Application 2 at http://www.mirecc.va.gov/VISN16/docs/Sample_application_II.pdf. ♦

New Transgender Educational Resources SharePoint

Please visit the new transgender educational resource SharePoint. The site provides a range of information about transgender health care, including links to key VHA directives, guidelines for evaluation and prescription for cross-sex hormones, educational materials, PowerPoint toolkits to facilitate discussion in staff meetings, recommended articles, and selected non-VA links relevant to transgender health. This site is a product of the Transgender Training Workgroup, Patient Care Services. The Transgender Educational Resources SharePoint can be accessed only from a VA computer at <http://vaww.infoshare.va.gov/sites/pscclipro/trer/default.aspx>. ♦

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