Dr. Ellen Fischer Named SC MIRECC Assistant Director for Research

Please join us in congratulating Dr. Ellen Fischer on her selection as the SC MIRECC Assistant Director for Research. She joins Dr. Jeffrey Pyne, the SC MIRECC Associate Director for Research, in the leadership of the SC MIRECC Research Core.

Dr. Fischer received her MPA in health policy and planning from the New York University Graduate School of Public Administration and her doctorate in epidemiology from The Johns Hopkins University School of Hygiene and Public Health. She joined what is now the VA HSR&D Center for Mental Healthcare and Outcomes Research (CeMHOR) in 1991 as a Research Health Scientist and served as Associate Director from

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Q&A with a SC MIRECC Fellow

Interview with Chelsea Ratcliff, PhD Psychology Fellow in Houston, Texas

What do you like about doing research with Veterans?

Working in the VA not only provides the opportunity to learn from and improve the care of individual Veterans,
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1991-1997, and Interim Director from 1998-1999. Dr. Fischer was Associate Director of the Mental Health Quality Enhancement Research Initiative (MH QUERI; now known as the Behavioral Health QUERI) Coordinating Center in 1998, as well as Research Coordinator for MH QUERI and Director of the MH QUERI Coordinating Center in 1999.

Dr. Fischer also began her career at the University of Arkansas for Medical Sciences (UAMS) Department of Psychiatry and Behavioral Sciences in 1991 as Assistant Professor, becoming Associate Professor in 1997. In 2001, she joined the newly created UAMS College of Public Health, serving as founding Chair of the Department of Epidemiology from 2001-2006. An affiliate of the SC MIRECC since its inception in 1998, she was named the Director of the SC MIRECC Implementation, Design and Analysis Support Program (MIDAS) in 2007, a role in which she continues to serve. She has been a reviewer and project officer for observational studies for the SC MIRECC pilot studies program, stepping in as Acting Director for pilot studies in 2014 on the departure of then Research Director, Dr. John Fortney.

Dr. Fischer has a long history of externally funded research, and is currently Principal Investigator of the HSR&D study, “Tailoring Interventions for Rural Veterans: What We Need to Know.” She also serves as Chair of the Central Arkansas Veterans Healthcare System Institutional Review Board and has been a member of several VA and NIH study sections/research review groups.
Q&A with Dr. Ellen Fischer, the New SC MIRECC Assistant Director for Research

Q. What will your new position entail?

As Assistant Director for Research, I will continue to lead MIDAS, the SC MIRECC methods support team, and have primary responsibility for the pilot awards program. I also look forward to working with Dr. Pyne and the entire SC MIRECC team on the upcoming renewal proposal.

Q. Are there any people you would like to acknowledge or thank who have helped you build your career?

Immediate thanks go to Drs. Mark Kunik, Michael Kauth and Rick Owen for their enduring confidence and support. At this stage in my life and very long career, however, a full and honest answer to that question would take up several pages, and I would still run the risk of overlooking some of the many, many people who have provided invaluable guidance, support and friendship over the years.

Q. Is there anything you want our readers to know that I haven’t asked?

Both the SC MIRECC pilot program and MIDAS are great resources for SC MIRECC investigators at all stages of their careers, from fellowship through full professorship. Please spread the word and keep us in mind as you develop your research agendas.

Attribution: Acknowledgement of SC MIRECC Research Support/Employment

SC MIRECC researchers and educators have a responsibility to ensure 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 SC MIRECC if they receive either direct or indirect SC MIRECC support. For example, "This work was supported in part by the VA South Central Mental Illness Research, Education and Clinical Center." If you receive salary support from SC MIRECC, you should list SC MIRECC as an affiliation.
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but also provides the unique opportunity to study healthcare delivery within the nation’s largest integrated healthcare system. From both an individual level and a system level, the VA is an amazing context in which to conduct health and health services research.

**Q.** What would your dream research study be if funding weren’t an issue?

If funding were no issue, I’d love to examine the impact of a comprehensive, interdisciplinary “prehabilitation” program for Veterans facing treatment for cancer. In this “pie-in-the-sky” study, each patient in the treatment arm would receive a tailored prehab program based on his or her individual needs (e.g., brief psychotherapy, physical therapy, etc.) during the weeks preceding cancer treatment. Short and long-term outcomes would include patient-reported symptoms, health service use, and cost effectiveness. I believe a study like this could make a strong case for integrating preventive medicine and behavioral medicine into traditional healthcare.

**Q.** Where do you want to be in five years?

Ideally, I’ll be right here! (Well, perhaps just down the hall). I’d love to be conducting research, working with patients and providers to find practical ways to get mental health care integrated into traditional cancer care.
Clinical Education Product Highlight

Veteran Parenting Toolkit

Developed by Michelle Sherman, PhD, Ursula B. Bowling, PsyD, Jeffrey Anderson, PhD, and Karen Wyche, PhD

Being a parent can be one of the most rewarding, yet also stressful, roles in Veterans’ lives. Furthermore, parenthood can be dramatically affected by deployment(s), and Veterans from Iraq and Afghanistan are renegotiating many roles as they re-enter family life. Regardless of the child’s age, the Veteran has likely missed many months or even years of development and changes.

The Veteran Parenting Toolkit includes five sets of age-specific parenting materials for young Veteran parents and their partner. Each Toolkit addresses the following topics:

- Did you know? (Interesting facts about children this age)
- Cognitive, social and physical development
- Reconnecting with your child after deployment
• How to talk to your child about deployment
• Strengthening your relationship with your child
• Managing common behavioral challenges
• Red flags for concern
• Taking care of yourself as a parent

• Reconnecting with your partner after deployment and communication tips for couples
• Resource guide

Visit http://www.mirecc.va.gov/VISN16/providers/VeteranParentingToolkit.asp to access the Toolkit.

CBOC Mental Health Rounds

Imagery Rehearsal Therapy for Nightmares: Empirical Evidence and Novel Clinical Applications

VA mental health providers are invited to attend the next CBOC Mental Health Rounds session titled "Imagery Rehearsal Therapy for Nightmares: Empirical Evidence and Novel Clinical Applications," on Wednesday, August 10 at 8:00-9:00 am CT or Thursday, August 11 at 11:00-12:00 pm CT. This Microsoft Lync session will be presented by Michael R. Nadorff, PhD. At the conclusion of this educational program, learners will be able to:

1. Define nightmare disorder;
2. Discuss key features of nightmare disorder;
3. Describe the relationship between nightmares and mental health disorders; and
4. Explain the basic concepts of imagery rehearsal therapy.

Call 1-800-767-1750 and use access code 37009# to participate. Email Ashley.McDaniel@va.gov or call (501) 257-1223 for registration and continuing education credit information.
Recent SC MIRECC Publications

**Patient, Program, and System Barriers and Facilitators to Detoxification Services in the Veterans Health Administration: A Qualitative Study of Provider Perspectives**

Schultz, NR, Martinez, R, **Cucciare, MA**, & Timko, C

*Substance Use and Misuse, 51(10), 1330-1341*

Because substance use disorder (SUD) treatment is expanding, and detoxification (detox) is often the entry point to SUD treatment, it is critical to provide ready access to detox services. The purpose of the current study was to examine patient, program, and system barriers or facilitators to detox access within an integrated health care system with variable rates of detox utilization across facilities.

Inpatient and outpatient providers from 31 different US Veterans Health Administration detox programs were interviewed. Qualitative analyses identified six facilitators and 11 barriers to detox access. Facilitators included program staff and program characteristics such as encouragement and immediate access, as well as systemic cooperation and patient circumstances. Barriers to detox included programmatic and systemic problems, including lack of available detox services, program rules or admission requirements, funding shortages, stigma related to a SUD diagnosis or receiving detox services, and a deficiency of education and training. Other major barriers pertained to patients’ lack of motivation and competing responsibilities.

To improve detox access, health care settings should consider enhancing supportive relationships by emphasizing outreach, engagement, and rapport-building with patients, improving systemic communication and teamwork, educating patients on available detox services and the detox process, and addressing patient centered barriers such as resistance to detox or competing responsibilities. In addition, programs should consider open-door and immediate-admission policies. These approaches may improve detox access, which is important for increasing the likelihood of transitioning patients to SUD treatment, thus improving outcomes and reducing utilization of high-cost services.

**Other Publications**


Announcements

Dr. Eva Woodward Receives Pilot Study Funding from the VA Office of Health Equity

Please join us in congratulating Little Rock SC MIRECC Fellow Eva Woodward, PhD for being awarded a $30,000 pilot study grant from the VA Office of Health Equity to study racial minority Veterans’ perceptions of and experiences with new treatments for hepatitis C, HIV and comorbid mental health problems. The study will involve interviewing racial minority Veterans in rural Arkansas and Louisiana to identify their experiences and preferences for VA treatment for hepatitis C, HIV and mental health problems.

SC MIRECC Pilot Study Program Quarterly Application Deadline is October 3

We accept applications for the SC MIRECC Pilot Study Research Program four times a year: January 1, April 1, July 1, October 1, or the following Monday after a weekend. The next application deadline is October 3, 2016.

Generally, pilot study grants are less than $75,000. Investigators proposing multi-site studies may request additional funds. Study expenses must be justified and we welcome proposals with more modest budgets. All SC MIRECC core and affiliate faculty and fellows are eligible to apply. A SC MIRECC core or affiliate investigator must serve as co-principal investigator on trainee proposals (fellow, resident, or intern). For more information, contact Dr. Ellen Fischer at fischerellenp@uams.edu or (501) 257-1711. Visit http://www.mirecc.va.gov/visn16/research.asp to download the application.