

### VISN 16 South Central Mental Illness Research, Education, and Clinical Center (SC MIRECC)

### Overview

The South Central MIRECC was funded in 1998 and encompasses all or parts of four states: Arkansas, Louisiana, Mississippi, and Texas. The Center has anchor sites at three medical centers in Houston, Little Rock, and New Orleans. It is closely aligned with the VISN 16 Mental Health Product Line, which oversees the delivery of mental health care and the facility Mental Health Directors.

The South Central MIRECC is known for its strong education training programs and clinical services initiatives. In addition, the South Central MIRECC has expertise in conducting large-scale clinical trainings in evidence-based treatments and in implementing training (i.e., getting new skills into actual clinical practice). The South Central MIRECC also has a great deal of expertise in conducting health services research.

In 2007, the South Central MIRECC altered its theme to focus more on access to mental health care for rural Veterans, an important clinical priority. The South Central MIRECC is particularly well located and positioned to take on this challenge.

### Mission

The Center's mission is *"To promote equity in engagement, access, and quality of mental health care for Veterans facing barriers to care, especially rural Veterans."* The Center's organizational structure includes four main components: Research, Education, Improving Clinical Care, and Research Training.

### Research

South Central MIRECC investigators have extensive experience in research on rural mental health, distance delivery of mental health care via telemedicine, novel approaches to deliver mental health services in primary care settings, quality improvement interventions for older Veterans, dissemination and implementation of evidence-based practices, innovative treatment delivery for anxiety disorders, psycho-educational interventions for Veterans' families, and exercise and mental health.

### Education

CBOC clinicians nationwide participate in a monthly continuing education program led by the South Central MIRECC called the *CBOC Mental Health Rounds*. In addition, at the request of VISN 16 clinical leadership, the South Central MIRECC has conducted several large-scale trainings in evidence-based practices (EBPs) for providers, including training in motivational interviewing, dialectical behavior therapy, and cognitive behavioral therapy. The Center has explored various approaches to implementing and sustaining EBPs in VA clinical settings, including use of learning collaboratives and a strategy called facilitation. The Clinical Educator Grant program has produced over 40 clinical education tools by frontline clinicians.

### **Improving Clinical Care**

South Central MIRECC has worked closely with VISN 16 leadership to implement and evaluate evidence-based models of care that provide mental health treatment in primary care clinics at all eight medical centers and CBOCs (PCMHI). To improve access to VA mental health services, the Center has focused on improving access by

integrating mental health and physical health services and using technology for distance delivery of mental health care in CBOCs and in the home.

## **Research Training**

South Central MIRECC has two (2) two-year postdoctoral research fellowship programs for physicians and psychologists in Houston and Little Rock. In addition, the Training Residents in Psychiatry Scholarship (TRIPS) program is designed to attract psychiatrists (PGY-II residents) to research careers in VA. The Center periodically holds grant writing workshops to train others in successful grant writing techniques.

## **Selected Studies and Projects**

- A Computer Assisted Cognitive Behavioral Therapy Tool to Enhance Fidelity in CBOCs Modifies a computer-assisted CBT tool to meet the needs of community-based outpatient clinic (CBOC) mental health providers and Veterans, to evaluate the impact on providers' fidelity to the CBT model and clinical outcomes, and to assess how best to support future implementation.
- Effectiveness and Implementation of Brief Cognitive Behavioral Therapy in VA CBOCs Examines whether VA CBOC mental health clinicians, with training and support, can effectively administer a structured brief cognitive behavioral therapy (bCBT) intervention for Veterans with clinically elevated symptoms of depression.
- FLOW Clinical Demonstration Project Improves access to mental health services by facilitating the transition of Veterans enrolled in mental health clinics who are recovered and stable back to primary care.
- Interim and Final Evaluations of the Clay Hunt Suicide Prevention for American Veterans Act (Public Law 114-2), Clay Hunt Act, Sec. 5. Pilot Program on Community Outreach. These reports will include: (a) a full description of the peer support model implemented under the Clay Hunt SAV Act pilot program, participation data, and data pertaining to past and current mental health related hospitalizations and fatalities; (b) recommendations on implementing peer support networks throughout the VA; (c) whether the mental health resources made available under the pilot program for members of the reserve components of the Armed Forces is effective; and (d) a full description of the activities and effectiveness of community outreach coordinating teams under the pilot program, including partnerships that have been established with appropriate entities.
- Serving Rural Veterans Where They Live: Implementing VA Video to Home for Mental Health Treatment -Implements a VA Video program to increase access to mental health care in the home or place of work for underserved rural Veterans in three highly rural areas.
- Simulation Training for Evaluation and Management of Veterans at Risk for Suicide (STEMS). STEMS will improve the skills of providers, especially those in rural settings, with evaluation and management of Veterans at risk for suicide. Simulations will recreate real-life situations with Veterans experiencing suicidal thoughts. Completing the training will give providers needed competency and confidence while increasing Veterans' access to timely, life-saving interventions regardless of the location of the clinic.

## **Selected Publications**

- Cully, J. A., Stanley, M. A., Petersen, N. J., Hundt, N. E., Kauth, M. R., Naik, A. D., Sorocco, K., Sansgiry, S., Zeno, D., & Kunik, M. E. (2017). Delivery of brief cognitive behavioral therapy for medically ill patients in primary care: A pragmatic randomized clinical trial. *Journal of General Internal Medicine*, 32(9), 1014-1024.
- Fischer, E. P., McSweeney, J. C., & Wright, P. (2017). Identifying barriers to engagement in mental health care: Perspectives of rural veterans and providers. *Forum*, 6.
- Franklin, C. L., Walton, J. L., Raines, A. M., Chambliss, J., Corrigan, S., Cuccurullo, L. C., Petersen, N. J., & Thompson, K. E. (2017). Pilot study comparing telephone to in person delivery of CBT for trauma-related insomnia. *Journal of Telemedicine and Telecare*, 0, 1-7.

- Haynes, T. F., Cheney, A. M., Sullivan, J. G., Bryant-Moore, K., Curran, G. M., Olson, M., Cottoms, N., & Reaves, C. (2017) Addressing mental health needs: Perspectives from African Americans living in the rural South. *Psychiatric Services*, 68(6), 573-578.
- Kauth, M. R., Adler, G., McCandless, S. J., & Leopoulos, W. S. (2017). Embedding new clinical practices: The role of facilitation in enhancing web-based training for mental health providers. *Journal of Mental Health Training, Education and Practice*, 12(1), 24-32.
- Smith, T. L., Landes, S. J., Lester-Williams, K., Day, K. T., Batdorf, W., Brown, G. K., Trockel, M., Smith, B. N., Chard, K. M., Healy, E. T., & Weingardt, K. R. (2017). Developing alternative training delivery methods to improve psychotherapy implementation in the U.S. Department of Veterans Affairs. Training and Education in Professional Psychology.
- Waliski, A., Townsend, J. C., Matthieu, M. M., Edlund, C. N., Castro, M., & Kirchner, J. (2017). Training rural community leaders in suicide prevention: Operation S.A.V.E. outcomes. *Journal of Military and Government Counseling*, 5(2), 87-102.

# Leadership

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## Contact

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