The mission of the VISN 5 MIRECC is to support and enhance the recovery and community functioning of Veterans with serious mental illness (SMI). Our integrated programs of research, education, and clinical training and consultation focus on the development, evaluation, and implementation of recovery-oriented evidence-based treatments and services for these Veterans. For this issue, I am happy to provide a summary of FY18 accomplishments and highlights from across our integrated cores.

**Research.** Our commitment to putting recovery into practice centers around five areas of emphasis: Health and Wellness; Family-Oriented Services; Stigma; Psychopharmacology and Neurobiological Bases of Serious Mental Illness; and Treatment and Community Engagement. In FY18 our investigators were working on 12 VA IRB approved on-mission research projects and were in receipt of over $1,060,000 in external VHA research award funding. We also have three current VA Career Development Award (CDA) awardees. Finally, our investigators published 63 manuscripts in peer reviewed journals.

**Education.** Our MIRECC presented a workshop titled "Whole Health in Mental Health Care: Strategies and Resources" at multiple VISN5 locations including the Baltimore VAMC and Perry Point VAMC in Spring of 2018, and, most recently the Washington, D.C. VAMC in
Our MIRECC continued to deliver our Peer Specialist Webinar Series. Offered three times per year, these webinars provide continuing education to VA Peer Specialists nationally on topics related to recovery, evidence-based practice, and Veterans’ mental health. Each presentation offers strategies and tools that attendees can utilize in their work in a range of clinical contexts and settings.

**Clinical Training.** Our MIRECC oversees the VA national roll-out of Social Skills Training. In FY18 we held 18 trainings attended by more than 94 VA staff across multiple VISNs. We also held one SST Train-the-Trainer training for 6 new SST Regional Master Trainers from across multiple VISNs.

Our MIRECC also serves as the hub-site for the VA National Interprofessional Fellowship Program in Psychosocial Rehabilitation and Recovery Oriented Services. This multi-site fellowship program offers state-of-the-art, clinical training program that focuses on the theory and practice of psychosocial rehabilitation and recovery-oriented service. During the last training year, a total of 22 fellows completed the program. Since the fellowship’s inception, a total of 273 fellows have completed the program, with a majority accepting positions within the Department of Veterans Affairs upon completion of the fellowship.

**Consultation.** The VISN 5 MIRECC partnered with VISN 5 and local mental health leadership to conduct a suicide prevention needs assessment to better understand how suicide risk is assessed and addressed within VAMHCS clinical programs, to identify best practices in and potential challenges to assessing suicide risk, and to gain feedback on additional resources that would be helpful for providers in working with veterans at risk. A report summarizing findings and recommendations from the needs assessment was presented to facility and VISN leadership. We are also drafting a toolkit that could be used by other VISN 5 facilities to conduct a similar needs assessment at their home medical centers.

The VISN 5 MIRECC continues to provide consultation in support of local mental health program/leadership qualitative improvement initiatives and projects. Current projects include partnering with the Baltimore Psychosocial Rehabilitation and Recovery Center to develop and conduct a needs assessment to better understand ways the program
A VISN-5 MIRECC Recovery-Oriented Small Grant enabled a VISN 5 delegation of 15 Veterans, 2 VA Peer Support Specialists, and 3 other VA staff to take part in the international Alternatives 2018 Conference held at Catholic University in Washington, DC (July 29 to August 3, 2018) under the theme, “On Our Own, Transforming the Future Together.”

The National Coalition for Mental Health Recovery (the conference host) works to ensure that consumers/survivors have a major voice in the development and implementation of health care, mental health, and social policies at the state and national levels. They, along with the National Empowerment Center and the Veterans Mental Health Advisory Council, paved the way for an amazing day. Five hundred attendees from around the world gathered to share information, initiatives, and advocacy around treating and living with mental illness. The VISN 5 delegation included representatives from the Veterans Mental Health Advisory Council at the Washington DC VA Medical Center; the Maryland Mental Health Advisory representing the VISN 5 Collaboration of Councils; the VISN 5 MIRECC Veterans Advisory Panel, and VA staff members (Peer Support Specialists, Voluntary Services, and Recreational Therapy) from the DC VA Medical Center. Members of the VISN 5 delegation met and networked with people from around the globe living with mental health challenges. They learned about programs, organizations, and ways of managing mental illness; and engaged with current mental health policies and those that mental health consumers are advocating for. They also shared their own personal recovery stories and accounts of VA programs and practices that have helped along the way. Some said that the “best and most important part was meeting and relaxing with people who look like us” in terms life experience with mental illness.

Ms. Patricia Craig attended as part of the VISN 5 delegation. Ms. Craig is the DC Veterans Mental Health Advisory Council Chairperson, VISN 5 Collaboration of Councils Co-Chair, and an Army Veteran. She wrote: “Many nights, it was after 11:00pm when April and I left the campus headed for home. As we mingled and talked with others, they were surprised to learn [from us] that VA’s mental
practices such as acupuncture, yoga, tai chi, qigong, meditation, healthy eating and cooking classes, volunteering, gardening, group and individual whole health and wellness classes, and traditional arts and crafts opportunities to de-stress and manage emotional and mental challenges. Her artwork was a perfect example of work created during art therapy. Moreover, she was present to share the impact that this kind of treatment has made in her recovery. Also, we emphasized that it is readily offered to veterans living with a mental injury or illness. April, as well as the rest of our group, was proud to share with conference attendees the changes implemented throughout VA and at our respective VAs in the VISN.”

The VISN 5 delegation was also surprised to find they were almost the only attendees who self-identified as Veterans! They met only one other Veteran, from Massachusetts. They concluded that while diversity and inclusion were important themes of the Conference, more effort needs to be made to include the Veteran mental healthcare community. Conversations with attendees revealed that this was in part due to the widespread misunderstandings about VA mental health care mentioned above. Therefore, while delegation members loved learning about evidence-based and self-identified alternative self-care methods to add to their personal recovery toolboxes, they also were energized to share how the VA is leading the way in employing peer support specialists, as well as whole health practices and recovery-focused services.

Others also contributed to the delegation’s success. Ms. Dominika Polynice jumped in at the last minute to moderate the VISN 5 delegation’s workshop titled "Veterans Shaping the Future of Peer Support in the VA". Mr. Stephen Donnelly showed grace and enthusiasm running the mic from person to person who wanted to ask a question or make a comment. The presenters made a hugely positive impression on attendees, who were enthusiastic and receptive.

The VISN 5 delegation gained a trove of ideas and contacts during the conference, and it felt good to share with others important lessons learned along the recovery road. Going forward, the DC Mental Health Advisory Council and the VISN 5 Collaboration of Councils intend to serve a leading role in organizing next Alternatives conference scheduled for July 7-11, 2019.
The VA VISN 5 MIRECC Clinician Advisory Panel (CAP) brings together VA licensed independent practitioners as expert advisors to VISN 5 MIRECC personnel across our research, education and clinical cores. The Clinician Advisory Panel meets four times a year to inform the development and execution of specific research projects, the direction of future VA research, and/or future programming associated with our education and clinical cores.

Here we spotlight one of our clinician advisors, Chuck Weinberg. Chuck is from suburban Philadelphia, and came to the VA to work as the Local Recovery Coordinator at the Hershel Woody Williams VAMC in Huntington WV in 2007. He trained at William and Mary and UNC Chapel Hill, and is an LICSW and BCD in clinical social work. He has published articles in the Psychiatric Rehabilitation Journal, with the Recovery to Practice Initiative, at the Copeland Center, and at the National Empowerment Center.

Why did you join the MIRECC Clinician Advisory Panel? I joined the CAP to have the opportunity to learn from and offer input to VA’s best and brightest at the VISN 5 MIRECC, to continue to advocate for and improve our care for Veterans.

Tell us about a project or issue that you enjoyed advising on. I am currently advising on a VISN 5 MIRECC project which is exploring how to measure constructs consistent with Veteran identity, to more accurately target Whole Health messaging, to improve the care of Veterans, and help Veterans reach their valued life goals.

What is the most important thing/things to you about being a part of the Clinician Advisory Panel? The two most important things to me about being a part of the CAP is the ongoing potential for growth and learning by collaborating with MIRECC professionals, and the opportunity to have a voice and input into MIRECC related significant clinical mental health issues that affect Veterans.
Travaglini, L., E., Cosgrave, J., & Klingaman, E. A. (in press). Pain and Sleep Problems Predict Quality of Life for Veterans with Serious Mental Illness. Psychiatric Rehabilitation Journal. (included in special issue on Veterans). Poor sleep and pain are common in Veterans with serious mental illness (SMI), yet it is unclear how these may impact on dimensions of quality of life. As such, this study examined independent and additive contributions of sleep and pain difficulties on QoL among a sample of Veterans with SMI and insomnia. Participants were 57 Veterans with SMI and at least subthreshold insomnia (Insomnia Severity Index ≥ 8). Measures assessed sleep quality (Pittsburgh Sleep Quality Index), pain intensity (Pain Numeric Rating Scale, PNRS), pain interference (SF-12), and QoL (World Health Organization Quality of Life-BREF). Multivariate multiple regression analyses examined the effects of sleep quality and pain on QoL. Forty-one Veterans (71.9%) reported moderate-to-severe pain (PNRS ≥ 4). Poorer sleep quality was associated with greater pain interference and worse physical, emotional, and environmental QoL. Sleep quality, not pain, explained significant variance in environmental QoL (B=-2.30; 95% CI -4.16, -0.43). Pain interference, not sleep quality, explained significant variance in physical health-related QoL (B=-0.23; 95% CI –0.38, -0.08). Results reveal the importance of screening for insomnia and chronic pain among Veterans with SMI. For these Veterans who already struggle with daytime functioning, interventions such as integrated cognitive behavioral therapy for pain-related insomnia are warranted.

Muralidharan, A., Brown, C.H., Peer, J., Klingaman, E., Hack, S., Li, L., Walsh, M.B., Goldberg, R.W. (2019). Living Well: An Intervention to Improve Medical Illness Self-Management for Individuals with Serious Mental Illness. Psychiatric Services, 70(1), 19-25. Many adults with serious mental illness (SMI) exhibit significant medical illness burden and poor illness self-management. This study examined Living Well, a group-based illness self-management intervention for adults with SMI, co-facilitated by two providers, one who has lived experience with co-occurring mental health and medical conditions. Adults with SMI (N=242) were randomized to Living Well or an active control. Participants completed assessments of quality of life, health attitudes, self-management behaviors, and symptoms at baseline, post-treatment, and follow-up. Emergency room use was assessed via chart review. Mixed effects models examined group by time interactions on outcomes. In Living Well, compared to the control, there were greater improvements at post-treatment in mental health related quality of life, self-management self-efficacy, patient activation, internal health locus of control, behavioral/cognitive symptom management, and overall psychiatric symptoms, and at follow-up in physical activity related self-management, and relationship quality. There were no effects on emergency room use. The control group exhibited greater increases in physical health related quality of life at post-treatment. Significant group differences in self-management self-efficacy and behavioral/cognitive symptom management were maintained at follow-up. Compared to an active control, a peer co-facilitated illness self-management group was effective for improving quality of life and self-management self-efficacy in adults with SMI.
Our mission is to support recovery and enhance community functioning of Veterans with serious mental illness. Here we list some recent educational and research activities:

(1) Clinical Research Coordination Group (CRCWG) at the Washington DC VA Medical Center. The Washington DC VA Medical Center continues to host the Clinical Research Coordination Working Group (CRCWG). The mission of this group is to “foster a community of research professionals at the DC VA dedicated to exploring innovative care for our Veterans.” The main objectives of the Work Group are to help foster a community of research collaboration and to assist with the navigation of the day-to-day logistical activities when conducting clinical research. The group meets monthly to discuss a variety of topics or to host an educational topic of interest to local VA investigators. These meetings are casual and are meant to foster an open dialogue amongst investigators and their study staff. Towards the end of 2018, the group hosted David Maron, Lead Statistician at the Washington DC VA. He hosted a series of meetings to discuss basic statistics, power analyses, CDW data, and other related topics. In early 2019, the group hopes to cover many regulatory topics regarding research compliance. Other discussion topics include, but are not limited to: research recruitment, without-compensation appointments, IRB/R&D compliance and best practices, statistics, regulatory audits and many more. This group is open to any VA staff members interested in or currently involved in research at the Washington DC VA Medical Center. For more information, contact Barbara Schwartz, Ph.D. at Barbara.schwartz@va.gov.

(2) You can now follow the VISN 5 MIRECC on VA Pulse! While some of the site is still “under construction” we’ve already added a ton of great resources. You can learn a little bit more about our staff, find copies of the MIRECC Matters, learn about upcoming webinars/trainings, access intervention manuals, and so much more! Any VA employee can sign up to use VA Pulse.net. Follow us at https://www.vapulse.net/groups/visn-5-mirecc/pages/welcome.

(3) The MIRECC runs a bi-monthly Science Meeting (2nd and 4th Tuesday of the month, 12-1, at the MIRECC, VANTS 800-767-1750, 71129). Good news—we now have CEs available for the 2018-2019 series! We have some great presentations planned, including an update on outcomes from Dr. Richard Goldberg’s trial of Living Well, and a review of Dr. Melanie Bennett’s pilot study of a smoking cessa-
Learn about Current Research Studies at the VISN 5 MIRECC

The mission of the VISN 5 MIRECC is to help Veterans “put recovery into practice”. A number of investigators are conducting studies that are aimed at assisting Veterans in identifying, planning for, and achieving their personal recovery goals. These studies are recruiting participants who receive mental health services within the VA Maryland Healthcare System. Below are descriptions of two of them, with phone numbers to call if you or someone you know receives mental health services at the VA Maryland Healthcare System and would like to learn more.

Improving Negative Symptoms & Community Engagement in Veterans with Schizophrenia. Our team is looking for Veterans between the ages of 18-75 who have been diagnosed with Schizophrenia or Schizoaffective Disorder to evaluate a new intervention aimed at improving negative symptoms. Negative symptoms include things like having low energy to do things, not feeling pleasure when doing things, and difficulty socializing with other people. Participation includes four study interviews and group sessions that occur twice a week for 12 weeks. You will be paid for your participation. This study is being conducted by Melanie Bennett, Ph.D. at the Baltimore, Perry Point, and DC VA Medical Centers. Please call Kelly Lloyd at 410-637-1887 to see if you are eligible.

A number of investigators are conducting studies that are aimed at exploring mental illness risk factors as well as assisting Veterans in identifying, planning for, and achieving their personal recovery goals. Both approaches have many implications for mental health recovery. These studies are recruiting participants who receive mental health services within the VA Maryland Healthcare System. Below are descriptions of them, with phone numbers to call if you or someone you know receives mental health services within the VA Maryland Healthcare System and would like to learn more.

Toxoplasma gondii, the Kynurenine pathway, and Suicidal Behavior in Veterans. We are looking to recruit Veterans for a research study examining the link between suicide risk factors and brain molecules. We are looking for veterans who are: (1) between the ages of 18 and 65, (2) have no current substance abuse or dependence, and (3) are able to complete one blood draw and approximately 6 hours of questionnaires/interviews with study staff. Participants who complete all study procedures will be paid for their time. All study procedures are completely voluntary. Research is conducted under Dr. Teodor Postolache. If you or someone you know would like more information about this study, please contact Amanda Federline at 410-637-1433.
Family Support for Mental Health Recovery

Do you work with Veterans who have been diagnosed with a mental illness and want to offer resources to their family members on ways of assisting in the recovery process? This brochure provides tips, information and resources on how to support a loved one and at the same time consider self-care for the family member. If you would like to receive copies of this brochure to hand out, please contact Tracy Robertson, CPRS at 410-637-1522 or by email at Tracy.Robertson@va.gov. Thank you!

Monthly Psychopharmacology Case Conference

All VISN Clinicians are invited to attend this conference and to bring questions about a difficult or challenging psychopharmacology case. Note that the topic of the conference has been expanded from a focus only on metabolic side effects of antipsychotic medications to include all areas of psychopharmacology. Case Conference facilitators are Robert Buchanan, M.D., MIRECC investigator and Professor of Psychiatry at the UMB School of Medicine; Julie Kreyenbuhl, Pharm.D., Ph.D., MIRECC investigator and Associate Professor in the UMB Department of Psychiatry; and Neil Sandson, M.D., inpatient attending psychiatrist in the VAMHCS and MIRECC staff member. The case conference is held on the first Thursday of every month, 1:00 - 2:00 PM, 1-800-767-1750, code 79846. For more information, contact Julie Kreyenbuhl at Julie.Kreyenbuhl@va.gov.

Educational Webinar Series for Peer Specialists

The VISN 5 MIRECC hosts educational webinars throughout the year for VA Peer Specialists. Our next webinar, titled Brief Interventions with Veterans Needing Information on HIV and Hep C Treatment, will be held on February 27th, 1-2:30 pm. Veterans have a variety of health needs and concerns that support and guidance can help them to effectively address. Among these are the infectious diseases, HIV and Hepatitis C. Veterans may face a variety of obstacles with successfully managing these illnesses and getting the best treatment. Peer Specialists can increase their effectiveness as supports, and as knowledgeable guides to help Veterans navigate services and access resources, by learning about treatment resources for these illnesses, how to access them and how to talk with fellow Veterans in a confident and sensitive manner about treatment, so they can empower fellow Veterans toward optimal wellness. Our presenters will be Pamela Handelsman, Ph.D., Clinical Health Psychologist at the Baltimore VAMC & Meagan Graydon, Ph.D., a Post-doctoral Fellow at the Baltimore VAMC Infectious Disease Clinic. Stay tuned for information on Webinars coming in 2019!
MIRECC Staff Conduct Trainings in Evidence-Based Practices for Veterans with Serious Mental Illness

The mission of the VISN 5 MIRECC is to put recovery into practice. Our Clinical Core partners with clinical programs and staff at the VAMHCS, VISN, and national levels to support recovery-oriented and evidence-based clinical services for Veterans with mental illness. MIRECC investigators offer workshops to enrich the staff at your clinical program or provide training on an unmet clinical need. We have expertise in a range of topics related to mental health recovery. Topic areas include:
• Ending Self Stigma
• Promoting Community Integration
• Family and Mental Health Treatment
• Person-Centered Care
• Treating Substance Use Disorders
• Early Psychosis Services
• VA Peer Specialists and Peer-Delivered Interventions
Seminar length can be modified if needed. If you’re not in VISN 5, our investigators can make presentations remotely to VA programs anywhere in the country.
For more information, contact Anjana Muralidharan at Anjana.Muralidharan2@va.gov.

Staff Training to EASE Self-Stigma Among Veterans in Recovery

Self-Stigma is the harm caused when people start to define themselves by the stereotypes they are exposed to. It interferes greatly with wellness, recovery and treatment. EASE is a 90 minute program designed to be useful to mental health staff, of all disciplines, levels, and positions, to refresh our knowledge about stigma and its harmful effects and to learn practical strategies we can use to help the Veterans we work with be resilient in the face of common stigmatization of mental health problems. EASE strategies employ four principles, from which it gets its name: Education, Awareness, Shifting perspective, and Empowerment.
For more information and to access EASE training materials so you can deliver EASE yourself, go to http://www.mirecc.va.gov/visn5/training/ease.asp or contact the EASE Team at EA-SETeam@va.gov.

Learn about the Post-doctoral Fellowship at the VISN 5 MIRECC

The VA Advanced Fellowship Program in Mental Illness Research and Treatment at the VISN 5 MIRECC has one open post-doctoral allied health fellowship position (clinical psychology, counseling psychology, social work, nursing, pharmacy) and one open post-residency psychiatrist fellowship position each year. The goal of these two-year fellowships is to train psychologists and psychiatrists to become leading clinical researchers in the area of serious mental illness. Fellows develop independent programs of research on topics related to psychosocial treatment development and implementation of recovery-oriented services and engage in supervised clinical training, delivering clinical services in settings that serve Veterans with serious mental illness. Detailed information can be found on the national MIRECC website at http://www.mirecc.va.gov/mirecc-fellowship.asp and at the VISN 5 website at http://www.mirecc.va.gov/visn5/.
Potential applicants are encouraged to contact Dr. Melanie Bennett at Melanie.Bennett@va.gov to discuss details of the opportunities available for fellows.
Recovery-Oriented Small Grants Program

The VISN 5 MIRECC offers a small grant mechanism to fund recovery-oriented clinical and educational innovations within VISN 5 in response to the VA’s Action Agenda to transform VA mental health services to a recovery model. The program especially encourages (but is not limited to) proposals such as: creating, adopting, launching or expanding recovery-oriented clinical or self-help projects; new programs to educate staff, Veterans, and/or family members of Veterans about mental health recovery models; or specific recovery-oriented services/programs. Past grants have been used by clinicians and peer specialists to attend trainings, bring in speakers, start new programs, and support creative activities that promote mental health recovery. We will work with you to develop your application. Apply today! Grant amount can range from $300-$5000. Application Deadlines are the 1st of March, June, and December. For more information or to receive an application, please contact Alicia Lucksted, Ph.D., MIRECC Recovery Coordinator, at 410-706-3244 or email her at Alicia.Lucksted@va.gov.

VA Social Skills Training

Since 2008, the VA Social Skills Training (VA-SST) program has been training VA clinicians nationwide in the delivery of SST for Veterans with serious mental illness. Over the years, the VA-SST program has trained over 1020 VA staff across the country, including 87 Peer Specialists, and more than 48 Master Trainers, and 273 PSR fellows. Trainings are scheduled by region. For more information on Social Skills Training, the VA-SST Training program, and upcoming trainings, please visit our website: http://www.mirecc.va.gov/visn5/training/social_skills.asp or email Elizabeth Gilbert, Ph.D. at Elizabeth.Gilbert@va.gov.

Check Out the VISN 5 MIRECC Website

Check out the VISN 5 MIRECC Website for great information, tools, and announcements. We have recently added to our MIRECC News Spotlight details of presentations delivered by MIRECC Investigators at different conferences and meetings over the last six months. They include work on the impact of stigma on those with mental illness (Dr. Lucksted), descriptions of chronic pain experiences and management among Veterans with bipolar disorder (Dr. Travaglini), findings from a pilot study of an intervention to reduce internalized stigma in Veterans with PTSD (Dr. Drapalski), and progress developing a peer coaching program to promote supervised fitness training for older Veterans with psychotic disorders (Dr. Muralidharan). Take a look to see what our investigators are up to and learn about their research findings! www.mirecc.va.gov/visn5
Putting Recovery Into Practice

MIRECC Matters is also available online:
www.mirecc.va.gov/visn5/