

IRECC Leadership MIRECC Director Gregory McCarthy, PhD gregory.mccarthy@duke.edu

Co-Director - Education Robin A. Hurley, MD robin.hurley@med.va.gov

Assistant Co-Director - Education Katherine H. Taber, PhD katherine.taber@med.va.gov

Co-Director - Clinical Harold Kudler, MD Harold.Kudler@med.va.gov

Assistant Co-Director - Clinical Kristy Straits-Troster, PhD Kristy.Straits-Troster2@med.va.gov

Co-Director - Evaluation Marian Butterfield, MD, MPH mimi@duke.edu

Associate Director - Evaluation Director, Special Fellowship in Advanced Psychiatry Richard Weiner, MD, PhD Richard.Weiner@med.va.gov

Director, Special Fellowship in Advanced Psychology Patrick Calhoun, PhD Patrick.Calhoun2@med.va.gov

Associate Director - Genetics Jean C. Beckham, PhD Jean.Beckham@med.va.gov

Associate Director - Interventions Christine Marx, MD marx0001@mc.duke.edu

Associate Director - Neuroscience Scott D. Moore, MD, PhD Scott.Moore2@med.va.gov

Associate Director - Neuroimaging Rajendra A. Morey, MD morey@biac.duke.edu

Associate Director - Neurocognitive Larry A. Tupler, PhD Itupler@duke.edu

VISN 6 Leadership

VISN 6 Director Daniel F. Hoffmann, FACHE

Director - Mental Health Service Line Stephen L. Lemons, EdD

To Participate in Studies at Approved Research Sites Contact:

Durham VA Study Coordinator mireccstudies@va.gov 919-286-0411 ext 6430

Hampton VA Carla Williams carla.williams2@va.gov 757-722-9961 ext 2999 Richmond VA Adrienne Kinne adrienne.kinne@va.gov 804-675-5000 ext 4251 Sallebury VA Mary Ellena mary.ellena2@va.gov

704-638-9000 ext 2956

VISN 6 Mid-Atlantic MIRECC Post Deployment Mental Health

Editors: Katherine H. Taber, PhD Robin A. Hurley, MD

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Annoucements

Dr. Greg McCarthy (overall Director of the MIRECC) will be stepping down as of August 31. After more than 27 years with the VA, Dr. McCarthy has decided to return to academia. He has accepted a position in the Department of Psychology at Yale University. This new position offers him the opportunity to more actively pursue his longstanding interest in the neuroscience of social cognition.

A transition leadership team has been created that consists of the current MIRECC Co-Directors and the MIRECC's Administrative Officer, Perry Whitted. This interim plan has been approved by Drs. Mark Shelhorse, and Steve Lemons. Dr Katz and Mr. Williams visited the MIRECC on July 27 for a site visit, and gave their blessing to the MIRECC and its transition plan.

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Dear MIRECC colleagues:

I am writing to inform you that I have accepted a new position as professor in the Department of Psychology at Yale University. The decision to take this new position was a difficult one, particularly as I have great affection for the VISN6 MIRECC and for the Durham VA. Together, we have accomplished much already at the MIRECC, and great discoveries are definitely on the horizon. I feel confident that



the MIRECC is on firm footing and will continue to excel in its mission. My new position in New Haven starts on September 1st. It will be quite a career change for me, but it will give me a chance to fulfill some personal academic goals and to spend more time teaching and mentoring. I hope to stay involved with the research program of the VISN6 MIRECC - whether formally or informally.

Best wishes, Gregory McCarthy

VA Employee Training and Outreach Face of the New Veteran A Mid-Atlantic MIRECC Training Program

August 14th, 2006 marked the debut of a new VA Durham allemployee training designed to help employees better understand the needs and expectations of service members returning from combat duty in Iraq and Afghanistan and seeking care in VA. Dr. Harold Kudler responded to a request from Mr. Ralph Gigliotti, Durham VA Medical Center Director, for a training program which would increase (continued on next page)

New Funding Opportunity

MIRECC Clinical Education Projects Program FY07 Enduring Educational Materials for Post-Deployment Mental Health: Readjustment Issues

Submissions are now being accepted for the Mid-Atlantic (VISN 6) (continued on next page) Post Deployment Mental Health

Announcements

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Dr. Harold Kudler (Co-Director, Clinical Component) will assume the MIRECC Interim Directorship and Dr. Richard Weiner (Director, Psychiatry Fellowship) will become Acting Co-Director for the Research Component. Dr. Kristy Straits-Troster will serve as Acting Co-Director for the Clinical Component in Dr. Kudler's stead. Dr. Christine Marx will serve as the

Interim Director of the MIRECC's Special Fellowship in Advanced Psychiatry in Dr. Weiner's stead.

Dr. Everett Jones has assumed Dr. Mimi Butterfield's role as Co-Director for the MIRECC Evaluation Component. His special expertise in Mental Health systems and in performance measurement and improvement highly qualify him for this role. Dr. Patrick Calhoun has assumed her role as leader of the Health Services Research Core. We continue to mourn Mimi but can take comfort in the strength of the program that she built. Hers was a gift of brilliance, dedication, and love.

MIRECC Clinical Education Projects Program FY07 Enduring Educational Materials for Post-Deployment Mental Health: Readjustment Issues (continued from page 1)

MIRECC Clinical Education Projects Program. **Proposals are due by September 29, 2006.** The VISN 6 MIRECC is focused on post-deployment mental health. As Operations Iraqi Freedom (OIF) and Enduring Freedom (OEF) proceed, VISN 6 continues to have more and more new returning soldiers entering our system of care. As of May 2006, VISN 6 has 6811 OIF/OEF veterans. This cohort of returning soldiers has special mental health needs and a high level of access to general health information/ knowledge. (continued on page 4)

Department of Veterans Affairs (VA) Employee Education System and Mid-Atlantic Health Care Network (VISN 6) present course no. 06.V6.FAP.A

DoD and VA Family Transition Program

August 30 - 31, 2006 This conference is designed to provide participants

with an understanding of the unique family issues associated with Operation Enduring Freedom/ Operation Iraqi Freedom (OEF/OIF) combat veterans who are entering VA care by way of Military Treatment Facilities (MTF). Participants will learn to evaluate and apply best Medical Family Assistance practices used in Military MTFs in the VA setting so that family transition can be enhanced across the Department of Defense (DoD) / VA continuum. Participants will collaborate with faculty members from DoD and VA to develop a model intervention that can be replicated at

Face of the New Veteran A Mid-Atlantic MIRECC Training Program (continued from page 1)

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staff sensitivity and understanding of Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) veterans and their families. In collaboration with the Clinical and Education components of the MIRECC, he assembled a planning committee to include valued and diverse expertise.



Planning committee members included Dr. Bruce Capehart (Psychiatrist, OIF/OEF Clinic Coordinator), Susan Watkins (Social Worker, OIF/OEF Case Manager), Betty Goolsby (retired COL Goolsby, Quality Improvement Nurse Supervisor), Bob Williamson (Social Worker, Director of Homeless Veterans Programs/ Employee Assistance Program, Dr. Kristy Straits-Troster (Psychologist, MIRECC Asst. Clinical Co-Director and OIF/OEF Clinic staff) and Jaimie Marinkovich (MIRECC Health Care Education Specialist).

The team's presentation opened with a moving photomontage set to music, which was conceptualized by Dr. Capehart, based upon his personal experience as MAJ Capehart of the 1493rd (continued on page 3)

Invited Lectures

On July 18, **Dr. Robin Hurley (MIRECC Co Director, Education Component)** presented *"Windows to the Brain: Implications of Brain Injury for Pastoral Care of Returning OIF/OEF Veterans"* in the National Chaplain Center's Spiritual Care Grand Rounds (audio conference).

On August 17, Dr. Hurley presented *"Windows to the Brain: New Applications of Brain Imaging in Psychiatric Practice"* at the Medical College of Georgia Psychiatry Grand Rounds.

Publications

Calhoun PS, Bosworth HB, Stechuchak KA, Strauss J, Butterfield MI. The impact of posttraumatic stress disorder on quality of life and health service utilization among veterans who have schizophrenia. *J Trauma Stress* 2006 Jun;19(3):393-7.

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Post Deployment Mental Health

Face of the New Veteran (continued from page 2)

Medical Detachment (Combat Štress Control). Video vignettes excerpted from other VA resources followed, with real OIF/OEF veterans and their families describing in their own words key readjustment issues and concerns about transitioning healthcare, disability, and moving on with life. Specific updated information about demographic characteristics, diagnoses and healthcare utilization among this population of new veterans was provided as background information for participant group discussion.



Consistent with a public health model of postdeployment readjustment and support of seamless transition along the DoD/VA continuum of care, several key points were made.

OIF/OEF veterans eligible for 2 years of VA healthcare are diverse in age, ranging from very young recruits to older Guard and Reserve servicemembers



Many are female (14%), most are well-educated, technology savvy



Family members need and want to be involved in veterans' care

All OIF/OEF veterans will face challenges and readjustment to civilian life and most of them will not develop chronic mental health or substance abuse problems.

Stigma associated with PTSD and mental health is the single most important obstacle to providing effective support and mental health treatment for recovery

Group discussion of these issues frequently included employees' experiences, often as veterans and family

DoD and VA Family Transition Program (continued from page 2)

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the participants' home facilities in order to improve outcomes of care to the veteran. Upon completion of this program, the participants will be able to:

Orient VA staff to the mission and day-to-day activities of the Military Treatment Facility (MTP) Family Assistance Programs.

Review the history and identify the elements of current services in support of OIF/OEF veterans and their families in MTF & VA settings.

- Identify gaps in both systems of care and specify elements that can strengthen veteran and family care across the Dept. of Defense/VA continuum.
- Develop an action plan of care for improving family services across the Dept. of Defense/VA continuum of care to include program development, implementation and evaluations.
 - Assess the impact (after three months) of new initiatives in support of families of OEF/OIF injured service members.

Dr. Robin Hurley (MIRECC Co-Director, Education **Component)** presented an update on traumatic brain injury in the VA system in cojunction with Dr. Lucille Beck (Chief Consultant, Rehabilitation Medicine) at the Under Secretary's Special Committee on Post Traumatic Stress Disorder Meeting, July 24-25, 2006 in Washington, DC.



New Funding Opportunity (continued from page 2)

Service members and their families face significant challenges in readjusting from the high-intensity of combat settings to life back home in terms of sleep, appetite, communication with friends/family, emotions, occupational performance, and other aspects of dayto-day living. A public health approach to readjustment difficulties post-deployment may be highly successful in decreasing stigma and improving readjustment. Early interventions may help to stem early problems and avoid development of more serious mental health conditions and psychosocial impairment. Primary goals of the MIRECC include the development of enduring educational materials, support for a public health approach to clinical care, and translation of empirical research into effective interventions. With that said, there is a great gap in the education of both health care providers and patients on common postdeployment issues such as when to seek/provide help and what are the best ways to help.

This request for proposals is designed to focus on one aspect of this need: patient/family interventions to promote recovery from post-deployment readjustment difficulties. All projects must contain some element of enduring educational materials or programming (e.g. creation of webcasts, videos, hard copy materials) that can be used by more than one set of consumers/providers on an ongoing basis after the initial funding period has lapsed. Outcome measures sufficient to demonstrate the success or failure of the intervention/ project must be specifically detailed in the proposal and completed by the end of the funding period. Projects must be completed within one year of funding. Examples of possible projects include (but are certainly not limited to):



Development and testing of an early clinical intervention for a readjustment problem (e.g. insomnia/nightmares)

Development and testing of a new educational program to help patients/families identify readjustment difficulty (e.g. isolation/withdrawal from relationships)

Development and testing of a new educational program to promote patient/family self management of a readjustment challenge (e.g. anger related issues within marital communication)

Funding will be provided in FY07. All VISN 6 Mental Health staff are eligible to apply. Trainee proposals must include a permanent staff member as co-applicant. Appropriate projects will require budgets in the range of \$8,000 - \$15,000.

For more information: Mary Ellena MIRECC Program Support Assistant mary.ellena2@va.gov

Noon V-tel Lecture Schedule:

September 8

Chaplain Jim Taylor MDiv (Tampa VAMC) Meeting More Than the Physical Needs of Active Duty Injured and Their Families

This series is presented by V-tel and telephone conferences. Web-casting will become available in the near future. If any of you have suggestions or ideas for lectures or for the series process, please feel free to contact Dr. Robin Hurley or Dr. Katherine Taber with your feedback.

Below are the V-tel phone numbers to dial to participate in the series for the calendar year 2006. Dial in at starts at 11:45 am Eastern Time.

VISN 6 Office	304 262-3950	Hampton 5th Floor	304 262-3930
Asheville	304 262-3952	Richmond	304 262-3951
Beckley	304 260-4839	Salem	304 262-3942
Durham	304 262-3924	Salisbury	304 262-3948
Fayetteville	304 262-3928	CBOC Jacksonville	304-260-4809

There are ten audio lines scheduled. For audio lines only call: 800-767-1750 and inform the operator that you are calling in for the "V6 PD Mental Health Problems"

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members too. In the last program section, "Message to Providers" video vignettes were presented in which OIF/OEF veterans and their families explain how important it is for them to be heard, and they ask VA employees to be good listeners, have patience and be efficient. A summary of telephone and web resources for OIF/OEF veterans and families was provided

This series of 14 employee presentations are being conducted in partnership with Customer Service/Patient Satisfaction improvement efforts at VAMC Durham. Evaluation results will be compiled to guide future improvements and program revision. If effective, this program may be made more widely available throughout the VISN.