



## REQUEST FOR APPLICATIONS

### **South Central Mental Illness Research, Education, and Clinical Center (MIRECC) 2007 Clinical Partnership Program: IMPROVING ACCESS TO CARE**

#### Introduction

The South Central MIRECC's goal is to close the gap between research proven best practices for veterans with mental illness, and the care that front line providers can deliver with available resources. Front line providers are a critical component to improving care in routine clinical settings. This announcement seeks to identify and fund (up to \$30,000) innovative projects related to either provision of clinical care or education from mental health clinicians in VISN 16.

#### Clinical Partnership Program

The Clinical Partnership Program idea comes from Mental Health Product Line Advisory Council (PLAC) members who said that front line providers needed support for innovative ways to implement best care practices in their clinical sites. In this year's (2007) request for proposals we are expanding the focus of the Clinical Partnership Program to include educational as well as clinical activities. In addition, we have modified the program to incorporate suggestions from past participants in this initiative.

The theme for the 2007 Clinical Partnership Program is *improving access to high quality mental health care*. We are requesting that front line providers think about strategies that would work with their patients in their own treatment settings to improve access to care. This topic allows for flexibility in approaches for selecting patients with mental illness for whom additional resources are most needed or for identifying "gaps" in the current treatments offered to veterans. It is also compatible with the MIRECC goal to close the gap between clinical research settings and the care we can offer in real life clinics. Additionally, it is a tremendous opportunity to pilot and learn from programs that, if effective in improving outcomes, can be exported throughout the VISN and the VA.

Below are several examples that could be considered as clinical partnership programs appropriate to this topic, but are not meant to limit the submission of different programs to Improving Access to Care.

#### Examples of Clinical Partnership Programs

1. Clinical additions to the currently funded VISN 16 MH/Primary Care Initiative.
2. Approaches to improve mentally ill patients' access to physical health assessment and treatment.
3. Development and evaluation of peer-led interventions.
4. Evaluation of an educational intervention (e.g., comparison of methods of psychoeducation delivery, evaluation of the effectiveness of a clinical education tool or product).

5. Identification of efficient and effective methods to follow up on mental health needs identified in screening for traumatic brain injury.

#### Resources Available for Clinical Partnership Programs

For the Clinical Partnership Program, the MIRECC will provide consultation to applicants as they write proposals, specifically consultation regarding measurement of outcomes and design of the program.

For administrative questions, please contact Penny White at [whitepennyl@uams.edu](mailto:whitepennyl@uams.edu)

For scientific questions, please contact JoAnn Kirchner at [kirchnerjoanne@uams.edu](mailto:kirchnerjoanne@uams.edu) or Michael Kauth at [Michael.kauth@va.gov](mailto:Michael.kauth@va.gov)

Once the specific programs are selected, the MIRECC will work with the individual sites to assist and promote implementation and evaluation of the program.

#### Request for Proposals

All interested medical centers in VISN 16 are eligible to apply for funds to support education or clinical programs that respond to the theme of Improving Access to Care. Lead applicants should have appointments within a VISN 16 mental health service line.

Support will be provided for one year. Budget requests may not exceed \$30,000 for projects located at one site and \$60,000 for multi-site projects. Funds will be awarded within fiscal year FY07. The "Budget Tips" provides additional details on items that can be supported by this funding mechanism.

All applications should include a letter of support from the Chief of Mental Health (if he or she is not the author of the proposal) and the Medical Center Chief of Staff or Director. These letters should include a commitment from the Mental Health service line leadership to support the clinician's time to complete the clinical or educational project. An application without these letters of support will not be reviewed.

The application should not be longer than four (4) pages (single-spaced, word processed).

**Applications will be accepted on a rolling cycle, and if of merit, awarded on a first come basis.** No applications will be accepted after **Monday, June 25, 2007, 5:00pm CST.** *Only emailed applications in Word Arial font size 12 are accepted.*

All proposals will be reviewed by a selection committee including Greer Sullivan, M.D., M.P.H., Kathy Henderson, M.D., Michael Kauth, Ph.D., JoAnn Kirchner, M.D., Pat Dubbert, PhD, Mark Kunik, M.D., Dean Blevins, Ph.D. and ad hoc reviewers as needed. The review process will be complete by July 30, 2007, with notification sent in early August 2007.

Each application will be evaluated and ranked with respect to the following criteria:

1. The creativity of the intervention.
2. The ability of the program to realize the MIRECC mission of “closing the gap.”
3. The likelihood of meeting project objectives.
4. The expected impact on the target population.
5. The likelihood that the program is exportable and can benefit other sites.
6. Appropriateness of the intervention to the cultural diversity and needs of the specified target population.

### Evaluation

Often we develop strategies to improve care but never really know whether or not, or in what way, care or clinical outcomes are actually improved beyond anecdotal evidence. The MIRECC does not intend to prescribe specific clinical or educational programs or the most meaningful outcomes. However, a central component of this program will be evaluation of the effectiveness of the funded protocols. The MIRECC will partner with providers to assist in the evaluation the programs that are implemented.

The outcomes concept will be *improving access to care*. Applicants must decide upon what specific outcome(s) their intervention is designed to improve.



## VISN 16 MIRECC Guidelines for Submission of a Full Application for Clinical Partnership Program Funds

Please include all of the following in a word or PDF document, font Arial 12, submitted to:

Penny White at [whitepennyl@uams.edu](mailto:whitepennyl@uams.edu)  
Phone: 501-257-1797

### **Guidelines for Full Proposal Submission:**

1. Project Goals
  - a. Describe the clinical or educational program that will be implemented. Do not use abbreviations or assume knowledge that others outside your subspecialty might not know. State clearly and realistically what the project should accomplish.
  - b. Indicate how this program relates to the overall mission of the MIRECC, which is to close the gap between efficacy (what services have the potential to do) and effectiveness (what services actually do in usual practice settings) for specific populations with mental disorders in the South Central Network and nationally.
2. Methods
  - a. Describe the population for the clinical or educational program, including the number of anticipated participants and the location within which the program will take place.
  - b. Describe how participants will be selected for the project, e.g., specifically how they will be identified. This could include clinical diagnoses if this is a clinical intervention or a specific group of providers if this is an educational intervention.
  - c. Describe how you will obtain participant's consent to participate in the program.
  - d. Describe how you will evaluate the program including the specific clinical or educational outcomes you expect. For example, will you use a comparison group? Will you be obtaining information on clinical interactions from the medical record? Will you be collecting information directly from program participants?

Evaluating the program does not require that you randomize patients to an intervention or not to an intervention. Strategies that could be used include, (1) following patients that are similar but are wait listed for the program you are implementing or (2) implementing an intervention in one clinic and follow a comparison group in a similar clinic where there is no intervention.

3. Future Plans

- a. Describe the anticipated products from this program. Will it be portable outside of your setting to different VAMCs or VISNs?
- b. Describe your plans for continuing and/or disseminating the work if the current project is successful and if it is not successful.

4. Literature Cited

List any references cited in the text.

5. Resources/Budget Narrative

Provide a summary budget and up to a one page narrative description/justification as to how the funds will be used. All funds must be justified. Possible uses for the funds include supporting staff (e.g., hire a part-time nurse or social worker) to conduct the clinical or educational program or obtain information that would support the evaluation of a clinical or educational program. Funds can be used to purchase educational materials (e.g., patient workbooks, DVDs).

These funds cannot pay for food or travel of VA employees. These funds can support consultation fees or honoraria for non-VA experts.

Salary support for the principal clinician investigator is not ordinarily included in Clinical Partnership Program awards, but salary support is possible if authorized by the VA service chief, if applicable.

These funds cannot purchase copying or media reproduction services, if available from the VA Printing Office.

6. Letter(s) of support may be included at the end of the proposal.

### **Budget Preparation FYI's:**

- ✓ Clinical partnership program recipients accept responsibility for the effective management of their funds.
- ✓ Travel dollars are NOT included in clinical partnership program funding – VA travel dollars are a different kind of funding. However if travel is integral to the conduct of the program, then it is appropriate to include a separate request for travel dollars in the program application – provide appropriate detail (airfare, number of travelers, per diem, etc.) supporting the travel amount requested. Please be aware that award of such travel is extremely rare and in most fiscal years is unavailable.
- ✓ These funds can not be used to purchase equipment that could be considered as IT (Information Technology). This includes computers.
- ✓ Maximum allowable amount for general office supplies is \$250. For requests greater than \$250, please provide a description of items required.
- ✓ Procedures and ability to hire staff quickly for varies from facility to facility.