



South Central MIRECC Communiqué

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“Closing the efficacy-effectiveness gap”

Suicide Prevention Coordinators “Hit the Ground Running”

Loretta A. Coonan, LCSW, Jennifer A. Nicholson, LCSW, Paulette Henson, RN, Dealy Blackshear, LCSW, Frederic Sautter, PhD, Sharetta Johnson-Frazier, LCSW, Juli McNeil, LCSW, Darlene Augustine, LCSW, Linda Heiman, LCSW, and Anthony Kirksey, LCSW

The 2004 VHA Mental Health Strategic Plan specified the hiring of a Suicide Prevention Coordinator at each medical center to fulfill a variety of educational, outreach, clinical and administrative responsibilities related to suicide prevention. Most of the Suicide Prevention Coordinators for VISN 16 were hired by August 2007 and after a week-long training in Atlanta, Georgia immediately faced the task of completing staff and patient educational initiatives for National Suicide Prevention Week, 9/9/07-9/15/07. Undaunted by the tasks they faced, the newly hired Suicide Prevention Coordinators quickly developed unique and effective educational programs for staff and patients, outreach activities with community agencies, guidelines for addressing the management of suicidal behavior, and other creative initiatives for addressing suicide prevention and awareness at each hospital. Some of their activities included:

- Collaboration with VAMC internal and community partners, including Vet Centers, local Suicide Prevention Helpline, and Barksdale Air Force Base to distribute over 3000 Suicide Prevention Flyers promoting the National Suicide Prevention Hotline to veterans in three states – D. Augustine, LCSW, Shreveport VAMC.
- Community outreach presentations to Blue Star Mothers and Family Readiness Assistance Programs – J. McNeil, LCSW, Muskogee VAMC.
- Development and implementation of a hospital-wide Suicidal Caller Management System: “SAFE Response to Suicidal Callers” – L. Coonan, LCSW, Michael E. DeBakey VAMC, Houston.
- Development and distribution of brochures addressing the identification of depressive symptoms and risk factors for suicide – J. Nicholson, LCSW, Gulf Coast VA Healthcare System, Biloxi.
- Coordination of a multidisciplinary presentation on suicide risk and prevention including staff from MOVE! (suicide risk and gastric by-pass surgery), Prime Care, Mental Health, Compensated Work Therapy, and the facility Recovery Coordinator – L. Heiman, LCSW, Alexandria VAMC.
- Implementation of “Brown-Bag” lunch presentations on suicide prevention – A. Kirksey, LCSW, Oklahoma City VAMC.
- Development and coordination of Suicide Prevention Awareness trainings in multiple community-based outpatient clinics (CBOCs) with the assistance of designated Suicide Contact staff – F. Sautter, PhD, Southeast Louisiana VA Healthcare System, New Orleans.
- Suicide Prevention Awareness activities presented to over 220 employees at two VA facilities – P. Henson, RN, Central Arkansas VA Healthcare System, Little Rock.
- Small group presentations to critical staff at four facilities and CBOCs – D. Blackshear, LCSW, Fayetteville VAMC.

- Participation on the Patient Safety Committee to identify suicide risk on inpatient psychiatric units – S. Johnson-Frazier, LCSW, G.V. (Sonny) Montgomery VAMC, Jackson, MS

Our work in suicide prevention is just beginning. Additional suicide prevention and awareness programming will be planned on a regular basis at each facility. Contact the Suicide Prevention Coordinator at your facility for more information about local activities.

Veterans can now reach a call center of trained VA professionals when calling the *National Suicide Prevention Hotline (1-800-273-TALK)* and selecting option #1.



There will be no *Bringing Science to Practice* web-based presentation in November

Because of a Monday holiday, the South Central MIRECC Research Rounds will also not meet in November

Editor's note: This three part article focuses on homelessness among veterans in Arkansas. The first article described the Little Rock Homeless Program and the veterans it serves. This second article describes how the Little Rock program partnered with community agencies and with VA programs to expand services provided to homeless veterans.

Health Care for Homeless Veterans (HCHV): A History of Collaboration and Community Linkages, Part II

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The Little Rock HCHV Program is an active participant in collaborative efforts to address Homelessness in Central Arkansas. Success of the program has been due in part to its efforts to partner with community agencies and expand its reach. The HCHV program has a long history of community partnerships and linkages to meet the needs of homeless veterans. After two years of operation, the program recognized the futility of operating as a social treatment model without the advantage of social services. To address these deficits, the program applied for and received approval for the first VA Volunteers in Service to America (VISTA) Project for homeless veterans in 1989. These volunteers provided services that preceded recognition by VA of the need to address social concerns as a necessary adjunct to treatment of mental and physical health needs and substance

abuse concerns. The VISTA volunteers assisted with job development prior to the homeless Compensated Work Therapy (CWT) Projects, and they assisted with housing development and placement in permanent housing prior to the development of the VASH and Supported Housing Programs. They also designed an AIDS education component specifically for homeless veterans.

Community Homeless Assessment Local Education Networking Groups (CHALENG)

The HCHV Program in Little Rock continued in this spirit of community partnerships when in 1993 federal legislation initiated the VA Community Homeless Assessment Local Education Networking Groups (CHALENG). This legislation

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allowed homeless programs to partner with community agencies, such as a local dog kennel club for the HCHV Program's first fund raising event in 1993. In 1994, the program partnered with the Disabled American Veterans (DAV) Charitable Trust for the provision of dental and eye care prior to development of VA Dental Program for homeless veterans. The DAV partnership provided work shoes to veterans who were seeking employment. A 1995 partnership with the Arkansas National Guard (ARNG) has proven very fruitful. The ARNG provides furniture, televisions, household furniture, bedding and other household items from base closures and updating of base housing units. In 1997, the HCHV program partnered with LA (Los Angeles) Vets for a 3 year AmeriCorps VISTA Education Project. In 2000, the HCHV program partnered with the Veterans of Foreign Wars and the Martin Luther King Jr. Commission to host Miss America for one of our many Stand Downs. On several occasions, the HCHV program has partnered with Conway High School, on fundraising events and clothing drives. They also have a long-standing relationship with the Parkview High School Gentleman's Club for clothing drives and Stand Down events.

Community Partnership Grants

In 1996, the HCHV Program partnered with Volunteers of America on a HUD Continuum of Care grant that yielded \$363,000 for transitional housing, day care, job counselors and, vocational education for a five year period. Since 1996, the HCHV program has partnered with Saint Francis House Inc. on a HUD Emergency Shelter Grant (ESG), which allows them to provide meals and homeless prevention services to persons served through the Drop-In Day Treatment Center and the residential treatment programs. The HCHV received a MIRECC Clinical Educator Grant in 1999 to develop a public service video. In the process, the program developed a close relationship with a local TV station that allowed the video to run for two years, six times a week, well beyond the funding capacity of the grant. A second MIRECC Educator Grant in 2004 supported the development of a video to educate homeless veterans about hepatitis risk. The video featured a former homeless veteran who now has his own gospel radio station.

In 2003, the HCHV program entered a partnership with five other organizations to form the Jericho Coalition. This coalition has received continuous funding through the HUD Continuum of Care and remains in place to this day. This grant allows the HCHV program to offer permanent housing to formerly incarcerated veterans who might otherwise have difficulty finding housing. Another sustained partnership exists with the Scipio A. Jones High School Alumni Association. This group along with Pro Duffers Arkansas has hosted an annual golf tournament to benefit homeless veterans since 1995. The 13th Annual Homeless Veterans Benefit Golf Tournament is scheduled for March 29, 2008.

Civic Partnerships & Organizational Involvement

Partnerships for homeless programs in Little Rock extend well beyond community homeless providers to various components of state and local government. The HCHV program has been a member of the Arkansas Policy Academy since the project was initiated. The program joined with the Policy Academy and the cities of Little Rock and North Little Rock and Philander Smith College to chair the 2006 Stand Down. The HCHV program has participated on the Interagency Council on the Homeless since this organization was established in 1988, and members of the HCHV program hold board positions with the Central Arkansas Team Care for the Homeless Coalition (CATCH).

In 2005, the CHC Program Manager (Morris) was named by the Mayor of Little Rock to Co-Chair a Steering Committee to develop a 10-Year Plan to End Chronic Homelessness in Central Arkansas. In 2007, Dr. Morris was named to the Central Arkansas Mayors' Homeless Commission that is charged with implementing the 10-Year Plan. On two separate occasions, Dr. Morris has presented to the House Congressional Committee on Veterans Affairs on the needs of homeless veterans. In 2006, she was invited to speak before the Arkansas Legislative Task Force on Homelessness.

VA Partnerships

The Little Rock HCHV Program has long recognized the value of partnerships within the VA. The program's first partnership within the VA was

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with the Nutrition and Dietary Service, which has provided counseling to homeless veterans since 1990. Staff come to the Drop-In Center weekly to provide hands on nutrition education services to veterans who are homeless. The HCHV program also has an agreement with VA Substance Abuse Staff to provide in-house treatment to veterans in residential placement to address the performance measure for 30-day Mental Health and Substance Abuse follow-up. This eliminated the problem of veterans missing evening groups due to lack of public transportation, discontinuance of substance abuse treatment groups on the weekend, and problems with job schedules. Additionally, clinical staff from residential treatment facilities participate in case conferences and provide monthly reports on program participants. The goal of these conferences is to ensure continuity of care and verify that all is being done, that can be done on the part of clinicians and veterans. In 2006, the HCHV Program joined with the Veterans Benefits Administration, local Veterans Service Organizations, and participating funeral providers to become one of 21 sites involved in the Dignity Memorial Program for burial of homeless veterans.

Referrals are made to the medical center for acute treatment as appropriate when veterans are actively abusing alcohol or drugs or are in need of mental health treatment or medical screening. In addition, HCHV nursing staff provide health screenings, flu shots and TB screening for veterans in shelters, at soup kitchens, and at the Drop-in Center. The Drop-in Center also offers health education groups for homeless veterans who are diagnosed with Hepatitis C. The MIRECC funded video on Hepatitis C is an integral part of this program.

Challenges

Chronically homeless persons are usually single individuals who are divorced or who have never married. They generally have disabling conditions, including mental health and substance abuse problems, and exhibit significant chronic mental, physical, and substance abusing health

problems. Because they often have multiple problems, individuals who are chronically homeless rarely have all of their needs met by a single agency. Additionally, limited financial and treatment resources available restrict the ability of public and non-profit agencies to address the causal factors behind an individual's homelessness. Consequently, many individuals are often shuttled from agency to agency in an attempt to address their problems in workable segments. Too often, homeless individuals do not progress toward permanent housing and remain trapped in an under-funded, under-coordinated network of service providers. Those who are chronically homeless constitute a multi-faceted challenge for local governments, service providers, and the general population.

In Central Arkansas, there are many well-run agencies that provide services for this population. However, we as a region generally lack enough services, enough beds, and enough slots in treatment programs to adequately serve the chronic homeless population. A limited number of partnerships and frequent competition for too-few dollars complicate the situation. The fault often involves a lack of vision toward partnerships between local and state government, homeless service providers, and the business community.

The CHC Programs in Little Rock are working tirelessly to bridge the gaps that historically exist between these agencies and whose missions are generally different. The VA Homeless Programs in Little Rock, through their comprehensive approach, serve as a model for the design and implementation of programs to address the myriad of needs of homeless individuals in Central Arkansas. Our goal is to build a proactive collaboration of community leaders, service providers, and resource partners to create a well-connected network of services that moves persons who are chronically homeless into supportive housing as quickly as possible. To achieve this goal, the CHC Programs are working to strengthen a continuum of support that includes health, mental health, substance abuse, outreach, transportation, and other services.





Library Tip: 17 Million Biomedical Article Citations Through PubMed

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Want to learn quick tips on how to search the over 17 million biomedical article citations from MEDLINE and other life science journals? Check out this month's [Library Tip- PubMed!](#) PubMed also provides links to full text articles and other related resources. A link to PubMed is located on the VISN 16 virtual library (<http://vaww.v16.med.va.gov/sites/Library/default.aspx>).



November Conference Calls 1-800-767-1750

- 5—Education Core, 2:00 PM CT, access code 16821#
- 8—PSR Group Call, noon PM CT, access code 85388#
- 12—Research Rounds, 2:00 PM CT – *cancelled; Veterans Day observed*
- 13—Leadership Council, 3:30 PM CT, access code 19356#
- 21—Program Assistants, 2:00 PM CT – *cancelled; Thanksgiving*
- 22—National MIRECC Recovery Interest Group, noon CT – *cancelled; Thanksgiving*
- 27—Leadership Council, 3:30 PM CT, access code 19356#

The next issue of the *South Central MIRECC Communiqué* will be published December 3, 2007. Deadline for submission of items to the November newsletter is November 27. Urgent items may be submitted for publication in the *Communiqué Newsflash* at any time. Email items to the Editor, Michael R. Kauth, Ph.D., at Michael.Kauth@med.va.gov.

South Central MIRECC Internet site: www.va.gov/scmirecc

National MIRECC Internet site: www.mirecc.va.gov