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VISN 23 Mental Health Service Line Newsletter

Special Edition: Focus on Recovery

Volume 1, Issue 3

Fall 2013

VA Midwest
Health Care Network
Honoring Service. Empowering Health.



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more information about
VISN 23



While our fallen warriors are remembered on Veterans Day, the holiday is also intended to thank and honor all those who served honorably in the military - in wartime or peacetime. Celebrate Veterans Day by participating in local Veterans Day ceremonies. Click the picture above to find a Veterans Day community celebration near you.

Welcome to the third edition of the VISN 23 Mental Health Service Line (MHSL) newsletter. Our first newsletter focused on the Veterans Health Administration (VHA) homeless programs. The second edition gave an overview of VHA mental health and substance use disorder (SUD) services. This and subsequent editions will detail specific programs or initiatives in mental health and SUD that are available in VISN 23.

Since 2009, the VHA has developed many mental health services around the recovery model of care and treatment. This model includes involving the Veterans more in their mental health care, and training Veterans to help each other in group therapy settings and as peer specialists. The articles below describe the recovery model and other program developments that are designed to improve the delivery of mental health and SUD services.

In the past few months, all of our eight health care systems held mental health and homeless Veteran summits. The purpose of initiating these summits was to develop a more formal dialog between the VHA and community agencies and providers, with the purpose of collaborating to better complete the continuum of care and services for our Veterans.

We intend for these newsletters to facilitate the goal of collaborating with our community partners and other VHA service/product lines, by providing information about our programs.



Dr. Brian Cook

WHAT IS PEER SUPPORT? Submitted by J. Irene Harris, PhD.

Certified Peer Support Specialists are a new mental health discipline that are now Medicare/Medicaid reimbursable in over 30 states. In the VA, Peer Support Specialists are Veterans who manage mental health concerns in a highly effective manner, and are trained to provide supportive counseling and psycho-education for other Veterans learning how to manage mental health concerns as well.

Training for Peer Support Specialists may vary. For compensated Peer Support Specialist positions, state certification is required. In most states, completion of a training program that may be 40 - 80 hours is necessary to obtain certification. Many Veterans also serve as volunteer, or without compensation, Peer Support Specialists. These volunteers may seek out state certification, or complete the VA's 40 hour curriculum for Peer Support training. Topics covered by training include basic counseling skills, the philosophy of recovery oriented care, the roles and boundaries of the peer specialist position, very basic elements of psychopathology, relevant mental health law (such as mandated reporting and commitment processes) and ethics.

In VISN 23, Peer Support Specialists are serving in a wide variety of roles, including:

- orienting Veterans to residential or day programming;
- providing de-escalation support on acute psychiatry units;
- leading support groups targeting addiction, mental health management, health concerns community re-integration, vocational development, and many other topics;
- helping Veterans manage public transportation, find housing, or look for work;
- providing outreach to Veterans in nursing homes, homeless shelters, and other community settings;
- providing individual counseling, rehabilitation coaching, and person-centered planning across many treatment settings.

By serving in these roles, Peer Support Specialists can expand the range of mental health services available to Veterans in our medical centers and communities.

Click on the links below for more information



PEER SUPPORT FROM A VETERAN'S PERSPECTIVE Submitted by Tim Doble

On December 5, 2008 as my wife Julie and I walked out of the Toys for Tots warehouse, she suggested we drive to the Minneapolis VA Medical Center to look for a Christmas present for Doc Bob, the corpsman that helped me when I was wounded in Vietnam. After buying a gift, she gently suggested that we might want to stop in the Mental Health intake office to inquire about getting me some help for the symptoms of PTSD that I had been enduring for many years and had been affecting me greatly since I received the call that my younger brother Ron had been found dead on November 25, 2008. I was on an emotional cliff's edge and agreed.

One hour later the intake nurse had me sitting with a staff member from the PTSD unit who described a treatment called Prolonged Exposure (PE) that had proven to be successful in helping to alleviate the symptoms that had become an unwanted part of my family for many years. "The treatment will last between 13 and 17 sessions," the counselor told me. The information of a definite time limit to the therapy hit me like a thunderbolt. I could get better in about three months, WOW! I was ready to pour my heart and soul into this therapy.

After a difficult beginning, I began to see results, and by the end of the sessions my life as well as my wife's, had improved to a level I didn't think was possible. My new mission in life was clear to me. I had to tell other Veterans, who were suffering from the effects of combat, that there was a way forward to a better life. I didn't want the Veterans of Iraq and Afghanistan to carry their war wounds around for 35 years the way I had. I was directed to the Local Recovery Coordinator, Dr. Irene Harris at the Minneapolis VA Health Care System, who led the Peer Support Team and I was accepted into the program.

At the VA, Peer Support Specialists are Veterans who are successfully coping with a variety of mental health issues including PTSD and who want to help others traveling the same road. We are NOT therapists, but we use self-disclosure to give hope and to encourage others to seek, or continue treatment, so they may have the best life possible for themselves and their families. For Veterans, taking care of one another is a core value of military service. Peer Support Specialists encourage our brothers and sisters to find that place in themselves again, by getting help for themselves and other Vets.

All of the bad stuff I didn't want to have affecting my life has now become a tool that I can use to help motivate others. The things I was once embarrassed about have given my life value. Sharing my experiences, which had been closely held secrets for so long, is helping others to see that they can also get better.

Part of our mission as Peer Support Specialists is to educate staff about Veterans' viewpoints in order to improve communication and understanding in the treatment setting. We also want to let the staff know what great services they provide to Veterans and support them in the demanding jobs they have caring for us. Overall I see our mission as one of a lighthouse or beacon at the entrance to a safe harbor, calling all weary Veterans to a place of safety where they can restore and repair the damage to their vessel. One can only get the job of lighthouse keeper if you have been a weary traveler yourself and have been doing the hard work of restoration.



Guide to VA Mental Health Services for Veterans & Families

Describes VA mental health services provided to Veterans and their families nationwide.



THE MENTAL HEALTH TREATMENT COORDINATOR Submitted by Shelly Davis, MPA

The Mental Health Treatment Coordinator (MHTC) role was created to ensure that each Veteran has continuity throughout their mental health treatment and during transitions in care. The MHTC fully understands the overall goals of the Veteran’s mental health treatment and serves as a clinical resource for the Veteran and staff. The MHTC ensures coordination and development of the Veteran’s treatment plan and incorporates input from the Veteran into the plan. They also ensure that implementation of the treatment plan is monitored and documented. The MHTC does not need to be a licensed independent provider (LIP), but must have a college-level degree in health care and experience providing mental health services. Any non-LIP provider functioning as the MHTC must also function as part of a mental health team that includes LIPs, who will provide consultation as needed.

What are the requirements for needing MHTC assignment? Every Veteran receiving care in mental health services must have a MHTC assigned. “Receiving care” is defined as:

- Being seen in a mental health outpatient setting; a MHTC should be assigned no later than the third mental health visit;
- Admitted to an inpatient mental health unit;
- Have been evaluated and accepted into a Residential Rehabilitation Treatment Program (RRTP).

Currently, those health care systems in VISN 23 without RRTP services (Fargo VA HCS, Sioux Falls VA HCS, Minneapolis VA HCS, and Iowa City VA HCS) are nevertheless following VISN-wide protocol by assigning MHTC’s. Veterans discharging from RRTP, who have not been engaged in mental health services at their local VA, are notified that VA policy requires them to have post-discharge follow-up. It is assumed that once the Veteran returns home they will obtain mental health services through the local VA Health Care System and the MHTC is assigned from the local Mental Health Service Line staff.



VA Health Benefits

How do I enroll? How do I update my information?



Determine Cost of Care

What is my cost for VA Health Care?



Access Health Benefits

How do I receive VA health care benefits and services?

Click on the picture links above for more information on VA Health Care

THE MENTAL HEALTH SUITE Submitted by Praveen Fernandes, MD

The Mental Health Suite (MHS) is a mental health treatment planning software. It was developed to facilitate improvements in Veterans’ mental health care by:

1. Identifying problems at assessment and defining and measuring interventions in the Veteran’s care;
2. Communicating the purpose of treatment to all involved in the care, including accreditation bodies;
3. Providing a measure of a Veteran’s progress in treatment.

The Mental Health Suite provides a Recovery-Oriented approach to mental health treatment planning, such as allowing for documentation of Veteran and family collaboration and the Veteran’s strengths and abilities. It has functionality that supports full interdisciplinary team input with features that:

- Allows all providers to contribute to the treatment plan;
- Allows providers to communicate through an alert/notification system;
- Allows for additional signers to the final note;
- Can capture all the Veteran’s mental health problems, goals, objectives and intervention in one unified treatment plan.

The Mental Health Suite makes treatment planning easier by allowing clinical programs to appropriately customize the MHS default selections and still have the ability to individualize the treatment plan for and with the Veteran.

The treatment plan in the MHS is “a living document”- it can be easily saved, sorted, reviewed and updated by all treatment team members.

The MHS facilitates full and seamless electronic medical record (EMR) integration, transferring the treatment plan to the EMR in the form of a progress note to document the treatment plan process. The MHS treatment plans are consistent with Joint Commission and CARF standards.



TRANSFORMING INPATIENT UNITS Submitted by Lee Halvorson

Click on the links
above and below for
more information on
VA Health Care

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Common perceptions about a VA inpatient mental health unit might conjure up images of an institutional setting which is stark and uncomfortable. In the past, the planning and design of VA inpatient mental health units may have placed a higher priority upon providing a safe environment according to rigid VA standards, over providing a comfortable, pleasing environment for patients. Current efforts now place a higher priority upon the implementation of recovery oriented mental health programs with environments which are conducive to that recovery.

In order to support the rehabilitation and recovery of every Veteran with a mental illness, the VA has identified recovery as a guiding principle for its entire mental health service delivery system. Recovery is a journey that involves developing hope, self-direction, empowerment, respect and peer support. To this end, the environments provided in VA inpatient mental health units are evolving into more comfortable, patient centered settings which promote recovery.

VA inpatient mental health units are transitioning away from institutional long-term facilities with multiple bedrooms and shared bathroom facilities, to comfortable units with more single rooms with private bathrooms. The mental health treatment approach is now more patient-centered in order to provide care to meet individualized patient needs while allowing each patient to have a voice in planning their treatment and recovery.

One example of the environmental transformation of an inpatient mental health unit took place at the Sioux Falls VAHCS which went through a major renovation project. All patient rooms are now private rooms, each with its own private bathroom. Colors for the unit were selected with the goal of creating a bright yet serene environment. To further brighten up the unit, large photographic artwork is posted throughout the unit. The artwork was mounted on foam boards in consideration for safety. The unit's flooring is a warm cherry colored faux wood vinyl. The dayroom area is furnished with comfortable soft vinyl seating. The environment has been well received by patients and is thought to successfully balance a pleasing recovery oriented environment while still meeting the required safety standards.

THE AFFORDABLE CARE ACT AND VA HEALTH CARE submitted by David Campbell

The Affordable Care Act (ACA), also known as the health care law, was created to expand access to coverage, control health care costs and improve health care quality and care coordination. The health care law does not change VA health benefits or Veterans' out-of-pocket costs. Three things you should know:

- VA wants all Veterans to receive health care that improves their health and well-being.
- If you are enrolled in VA health care, you don't need to take additional steps to meet the health care law coverage standards. The health care law does not change VA health benefits or Veterans' out-of-pocket costs.
- If you are not enrolled in VA health care, you can apply at any time.

For more information about the ACA and the VA, click on the ACA icon:



MENTAL HEALTH SUMMITS submitted by Phil Ross

While the VA continues to expand mental health resources to meet the needs of Veterans, truly Veteran-centric, recovery-oriented care requires active collaboration and coordination with partners in the community. Through collaboration, VA can promote awareness and utilization of VA mental health resources, help Veterans gain access to community services, and build healthy communities for Veterans and their families. In the interest of promoting community collaboration, each facility hosted a Mental Health Summit. These Mental Health Summits are expected to help build or sustain collaborative efforts with community providers to enhance mental health and well-being for Veterans and their families. A total of nine Mental Health Summits were held across VISN 23 in August and September. Summits were held in Coralville, St. Cloud, Des Moines, Sioux Falls, Minneapolis, Rapid City, Lincoln, Bismarck, and Hot Springs.

Feedback from over 500 community partners and VA participants who attended the VISN 23 Mental Health Summits was enthusiastic and complimentary. The primary areas of focus for next steps involve improving communication mechanisms for sharing information especially on topics related to eligibility, services available in geographic areas, and transportation. An overview of the Summit After Action Reports (AARs) and additional detail can be accessed at the following link: [Click to access report](#).

To see some of the VA information shared with Mental Health Summit participants, click on the picture links on this page to access VA Community Provider Toolkit Mini-Clinics on PTSD, Recovery and Serious Mental Illness, Smoking and Tobacco Use, Substance Use, Suicide Prevention, and Women Veterans.

VA Mental Health Summit Videos

Click on the Play arrows to view Mental Health Summit videos:



White House Video (First Lady & Dr. Biden)



Under Secretary for Health Dr. Robert Petzel

MENTAL HEALTH AND RECOVERY AT THE VA submitted by Phil Ross

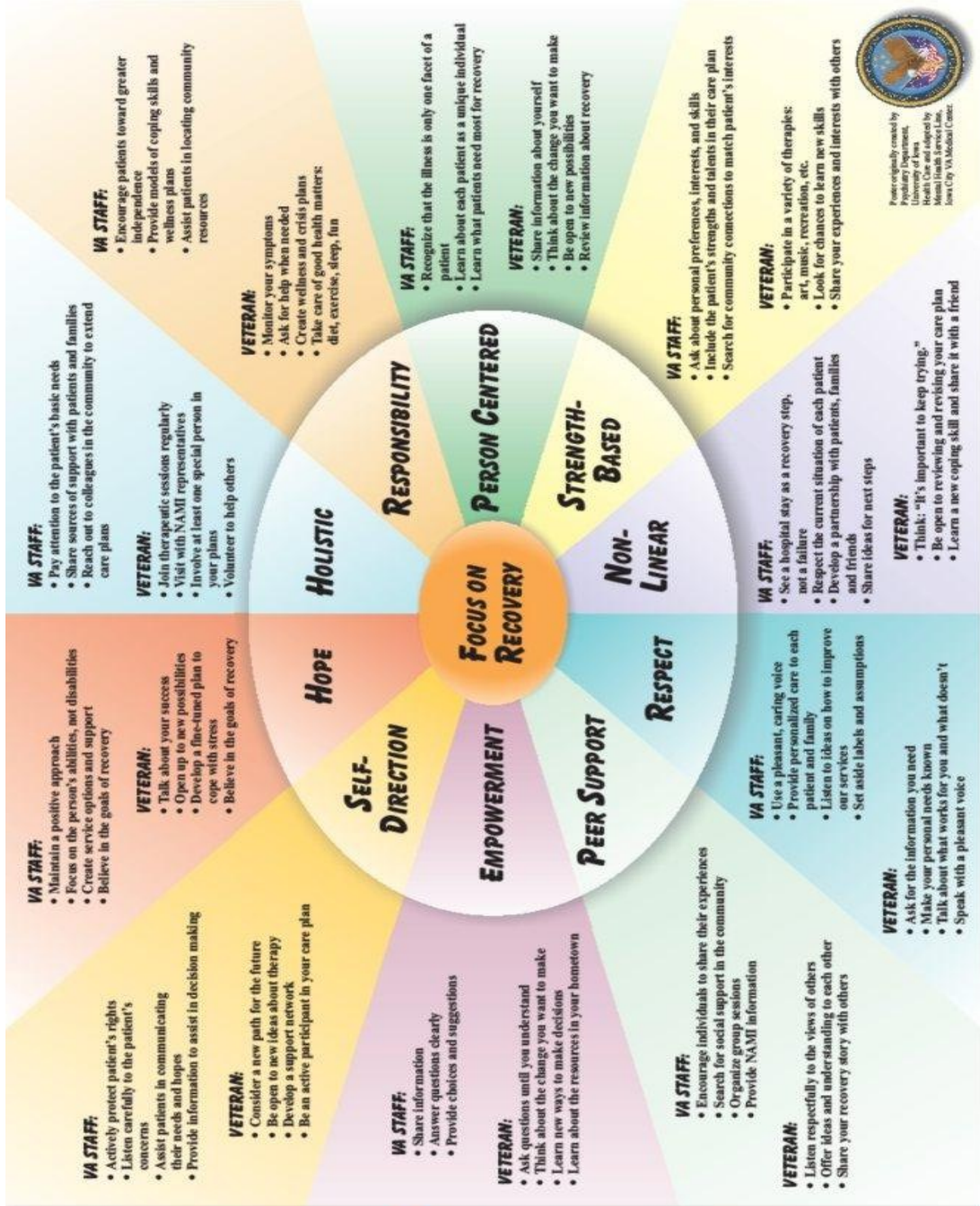
Mental health impacts how we think, feel, behave, and live. It helps determine how we adapt to a range of demands, relate to others and make choices. Just like physical health, mental health is important at every stage of life and is essential to overall health. Having access to the resources necessary to engage in one's recovery journey is important to all individuals.

In 2012, the Substance Abuse and Mental Health Services Administration (SAMHSA) defined recovery as "a process of change through which individuals work to improve their own health and wellbeing, live a self-directed life, and strive to achieve their full potential." Through the Recovery Support Strategic Initiative, SAMHSA has delineated four major dimensions that are essential to a life in recovery:

- **Health:** overcoming or managing one's disease(s) as well as living in a physically and emotionally healthy way;
- **Home:** a stable and safe place to live;
- **Purpose:** meaningful daily activities, such as a job, school, volunteerism, family caretaking, or creative endeavors, and the independence, income and resources to participate in society; and
- **Community:** relationships and social networks that provide support, friendship, love, and hope.

A functional view of how the recovery model is organized for VHA facilities is illustrated on the following page.

ELEMENTS OF RECOVERY



Poster originally created by
 Psychiatry Department,
 University of Iowa,
 Health Care and Adjudged by
 Mental Health Service Line,
 Iowa City, VA Medical Center.