Using technology to support screening, identification and early intervention for psychiatric and substance use disorders

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AVAPL Annual Meeting
San Antonio, TX
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Agenda

• Overview of OMHS Web Services
• Screening measures and psycho-educational resources that are currently available on My HealtheVet
• Web resources to support secondary prevention and a stepped-care model.
• Blending technology with traditional mental health services to support the delivery of evidence based behavioral health practices.
OMHS Web Services Division

- Provides strategic direction and coordination for all Internet and Intranet web sites managed and maintained by OMHS and its organizational units.

- Coordinates the development and evaluation of web based patient education and self-management resources available to Veterans through the MyHealtheVet Personal Health Record.

- Coordinates the development and evaluation of technology-based clinical training resources available to VA staff through the VA Employee Education System (EES).
If you are interested in learning more about some of the common mental health issues facing Veterans and their families, the topics below are a great place to start. They provide basic information about common mental health conditions such as Depression and PTSD, as well as information and resources designed to help specific groups of Veterans such as women, those who have recently been discharged from active duty, and those who are looking for job training and housing assistance.

**Feature Article**

**Military Sexual Trauma**

The Veterans Health Administration is working hard to spread the word about the services it has available for Veterans, women and men, who have experienced Military Sexual Trauma (MST).

Every VA facility has providers knowledgeable about treatment for the aftereffects of MST. Many have specialized outpatient mental health services focusing on sexual trauma and there are well over a dozen residential and inpatient programs available for Veterans requiring more intensive specialized MST-related care. Vet Centers also have specially trained sexual trauma counselors.
VA Suicide Prevention Campaign Expands With On-Line Chat Service

Resources for Clinicians
- Evidence Based Practices Home
- SharePoint Communities of Practice
- Clinician Resources by Diagnosis

Resources for Administrators
- Mental Health Initiatives
- Performance Measures
- VHA Directives
- VISN/VAMC Leaders
- Program Administrator Communities
- Clinical Supervision
- Assessment Resources
- Evaluation Centers
VHA’s Commitment to Evidence-Based Psychotherapy (EBP)

Bringing Evidence-Based Psychotherapies from the Laboratory to the Therapy Room in VHA

As part of its commitment to providing the best possible care to Veterans, VA is working to make evidence-based psychotherapies widely available to Veterans who can benefit from them. The VA Office of Mental Health Services is actively implementing national initiatives to disseminate evidence-based psychotherapies (EBPs) for PTSD, depression, and serious mental illness throughout the VA health care system. VA
Welcome to the VA, Office of Mental Health Services CPT for PTSD Dissemination Initiative Site!

The Office of Mental Health Services has implemented a national initiative to disseminate Cognitive Processing Therapy (CPT) for PTSD throughout VHA to make this treatment widely available to Veterans. Cognitive Processing Therapy (CPT) is a 12-session trauma-focused, manualized therapy that has been found effective for posttraumatic stress disorder (PTSD) and other corollary symptoms following traumatic events (Chard, 2005; Monson et al., 2006; Resick et al., 2002, 2003; Resick & Schnicke, 1992, 1993). CPT can be administered in individual or group format for patients who have experienced a range of traumatic events. The recently revised individual and group manuals included in this site reflect suggestions from almost two decades of research and clinical experience with CPT.

*NEW* CPT BROCHURES AVAILABLE- CLICK HERE FOR MORE INFORMATION
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VA EMR

- CPRS
- VistA
- BCMA
- VistA Imaging

My HealthVet PHR

- *VistA/CPRS is the authoritative VA medical record.*
- *Veteran "owns" his/her My HealthVet Personal Health Record (PHR).*
- *Veteran will access extracted data sent to My HealthVet from VA Electronic Medical Record (EMR).*
- *Veteran control of access to information (via delegation).*
Mental Health

Learning about a mental health condition is a good first step to being able to recognize some of its symptoms. You may be wondering if you have symptoms of concern. One way of determining that is to take a brief confidential and anonymous screen. Only you will see the results of the brief screen. None of the results are stored in your My HealtheVet account or sent anywhere. You can choose to print a copy of the results for your own records or to give to your physician or a mental health professional.

This section contains screens for symptoms of several mental health conditions. You can take a screen to see if you have symptoms that are commonly associated with a specific mental health condition or with stress. The fact that you have symptoms of a mental health condition does not necessarily mean that you have a mental health condition or that a mental health condition is causing you difficulty in functioning in a major area of your life, such as your family, personal relationships, work life or social settings.

After Deployment is a mental wellness site for service members, Veterans, and military families. Spending time in a war zone means being changed in some way. Some of these changes may be causing problems for you or for someone you know. Working on solutions is a sign of strength. This site helps Veterans and family members recognize and deal with problems.

Considering Professional Help

Considering Professional Help is an online tool using real experiences from Veterans. There are five common concerns that may stop you from getting help for your mental health. This tool helps you identify your concerns. It provides new ways of thinking about them. This tool shows you what to look for and where to find help. You will learn the benefits of getting mental health support from doctors, social workers, mental health staff, clergy, or other counselors. Your responses are confidential. You do not need to be registered with My HealtheVet to use this tool.

Screening Tools

AUDIT-C Alcohol Use Screening
PHQ-9 Depression Screening
PCL Post Traumatic Stress Disorder Screening
ASSIST Substance Abuse Screening

www.myhealth.va.gov
Depression Screening (PHQ-9) - Instructions

The following questions are a screening focusing on symptoms of depression. Please read each question carefully, then select the answer that indicates how much you have been bothered by that problem in the past 2 weeks. This entire screening is processed on this local computer. No information is collected, stored or sent over the Internet. To ensure complete privacy, exit your web browser after completing this screening.

If you have problems accessing this tool, there is also text-only version.

Little interest or pleasure in doing things?

- Not at all
- Several days
- More than half the days
- Nearly every day

< Previous  Next >

The PHQ-9 is a Pfizer product.
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Depression

Is this topic for you?

This topic covers depression in adults. For information on:

- Depression in young people, see the topic Depression in Children and Teens
- Depression after childbirth, see the topic Postpartum Depression.
- Depression followed by times of high energy, see the topic Bipolar Disorder.
- Depression and suicide, see Depression and suicide.

What is depression?

Depression is an illness that causes you to feel sad, to lose interest in activities that you've always enjoyed, to withdraw from others, and to have little energy. It's different from normal feelings of sadness, grief, or low energy. Depression can also cause people to feel hopeless about the future and even to think about suicide.

Many people, and sometimes their families, feel embarrassed or ashamed about having depression. Don't let these feelings stand in the way of getting treatment. Remember that depression is a common illness. Depression affects the young and old, men and women, all ethnic groups, and all professions.

If you think you may be depressed, tell your doctor. Treatment can help you enjoy life again. The sooner you get treatment, the sooner you will feel better.

What causes depression?

Depression is a disease. It's not caused by personal weakness and is not a character flaw. When you have depression, chemicals in your brain called neurotransmitters are out of balance.

Most experts believe a combination of family history (your genes) and stressful life events may cause depression. Life events can include:
Welcome to this course on Considering Professional Help

Purpose:
To help you decide if you would benefit from professional help.

Self-Check Survey:
You will be guided through a brief self-check survey to see how you are doing. All responses to the survey are confidential and private.

Get Started:
Click the "Begin Course" button to get started, or click "Watch Videos" for veteran stories.
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NHS Stepped Care Model for Mental Health

- **Step 1:** GP, practice nurse
  - Recognition

- **Step 2:** Primary care team, primary care Graduate Mental Health Worker (GMHW)
  - Mild depression

- **Step 3:** Primary care team, primary care GMHW & Gateway Nurse
  - Moderate or severe depression
  - Medication, psychological interventions, social support

- **Step 4:** Mental health specialists including crisis teams
  - Treatment-resistant, recurrent, atypical and psychotic depression and those at significant risk
  - Medication, complex psychological interventions, combined treatments

- **Step 5:** Inpatient care, crisis teams
  - Risk to life, severe self-neglect
  - Medication, combined treatments, ECT

- **Step 6:** Watchful waiting, guided self-help, computerised CBT, exercise, brief psychological interventions

The model progresses from the bottom up, with each step addressing increasing levels of risk and severity.
Beat Depression and Anxiety

Beating the Blues is the most widely used and evidence-based CCBT program for the treatment of depression.

Helping you to get better

Beating the Blues treats depression and anxiety by using Cognitive Behavioural Therapy (CBT) which has been recommended for use across the NHS.

Watch a guide to the benefits of using Beating the Blues for health professionals.
What is FearFighter?

FearFighter is a method for delivering CBT (Cognitive Behavioural Therapy) on a computer (via the internet). Research has shown that FearFighter improves anxious or phobic patients as much as face-to-face therapy. FearFighter is also more readily available and more cost and time efficient.

FearFighter is an online therapy and can be accessed from home, the office or even the local library. This convenience and confidentiality provides a solution for many sufferers who may be concerned about the stigma associated with seeing a therapist. Taking only three months to complete, with minimal telephone support through the process, FearFighter provides clinically proven improvements for sufferers with close to zero computer skills.

Approved by The National Institute of Clinical Excellence.
Engaging. Scalable. Effective.

Digital Health Coaching with proven outcomes.

- HealthMedia TeenSucceed®: An adolescent health program for today’s web generation.
- HealthMedia Move®: An innovative approach to staying active and healthy.
- HealthMedia Nourish®: Dietary analysis and counseling for improved eating habits.
- HealthMedia® Overcoming™ Insomnia: Strategies for healthy, restful, stress-free sleep.
- HealthMedia® Overcoming™ Depression: Confidential self-help for any level of depression.
- HealthMedia Balance®: Mind, body, and food—the foundation for success.
- Weight Management
- Smoking Cessation
- Depression Management
Welcome to the Drinker's Check-up

Click here to continue and

- find out what this program is all about
- take a confidential screening and get objective feedback about whether this site might be useful for you.

After getting feedback from the screening, you can decide whether or not to register. Once you’ve registered,

- you can get a comprehensive evaluation,
- detailed, objective feedback and
- help with making a decision about whether or not to change your drinking. We will not, however, pressure you to change in any way.

Site last updated November 24, 2009.
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Figure 1. Spectrum depicting degree of involvement of clinician and/or technology in the delivery of evidence-based practices.

Cucciare & Weingardt, 2007
Guided self-help + therapist email

“…there are clear indications that the presence of an online therapist guiding the patients and providing feedback is important to adherence and outcomes” (Andersson, 2009)

Guided self-help + therapist training/support + face-to-face

“…we developed a program in which a computer program guides the clinician session-by-session….the computer program also guides the patient in an interactive format by presenting information and video depictions of CBT in action…” (Craske, Roy-Byrne, Stein et al., 2009)

Guided self-help + social media

Social media can reduce attrition from public health internet interventions (Bennet & Glasgow, 2009)
Factors that Influence Whether CP is effective

• The importance of screening patients for suitability for CP (simple screening can enhance uptake, motivation, and economies of scale)

• The role of live human support for CP users (just a little human contact can go far to reduce attrition, improve uptake and pt outcomes)

• The background of successful CP supporters (typically professional, paraprofessional or student CBT therapists)

• The importance of routine monitoring of CP progress and live support (monitoring number of users, what sections they access, the goals they work on, their outcome ratings)

• How CP can fit with (complement/augment) traditional face to face psychotherapy.
Now take a look how to create your own Exposure Hierarchy.

Step 1: Identify an activity, situation, or fear you would like to try. Maybe you can think of something that you would like to change in your life. Is there something your family or friends do that you are not able to do because of fear or worry?

Step 2: Identify specific situations you avoid for the activity, situation, or fear in Step 1.

Step 3: Rate each item in Step 2 on the 0-100 SUDS scale from zero (no discomfort) to one hundred (extremely uncomfortable).

Repeat steps 2 and 3. Add as many situations as you can think of and rate how much worry or discomfort you believe you will feel for each item using the SUDS scale.

Step 4: Put your situations SUDS ratings in order from low to high.

Developer Notes: Building blocks graphic / steps to completion visuals.