



DSR Quarterly Newsletter

October 2005

The Irony of It All: Gettin' Back to Basics

By: Lisa Dixon

I'm a fan of Roz Chast, which means I appreciate life's ironies. I found the cartoon to the right on the web. (Check her out if you haven't seen her stuff— you can Google her.) The irony of the day is that in spite of the fact that we have e-mail, cell phones, the internet, blackberries, and scads of new technologies to communicate, somehow or another, my life is full of communication gaps! I do not always know what's going on in the work of members of our Division. I do not know all of the comings and goings of staff. And I am sure I miss life events such as birthdays, and weddings. I can usually catch when babies are on the way. Of course, it doesn't help that we still do not have appropriate signs when you get off of the elevator at 737...

Well, even if the School does not provide us with signs, we can take matters into our own hands. The purpose of this newsletter is to provide a forum to share information



about yourselves with each other and with our colleagues. Each newsletter will have a Director's Column as well as a column from both Center North and Center South that introduces new projects or updates old projects. We will have a fo-

rum to share our successes in publications and presentations, as well as other notable news that may be more personal. Colleen Davin and Samantha Stokes will help me edit this effort. Please enjoy, contribute, and Read-At-Your-Own-Risk.

Center North: HIV Care for Substance Users

In June 2005, Dr. Himelhoch received the H. McKee Jarboe Award from the Department of Psychiatry. On September 1, 2005, Seth Himelhoch will begin work on his NIDA sponsored K-23 project entitled HIV Care for Substance Users with Psychiatric Disorders. The goal of this project is to use a community based participatory research format to develop an assertive case management intervention. This intervention will target HIV+ individuals with co-occurring psychiatric and substance use disorders who are at risk of not receiving HIV related medical care, and then conduct a randomized control trial to test the preliminary effectiveness of this intervention. The training plan includes didactic coursework in advanced biostatistics, design of clinical trials, qualitative methods, and tutorials in community based participatory research, feasibility and effectiveness trials and case management interventions. Seth also recently received an



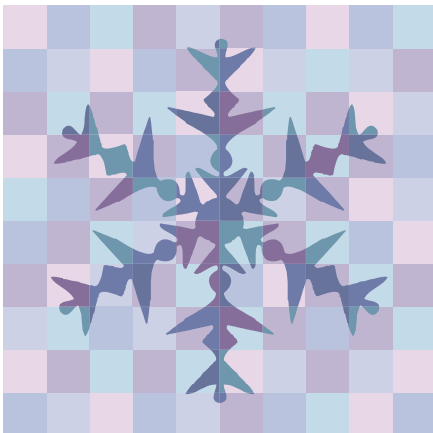
Seth Himelhoch,
M.D., M.P.H.

intramural grant award from the University Of Maryland School Of Medicine to begin work on his project entitled Adapting and Pilot testing Telephone Psychotherapy for Depressed HIV+ Individuals.

The goal of this project is to adapt and pilot an efficacious

Telephone psychotherapy and telephone care management program targeting HIV+ depressed individuals in adult outpatient HIV clinics. This is important as individuals with HIV have a prevalence of depression that is at least twice that of the general population, but often have great difficulties accessing clinic based mental health treatment. On this topic he has recently written a paper (co-authored by Dr. Deborah Medoff) entitled: Efficacy of Antidepressant Medication among HIV + Individuals with Depression: a Systematic Review and Meta-Analysis. This paper has been accepted for publication in the journal for AIDS Patient Care and STDS.

"Individuals with HIV have a prevalence of depression that is at least twice that of the general population."



Looking Ahead

The winter issue of the DSR Newsletter will be coming out February 1, 2006. We will ask for your input starting sometime after December 1 of this year. In the meantime, DON'T think snow yet!

Center South: Outcomes Management Project

What is this “OMS” I keep hearing about?

by S. Stokes & D. Seybolt

The Systems Evaluation Center (SEC) has been working with the Maryland Mental Hygiene Administration (MHA) since late 2001 to develop and implement an outcomes system for the Maryland public mental health system (PMHS). Initially, the SEC provided technical assistance to a PMHS Steering Committee comprised of system stakeholders. The evaluation plan developed, now referred to as the “Outcomes Management System” (OMS,) included 13 life domains to be measured across five age groups. Potential measures for each domain and age group were identified through literature reviews of existing instruments, reviews of federal and state reporting requirements, and a review of instruments or tools already within use in the Maryland PMHS. The Steering Committee made their decisions based on tested reliability and validity, cost, and feasibility.

Drawing on this comprehensive plan, the SEC was then asked to develop and implement a Pilot Phase. The purpose of the pilot phase is: 1) to test the utility of the specific measures chosen to evaluate Maryland’s PMHS; and 2) to develop and test a process for collecting outcomes information across multiple providers across the state. It includes four of the life domains: psychiatric symptomatology and symptom distress, functioning (including employment and school performance), housing, and legal system involvement.

The OMS Pilot Phase for adult mental health consumers is currently being implemented. Mental health providers serving this population were recruited to volunteer for the OMS Pilot Phase through a large number of Provider Interest meetings. Currently, 18 mental health service providers, representing 32 individual programs, are participating across the state. Volunteer programs include outpatient mental health clinics, psychiatric rehabilitation programs, mobile treatment teams, and case management programs.

During the Pilot Phase, outcomes are collected on all consumers served in volunteer programs for approximately one year. Data is collected upon entry into the program, every 6 months in conjunction with treatment or rehabilitation planning, and at discharge from the program. The OMS questionnaire is administered as an informal interview with staff members reading the questions and recording the consumers’ answers. Staff are allowed and encouraged to have discussion with consumers based on their answers and it is hoped that this process will help inform and enhance treatment and rehabilitation planning.

Data is submitted to the University via the web or fax using the Teleform© system. For the fax option, hardcopy forms are filled out and faxed directly into a server; no data

“Currently 18 mental health service providers, representing 32 individual programs, are participating across the state.”

entry is required. For quality assurance purposes, a visual scan of each form is conducted before the information enters the database. The web form uses a pdf format.

Data collection for the adult component began in November 2004 and will continue through June 2006. To date, we have received 909 completed questionnaires. Currently, we are cleaning the data and hope to produce data reports in the near future. In terms of testing the content of the questionnaire and the process of data collection, provider feedback has generally been that the OMS is “not as bad as we thought it would be.”

We plan to recruit for the child and adolescent portion (6-17 year olds) of the Pilot Phase this fall, once appropriately staffed to do so. The remaining populations, young children (3-5 years) and infants (0-2 years), will follow with considerably shorter data collection periods and more targeted recruitment efforts.

Key SEC members contributing to this project include: Di Seybolt, Sandy Sundeen, Samantha Stokes, Natasha Durant, Linda Schools, Laurel Kiser, Howard Goldman, and Fred Osher. Yes, it takes a village to create an outcomes management system.

Outcomes Management System



Outcomes Mean Success

Professional News

Howard Goldman has been working on a contract proposal to the Social Security Administration with Westat that included David Salkever of UMBC as well as Bob Drake and Gary Bond. It is called the MH Treatment Study and proposes to offer supported employment services and a range of financial enhancements to SSDI beneficiaries in 20 communities to see if they can return to work. Howard will also be working with Mark Weist, who received a grant from the federal government to enhance his center on school mental health. The grant will involve some policy work.

At the request of Dr. Alan Bellack, Howard Goldman and Sandy Sundeen have begun an evaluation of the MIRECC. They will be looking at all aspects of MIRECC activities and making recommendations to Dr. Bellack and the rest of the administrative staff regarding the current status and future directions of the organization.



Comings and Goings

New Faces

- Sue Boyd, a Psychiatrist trained at University of Maryland School of Medicine, started at the DSR 7/1/05. Sue recently received a grant from the Robert Wood Johnson Foundation to use geocoding techniques to determine whether crime rates are increased around substance abuse treatment centers. She did a research fellowship at the National Institute of Drug Abuse and also does clinical work at the VA and at Psychiatric Urgent Care.
- Jason Peer, a Clinical Psychology intern in the SMI track, will be working part-time at Center South. Currently, Jason is working to enter data from a NAMI sponsored Family Needs Assessment study and will do some analyses.



- Ruth Ann McCormick was recently hired as the Program Coordinator for a SAMHSA grant to reduce the use of seclusion and restraints in child and adolescent inpatient and residential treatment facilities. Ruth Ann is a nurse who is doctorally prepared and has worked in the clinical as well as academic setting. She received her doctoral degree from The Catholic University of America and has taught nursing in New York state and Washington, D.C. In addition, clinically, she has practiced in inpatient psychiatric settings, mainly at Washington Adventist Hospital in Takoma Park, Maryland. She worked in an outpatient psychiatric program (PHP) for seven years as the Assistant Program Coordinator. Prior to that she worked for two different counties as a Community Health Nurse.
- Charisse Hunter was recently hired as the new Division Manager of Center North. She comes to us from the Johns Hopkins School of Public Health, where she worked from Nov 2003 - June 2005 managing the Disease Prevention and Control division. Prior to that, she was a Department Administrator at Weill Medical College of Cornell University/New York-Presbyterian Hospital. She has over 10 years experience working in the healthcare and research administration fields. She has a B.S. in Organizational Management as well as a M.S. in Organizational Leadership from Mercy College

Going to Other Places

- Tyla Brown recently left Center South. She received her degree in Marketing from the University of Maryland and has gone on to pursue other interests.
- Tina Marshall has also left Center South. Tina has decided to become a Consultant and we wish her the best of luck.



P u b l i c a t i o n s & G r a n t s

- Howard Goldman finished drafting his two chapters in a book with historian Gerald Grob on Federal MH Policy from Truman to Bush. Howard was also a speaker at The Eighteenth NIMH Conference on Mental Health Services Research “Quality of Diabetes Care among Individuals Living with Serious Mental Illnesses”, Bethesda, MD, July 2005.
- Julie Kreyenbuhl received a 2005 NARSAD Young Investigator Award for a grant entitled, ‘Adherence to Medications for Diabetes Among Patients with Schizophrenia’. The funding period is 7/1/05-6/30/07.
- The Children’s Outcome Management Center is now able to offer demos to anyone interested in learning about the broad spectrum of real-time data reporting capabilities the KIDnet system can provide. For those not aware, KIDnet is a Web-based system which allows clinicians and program administrators a range of outcome evaluation tools at the click of a mouse, once clinical information has been entered into the system. Please call 6-5378, or email sherr@psych.umaryland.edu if you would like further information.
- Jim Freeman is finishing up with the VA Homelessness Study in a couple of months. New projects that he will be coordinating are the MOVE! (Managing Overweight/Obese Veterans Everywhere) study with Dr. Goldberg, and the NIMBY project with Dr. Boyd which involves geo-coding and will be looking at crime statistics near substance abuse clinics.

- Lisa Dixon, Richard Goldberg and Seth Himelhoch have started work on the STIRR project in collaboration with Stan Rosenberg of Dartmouth. This project will test a model for prevention and treatment of Hepatitis and will be conducted at Creative Alternatives and PEP in Baltimore. Terrence Clemmons will coordinate this project.
- Lisa was also a guest of Dr. Jan Greenberg at the University of Wisconsin School of Social Work Program focusing on Family Issues In SMI.
- Aaron Murray-Swank was recently awarded a VA Research Career Development Grant, “Enhancing Implementation of Family Psychoeducation for Schizophrenia”. He also had a paper accepted by Psychiatric Services; “Religiosity, psychosocial adjustment, and subjective burden among family caregivers of persons with serious mental illness.”
- Lisa Dixon and Alicia Lucksted are PI and Co-PI on a new randomized trial of the Family to Family Education Program. This 4-year R01 will be conducted in Baltimore City and County, and Montgomery, Howard and Frederic Counties.
- Sue Boyd started work on a new project 7/1/05. It is titled “Increasing Access to Substance Abuse Treatment: Resolving the “Not in My Backyard” Phenomenon Regarding Substance Abuse Treatment Centers.” Sue is the PI and Lisa Dixon, Deb Medoff, Karen Wohlheiter, LiJuan Fang, and Jim Freeman are working on the project. Sue has received a \$300,000 grant from the Robert Wood Johnson Foundation, Substance Abuse Policy Research program for the period of 2005-2007.

Recent Papers and Papers in Press

- Cook, J., Leff, S., Blyler, C, Gold, P, Goldberg, R., Mueser, K., Toprac, M., McFarlane, W., Shafer, M., Blankertz, L., Dudek, K., Razzano, L, Grey, D., Burke-Miller, J. (2005). Results of a multi-site randomized implementation effectiveness trial of supported employment interventions for individuals with severe mental illness. *Archives of General Psychiatry*. 62: 505-512.
- Daumit G, Goldberg R, Anthony C, Dickerson F, Brown C, Kreyenbuhl J, Wohlheiter K, Dixon L: Physical Activity Patterns in Adults with Severe Mental Illness, *Journal of Nervous and Mental Disease*, in press.
- Dickerson F, Brown C, Kreyenbuhl J, Fang L, Goldberg R, Wohlheiter K, Dixon L: Obesity among Individuals with Serious Mental Illness: Comparison with a Matched General Population Sample and Clinical Correlates, *Acta Psychiatrica Scandinavica*, in press
- Dickerson F, Goldberg R, Brown C, Kreyenbuhl J, Wohlheiter K, Fang L, Medoff D, Dixon L, Diabetes Knowledge Among Persons with Serious Mental Illness and Type 2 Diabetes, *Psychosomatics*, in press.
- Goldberg R, Himelhoch S, Kreyenbuhl J, Dickerson F, Hackman A, Fang L, Brown C, Wohlheiter K, Dixon L. Predictors of HIV and Hepatitis Testing and Related Service Utilization Among Individuals with Serious Mental Illness, *Psychosomatics*, in press
- Goldberg, R. (in press). A multi-faceted approach to helping HIV/HCV co-infected adults with serious mental illness. *AIDS*.
- Goldberg, R., Himelhoch, S., Kreyenbuhl, J., Dickerson, F., Hackman, A., Fang, L., Brown, C., Wohlheiter, K., and Dixon, L. (in press). Predictors of HIV and hepatitis testing and related service utilization among individuals with serious mental illness. *Psychosomatics*.
- Leff, H., Cook J., Gold, P., Toprac, M., Blyler, C., Goldberg, R., McFarlane, W., Shafer, M, Allen, I., Comacho-Gonsalves, T., and Raab, B. (in press). Inside employment interventions: Effects of job development and job support on competitive employment of persons with severe mental illness. *Psychiatric Services*.
- Murray-Swank A, Lucksted A, Medoff D, Yang Y, Wohlheiter K, Dixon L: Religiosity, psychosocial adjustment, and subjective burden among family caregivers of persons with serious mental illness, *Psychiatric Services*, in press
- Razzano, L., Cook, J. Burke-Miller, J., Mueser, K., Pickett-Scenk, S., Grey, D., Goldberg, R., Blyler, C., Gold, P., Leff, H., Lehman, A., Shafer, M., Blankertz, L., McFarlane, W., Toprac, M., Dudek, K. (in press). Clinical factors associated with employment among people with severe mental illness: Findings from the Employment Intervention Demonstration Program. *The Journal of Nervous and Mental Disorders*.
- Resnick S, Rosenheck R, Dixon L, Lehman A: Correlates of Family Contact with the Mental Health System: Allocation of a Scarce Resource, *Mental Health Services Research*, 2005 Jun;7(2):113-21.
- Boyd SJ, Tashkin DP, Huestis M, Heishman SJ, Dermand JC, Simmons MS, & Gorelick DA: Strategies for quitting among non-treatment-seeking marijuana smokers. *American Journal on Addictions* 14:35-42, 2005.
- Gorelick, David A.; Kim, Yu Keong; Bencherif, Badreddine; Boyd, Susan J; Nelson, Richard; Copersino, Marc, Endres, Christopher J, Dannals, Robert F; Frost, J. James: Imaging Brain Mu-Opioid Receptors in Abstinent Cocaine Users: Time Course and Relation to Cocaine Craving. *Biological Psychiatry*, 57:1573-1582, 2005.

In other news...

CENTER SOUTH NEWS: DATA INFRASTRUCTURE PROJECT

The Mental Hygiene Administration has a contract with the Systems Evaluation Center to carry out several responsibilities related to its SAMHSA Data Infrastructure Grant. The SEC will assist MHA in meeting the requirements of SAMHSA's Universal Reporting System, which requires each state to provide data about the publicly funded mental health system to the federal government annually on the first of December. Failure to do so could result in decrease or loss of the State's Mental Health Block Grant. As a part of this project, the SEC has received comprehensive claims data from the Public Mental Health System (PMHS). This data is being organized by Qiang Qian with the assistance of Tim Santoni. Qiang has created a user-friendly computer program for accessing and displaying several of the data elements.

The SEC is also presenting a series of training sessions on data utilization for stakeholders in the PMHS including MHA staff, CSA (local mental health authority) staff, service providers and mental health advocates. The first sessions were needs assessments. Coming up soon will be sessions on presenting and analyzing data for providers and for MHA/CSA staff. Providers will also focus on differentiating quality improvement and research activities. The MHA/CSA group will also have an opportunity to review and discuss two different research studies of the same topic but with different conclusions. Later sessions will focus on using data for program management for providers and analysis of trends and using data for planning for the MHA/CSA group. The advocate trainings are still being planned because we are waiting until we have adequate consumer input. We plan to wrap up the current series with a conference on the use of outcomes for system management at all levels.

Have any questions, comments, or an idea for an article in the next newsletter? Please contact:

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