Scope of Services provided by the Mental Health Service Line (2015)

The Mental Health Service line provides services to Veterans with a wide variety of mental health needs at its main facility in Des Moines and through its Community Based Outpatient Clinics in Knoxville, Mason City, Fort Dodge, Marshalltown, and Carroll.

Acute Psychiatric Care

Psychiatric care for the acutely mentally ill patient is provided by staff with specialized expertise in that area in our 10 bed unit located on 3A of the main hospital facility in Des Moines.

Suicide Prevention

Suicide Prevention Program follows a public health model which includes outreach, education, case management and access. The program is responsible for managing the crisis line consults and providing referrals to appropriate providers.

Emergency Department / Urgent Care

Mental Health input is provided to the Emergency Department 24/7. During non-administrative hours this is provided through on-call arrangements. During administrative hours, urgent care is provided through a triage nurse system from the mental health outpatient clinic.

Mental Health Residential Rehabilitation Treatment Programs (MHRRTP)

The Central Iowa Mental Health Residential Rehabilitation Program is based on recovery-oriented, co-occurring capable care noting that co-occurring issues and conditions are the expectation, not an exception in service delivery. We work to provide treatment that is patient centered, individualized and that incorporates patients strengths and preferences in treatment. We have tracks of evidence based programming to meet the needs of Veterans with mental health issues, post trauma stress disorder, substance use disorders, homelessness and unemployment. We have the individual and group support of Peer Support Specialists along with nursing, nutrition and living well groups to promote a holistic view of recovery. Homeless and unemployed Veterans work with our domiciliary and transitional work staff on job searches, keeping a job, housing, budgeting and discharge planning. Veterans work individually with an assigned case manager and a treatment team of professionals to develop an individualized plan of care that meets their unique needs along with a discharge plan that involves a variety of VA and community supports. Veterans in our residential programs reside on the VA campus in Des Moines in Building 5. The building has three floors and houses 60 Veterans. Our length of stay is based on need.
but usually ranges from 56 days for substance abuse and mental health issues and 120 days for Veterans with housing and employment needs.

**MHICM - Mental Health Intensive Case Management – Knoxville, Marshalltown and Des Moines areas**

This program is a nationally developed program with admission and discharge criteria that includes those patients with serious mental illness and a history of high utilization of hospital bed days of care who would best benefit from intensive case management. The goals are to assist patients in functioning at the highest possible level in the least restrictive environment. This program is highly effective in decreasing re-hospitalizations. Each case manager has approximately 15 clients based on client need.

**Psychosocial Residential Rehabilitation Treatment Program (PRRC) – Des Moines**

PRRC provides a short and long-term supportive environment in which clients receive assistance with community adjustment, interpersonal relations, and other issues. The program is for veterans with MH issues who need ongoing monitoring of emotional needs. Programming includes classes and structure, helping transition from inpatient to outpatient status, and community maintenance.

**Therapeutic and Supported Employment Services (TSES)**

The VA’s Therapeutic and Supported Employment Services (TSES) was established for Veterans whose lives have been disrupted by mental illness or coexisting physical disabilities, and who would benefit from a supportive, stable, structured approach to work-related goals. TSES utilizes work-based treatment to facilitate and strengthen vocational rehabilitation potential and to provide a continuum of vocational skill development services. The TSES programs include Compensated Work Therapy (CWT), Vocational Assistance, Supported Employment (SE), and the Homeless Veterans Supported Employment Project (HSVEP).

**Outreach and Supportive Services to Homeless Veterans**

The VA is committed to ending homelessness among Veterans. In addition to getting those Veterans who are currently homeless into stable living situations, the aim is work to prevent Veterans from ever winding up homeless. The comprehensive plan expands efforts for education, jobs, health care and housing.

**Outreach:**

**Health Care for Homeless Veterans (HCHV)**
HCHV is an outreach program that identifies veterans in the homeless in shelters, camps and other locations and brings them to the VA for medical and mental health care.

Veterans Justice Outreach

The Veterans Justice Outreach worker links with jails, law enforcement and court systems to assist these entities to find alternatives to incarceration for homeless Veterans in the criminal justice system.

Prisoner Re-Entry Specialist

A prison re-entry specialist goes into state prisons and assists Veterans who are being discharged to determine eligibility to VA services, determine needs, and connect them with services at the VA or community agencies.

Supportive Services:

Grant Per Diem

The VA's Homeless Grant and Per Diem Program is offered to fund community agencies providing services to homeless Veterans. The purpose is to promote the development and provision of supportive housing and/or supportive services with the goal of helping homeless Veterans achieve residential stability, increase their skill levels and/or income, and obtain greater self-determination. The GPD program enables Veterans to be housed in residential facilities around the metro and facilitates connecting these veterans with VA medical and mental health services.

Housing and Urban Development – Veterans Assisted Supported Housing

The Department of Housing and Urban Development and the Department of Veterans Affairs Supported Housing (HUD-VASH) Program, through a cooperative partnership, provides long-term case management, supportive services and permanent housing support. Eligible homeless Veterans receive VA provided case management and supportive services to support stability and recovery from physical and mental health, substance use, and functional concerns contributing to or resulting from homelessness.

Mental Health Outpatient Services

Veterans are provided outpatient mental health services at varying levels of complexity. Assessments, patient education, nutritional assessments, depression screenings,
substance abuse screening, and preventive health screenings are tools to assist in formulating the plan of care. Interdisciplinary services are available to meet Veteran specific mental health needs. Services are delivered by four integrated teams, following the Behavioral Health Integrated Program model.

**Community Based Outpatient Programs - CBOCs – Knoxville, Mason City, Fort Dodge, Marshalltown, and Carroll**

Outpatient mental health services are also provided within our CBOCs. This is to increase services in rural areas so no veteran is left without resources to turn to when needed. Examples of services include medication management/administration, group and individual therapies. Some services in the CBOCs are provided through telemental health.

**Military Sexual Trauma Treatment**

Although many who are exposed to sexual trauma are remarkably resilient and do not have chronic difficulties, trauma can be associated with a number of difficulties including Post Traumatic Stress Disorder (PTSD), depression, other anxiety problems, or problems relating to others. Problems related to MST are treated here at CIH through learning coping skills in individual or group therapy (CBT), through support groups, through medication management (Mental Health Outpatient), or through evidence based practices such as Prolonged Exposure or Cognitive Processing Therapy. There are several clinicians here at CIH who are trained in CBT, PE, and CPT. These treatments all focus on improving our Veteran’s quality of life through skill development, learning how to change behavior, and learning how to identify and change troubling thoughts and memories. Outpatients, as well as, Domiciliary patients have the option to utilize these therapies.

**Post Traumatic Stress Disorder Treatment**

**Outpatient Program**

The primary treatment modality provided by PCT clinicians is trauma-focused psychotherapy (e.g., Cognitive Processing Therapy and Prolonged Exposure). We also may provide graded in-vivo exposure, as well as certain types of time-limited preparatory treatments (e.g., PTSD symptom management skills training) to increase a Veteran’s readiness to engage in trauma-focused treatment. Finally, the PCT offers general support and process groups for Veterans with PTSD-related concerns.

**Residential Program**

The PTSD Track, as part of the overall Domiciliary co-occurring disorders treatment structure, provides both group therapy for PTSD and individual trauma-focused psychotherapy.
Substance Use Disorder Treatment

Outpatient Program
The outpatient SUD program is designed to assist Veterans in addressing their co-occurring mental health and substance use disorder needs. An intake is completed to determine the appropriate level of care (using the American Society of Addiction Medicine criteria), initiate appropriate treatment (both group and individual), and make referrals to other appropriate services to address their psychosocial needs. Outpatient treatment is used to provide a continuum of care before and after admission into MHRRTP, if needed. Outpatient SUD treatment programming is geared to address: relapse prevention, early recovery skills, emotions management, healthy relationships, and harm reduction. A variety of support/process groups are offered, according to stage of change, to allow Veterans to have a safe place to come and seek support from staff and fellow Veterans. Treatment recommendations are Veteran centered and are made in collaboration between Veteran and outpatient SUD staff. The goal of the outpatient SUD program is to help Veterans meet their recovery goals, while teaching them skills and offering resources and supports to do so. Evidenced based treatment modalities (Motivational Enhancement Therapy and Behavioral Couples Therapy) are used to address substance use disorders.

Residential Program
The SUD Track, as part of the overall domiciliary co-occurring disorders treatment structure, provides group therapy for SUD to include but not limited to CBT, DBT informed treatment, Matrix, 12-step Facilitation, Stages of Change, Relapse Prevention, and case management. Veterans have the opportunity to attend 12-step meetings, both on the VA campus and in the community, in order to develop a strong recovery support network. Veterans in the residential treatment track are expected to remain engaged in SUD services by following their residential course of care with outpatient treatment.

Evidence Based Psychotherapies
Each of our four outpatient BHIP teams has two psychotherapists, both of whom have been trained and, in some cases, “VA-recognized” on one or more evidence-based psychotherapies. Similarly, our PTSD and SUD teams have therapists trained and, in most cases, VA-recognized on evidence-based psychotherapies specific to their particular focus—such as Prolonged Exposure and Cognitive Processing Therapy for PTSD.

Consistent with our declared emphasis on evidence-based psychotherapies, our Psychology Internship Training Program recruits applicants only from the major, evidence-based graduate training programs. This strategy has allowed us not only to benefit from the empirical expertise of these outstanding trainees, but also to bring them onboard as new hires at the end of their internship year—five in the past five years.
**Integrated Care Services**

Primary Care Mental Health Integration (PCMHI) Services are provided in collaboration with PC through a collocated PCMHI team consisting of a Psychiatrist, a Clinical Pharmacist Specialist, two Psychologists and an RN.

Mental Health services to older Veterans are provided through Psychologists working into the CLC as well as into the Palliative Care team. A Psychologist is also assigned to the Home Based Primary Care team.