Adapting and Implementing Caring Contacts for Suicide Prevention in VA

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- Disclaimer: The views expressed in this presentation are those of the author and do not necessarily reflect the position or policy of the Department of Veterans Affairs or the United States Government.
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  • VISN 6
  • VISN 10
  • VISN 12
  • VISN 19
  • VISN 22
  • VISN 23

• Rocky Mountain MIRECC
• South Central MIRECC
Improving Suicide Prevention

• Transitions in care (e.g., discharge from the hospital) are critical time periods for suicide prevention

• The majority of deaths by suicide occur within 30 days after discharge from the hospital or emergency department (ED), with most occurring within one week

• We wanted to improve care during the critical transition following ED discharge in our VA region (VISN 16) with Caring Contacts
Caring Contacts

• Sending patients who are suicidal brief, non-demanding expressions of care and concern at specified intervals over a year

• The theory is that the contacts serve to make people feel connected to others (and therefore reduce suicide)
Data on Caring Contacts

- Significant reductions in suicide deaths\(^2,^3\), suicide attempts, and suicide ideation at one and two-year follow-up\(^4,^5,^6\)
- Feasible and acceptable with military and veteran populations\(^7,^8\)
- Effective with active-duty military populations\(^9\)
- Cost effective in a simulation study\(^10\)
- VA/DOD clinical practice guidelines suggest mailing CC to address barriers to follow-up or for those who refuse care\(^11\)
- US Surgeon General recommended considering Caring Contacts during gaps in care, including following crisis line calls\(^12\)
Dear «FirstName»

It has been a short time since you were here at the Newcastle Mater Hospital, and we hope things are going well for you.

If you wish to drop us a note we would be happy to hear from you.

Best wishes,

Dr Andrew Dawson

Dr Ian Whyte

Newcastle Mater Misericordiae Hospital
Bag 7, Hunter Regional Mail Centre NSW 2310
Phone: 49 211 283 Fax 49 211 870
Pilot to Adapt and Implement

• Partnered with VISN 16 and Central Arkansas Veterans Healthcare System

• VA QUERI Partnered Implementation Initiative (PII) to adapt, implement, and evaluate Caring Contacts in the emergency department
  • 1-year planning & pilot
Qualitative Interviews

Advisory Board

Implementation Pilot

Implementation Toolkit
Qualitative Interviews with ED Stakeholders
N=11

I’m a Veteran. I feel like that would be a wonderful thing to let people to know that is not just from a large organization, but there are people here who actually care about you.

Wording suggestion: ‘It was an honor to serve you.’

Feedback on schedule for sending:
Send 1st card within the first week & add a contact on Veterans Day.
Veterans overwhelming thought that Caring Contacts could be helpful to Veterans who are suicidal (83%).

63% indicated that a postcard sent in a private envelope was their first or second choice.

25% endorsed text messages as their first or second choice.

They didn’t care for the image of the dog and instead preferred a patriotic themed image.

Reger et al., 2018
Advisory Board

- Veteran
- ED Nurse Manager
- ED Health Tech & Veteran
- ED Social Worker
- ED Nurse
- Lead Suicide Prevention Coordinator
- Suicide Prevention Coordinator
- Psychiatrist, Outpatient Clinic
- Associate Nurse Executive for Research
- Health System Specialist for Innovations
- Associate Director of Patient Care Services
- VISN 16 Mental Health Lead
- Director for Clinical Services, Rocky Mountain MIRECC
- Implementation expert
- Caring Contacts expert
Process of adapting Caring Contacts

• Used data from Veteran preferences, ED stakeholder feedback, and input from Advisory Board

• Developed:
  • Variety of messages
  • Variety of layouts/info included around message

• Iterative process of
  • Presenting to Veteran groups
  • Making changes
  • Presenting again to Veterans groups & Advisory Board
Dear Mr. Smith,

It was an honor to serve you in the emergency department. We are here if you need us. Should you need anything, please contact us.

Lori Davis, RN and Your Emergency Department Team
501-257-5683

Central Arkansas Veterans Healthcare System | 4300 W 7th St. 118/LR CC | Little Rock, AR 72205
Dear Ms. Squirrel

"Who kept the faith and fought the fight, the glory theirs and the duty ours."
-Wallace Bruce

We value your health and are honored to serve you in the
Lori Davis, RN and Your Emergency Department Team
501-257-5683

Dear Ms. Squirrel

All of us at CAVHS Emergency Department wish you a happy birthday and good health in the years to come!
Lori Davis, RN and Your Emergency Department Team
501-257-5683
A positive primary suicide screen triggers Caring Contacts

Veterans who screen positive in the ED will receive a different card for each time point below:

• First week after discharge
• Months 1, 2, 3, 4, 6, 8, 10, 12
• Veterans Day
• Birthday

Once a week, admin staff pull the list of primary screens to send Caring Contacts & document in CPRS
Implementation Tools & Strategies

- Implementation toolkit
  - Implementation planning guide
  - Standard operating procedures
  - Card templates
  - Educational materials
  - Research summaries
- Facilitation to support facilities in implementation
Implement & Evaluate

• VA QUERI Partnered Implementation Initiative (PII) to implement and evaluate Caring Contacts in the emergency department using a hybrid type 2 effectiveness-implementation design
• Grant supports implementation strategy (facilitation) and evaluation
• Facility provides staff and materials
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<th>Data source</th>
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<td>Adoption</td>
<td>Continued use of CC after implementation</td>
<td>Administrative data</td>
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<td>Implementation fidelity</td>
<td>Date sent and alignment with schedule Content of CC</td>
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<td>Effectiveness: suicide related behavior</td>
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<td>Effectiveness: service utilization</td>
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<td>Staff perspective</td>
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<td>Veteran perspective</td>
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<td>Qualitative interview</td>
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<td>Facilitation, type of activities &amp; amount</td>
<td>Types of facilitation activities, time spent, stakeholders engaged</td>
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<td>Facilitation, knowledge transfer</td>
<td>Facilitation core competency ratings and process of learning facilitation</td>
<td>Facilitation Core Competency Checklist Facilitator debriefs</td>
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Outcomes for pilot site at 1 year

- **Reach**
  - 532 unique positive screens
  - 475 mailed CC (89%)

- **Cost**
  - 10% time of ED Nurse Manager for 6 months for planning
  - 50% time of a program support assistant
  - Total material and postage costs to send all 11 cards over the course of 1 year was $8.50 per veteran
    - Material costs for 1 Veteran: $2.45
    - Postage costs for 1 Veteran: $6.05

*Landes et al., Frontiers in Psychiatry, 2021*
Qualitative Interviews
Veterans Receiving CC
N=10

“I felt like my life matters to ‘em, you know?”

“I appreciate them sending the cards out though to check on me because, you know, I have several suicidal attempts. That made me feel good, that hey, I’m being thought about.”

“It made me feel like I wasn’t a number. Like it was more personable and seems like they really took the time out to care...”

Landes et al., Frontiers in Psychiatry, 2021
Fellowship & Internship Opportunities

• Postdoctoral research fellowship position
  • South Central MIRECC in Little Rock
  • Open to psychologists, psychiatrists, pharmacists, nurses, & social workers
  • Recent fellows have received HSR&D Career Development Awards, QUERI Advancing Diversity in Leadership Awards, and Implementation Research Institute Fellowships

• Psychology internship programs
  • Central Arkansas Veterans Healthcare System
  • University of Arkansas for Medical Sciences
Questions?
Contact Information

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References


References


11. VA DOD CPGs

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