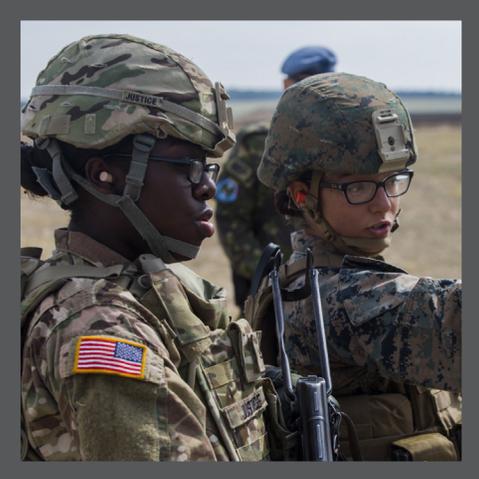


Psychological Health Center of Excellence Annual Report 2017



PSYCHOLOGICAL HEALTH CENTER OF EXCELLENCE

The Psychological Health Center of Excellence (PHCoE) is the nexus of psychological health expertise in the Defense Health Agency (DHA) and resides in the Research and Development (J-9) Directorate. PHCoE focuses on seven operational domains: implementation science; surveillance and medical intelligence, prevention and outreach; evidence synthesis and gap analysis; health services and population research; policy analysis and development; and special projects.

MISSION

Improve the lives of our nation's service members, veterans, and their families by advancing excellence in psychological health care, readiness, and prevention of psychological health disorders.

VISION

Be the trusted source and partner in facilitating implementation of evidence-based research and practices across the continuum of care that will enhance the psychological health of the military community.

HISTORY

PHCoE was first established in 1995 as the Gulf War Health Center at Walter Reed Army Medical Center, with a mission to care for Gulf War veterans with war-related physical and mental health challenges. That same year the Department of Defense (DoD) instituted the Comprehensive Clinical Evaluation Program (CCEP) to provide systematic clinical evaluations for the diagnosis and treatment of conditions connected to service in the Gulf War. The Gulf War Health Center developed the tertiary treatment component of the CCEP, a three-week specialized care program for veterans with medically unexplained physical symptoms.

The Gulf War Health Center was then re-established in 1999 as the Deployment Health Clinical Center (DHCC) – one of three DoD centers of excellence for deployment health, along with the Armed Forces Health Surveillance Center and the Naval Health Research Center. The center was responsible for coordinating the evaluation of veterans seeking care for post-deployment health concerns using the DoD/VA Post-Deployment Health Clinical Practice Guidelines (PDH CPG), which replaced the CCEP in 2001.

In 2008, the National Defense Authorization Act (NDAA) provided a congressional mandate for the creation of centers of excellence for posttraumatic stress disorder (PTSD) and other mental health conditions and traumatic brain injury within DoD. In turn, DHCC became a center under the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury (DCoE). The NDAA charged DCoE to implement plans and strategies for the prevention, diagnosis, mitigation, treatment, and rehabilitation of PTSD and other mental health conditions.

In February 2016, DCoE and its centers, including DHCC, transitioned to DHA from the U.S. Army Medical Research and Materiel Command. In October 2017, DHA completed the consolidation of DCoE and its centers and retired the DCoE brand. DHCC officially changed its name to the Psychological Health Center of Excellence to better align with its current mission.

IMPLEMENTATION SCIENCE

PHCoE's implementation science initiatives are related to the systematic dissemination, uptake, and sustainment of evidence-based practices to improve health care delivery and outcomes. PHCoE applies methods of implementation science to systematically study and promote the adoption of evidence-based practice change in pilot and enterprise settings.

ONGOING PROJECTS AND INITIATIVES

- Conduct knowledge translation through implementation of the [DoD/VA Practice-Based Implementation \(PBI\) Network](#), an infrastructure that serves to more rapidly translate psychological health research findings by facilitating practice changes
- Develop evidence-based and policy-based [clinical support tools](#) for psychological health conditions and substance use disorder to accompany DoD/VA clinical practice guidelines
- Develop and implement substance use disorder trainings for military providers

KEY 2017 ACCOMPLISHMENTS

- Published one book chapter, 28 journal articles and nine [posters](#), and provided 16 conference presentations
- Completed the annual Psychological Health Implementation Pilot: Technology into Care to implement a program designed to facilitate the use and integration of mobile and web applications in clinical practice, in collaboration with the National Center for PTSD and the DHA Connected Health Branch
- Supported two PHCoE Psychological Health webinars on the VA/DoD clinical practice guidelines for PTSD and opioid therapy for chronic pain
- Developed five opioid and four PTSD [clinical support tools](#) to accompany DoD/VA clinical practice guidelines
- Developed and implemented DoD Opioid Prescriber Safety Training (23,712 DoD providers trained in 2017) and Buprenorphine Waiver Training (189 DoD providers trained in 2017)
- Served as psychological health lead for the development, planning and execution of the 2017 DCoE Summit that offered 14 psychological health continuing education credits for providers
- Facilitated three [Chaplain Working Group webinars](#) for DoD chaplains on psychological health topics

Psychological Health Clinical Support Tools

Clinical support tools help health care providers deliver evidence-based treatment that is consistent with Department of Veterans Affairs (VA) and Department of Defense (DoD) clinical practice guidelines. The VA and U.S. Army Medical Command partner with the Psychological Health Center of Excellence (PHCoE) to develop clinical support tools to accompany the clinical practice guidelines for psychological health conditions. These tools include educational materials and decision aids for primary and specialty care providers, patients and families.

To download the following clinical support tools, visit the clinical practice guidelines sections of the VA website healthquality.va.gov or PHCoE website pdhealth.mil. Army, Air Force and Navy facilities can order hard copies of the tools on the Army Medical Command Quality Management Office website qmo.amedd.army.mil.

MAJOR DEPRESSIVE DISORDER TOOLS

Tools that accompany the 2016 VA/DoD Clinical Practice Guideline for Management of Major Depressive Disorder (MDD)

- **Management of MDD Patient Guide*** — Provides information to patients on MDD causes, symptoms, assessment and treatment, and general ways to improve health and well-being
- **Management of MDD Pocket Card*** — Provides health care providers with a quick reference tool for treating patients with MDD and related conditions
- **Depression: Fast Facts for Families*** — Brochure with facts on depression symptoms, causes and effective treatments
- **Understanding Depression: A Resource for Providers and Patients*** — Booklet with information on treatment, medications, tips on talking to family and friends about MDD and patient worksheets on how to improve sleep and manage symptoms



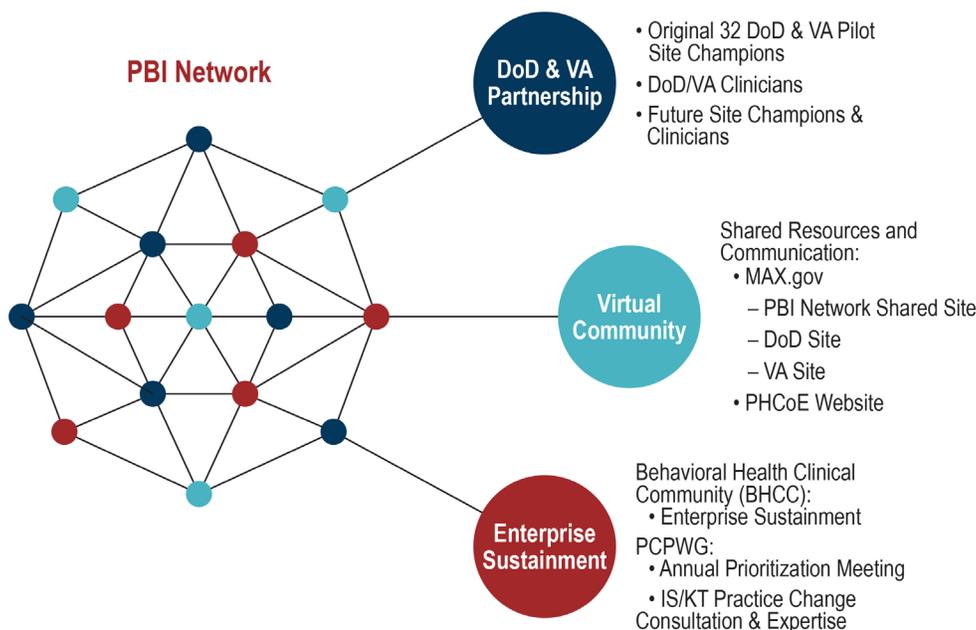
SUBSTANCE USE DISORDER TOOLS

Tools that accompany the 2015 VA/DoD Clinical Practice Guideline for Management of Substance Use Disorders (SUD)

- **Screening and Treatment Pocket Card*** — Provides the screening and treatment algorithm and high level reminders for providers on screening, brief intervention, pharmacotherapy and psychotherapy guidance and resources for management of SUD
- **Stabilization Pocket Card*** — Provides the stabilization algorithm and information for providers on withdrawal assessment and management of SUD
- **Medications for the Treatment of Alcohol Use Disorder*** — Patient booklet with information on the four most effective medication choices for treating alcohol addiction



*Created by the VA.



IMPLEMENTATION SCIENCE INITIATIVE HIGHLIGHT: PRIMARY CARE BEHAVIORAL HEALTH

The Primary Care Behavioral Health (PCBH) program at PHCoE provides leadership in translational psychological and behavioral health services in primary care and works with the services to create optimal outcomes for health, well-being and readiness through the development and implementation of clinical pathways.

ONGOING PROJECTS AND INITIATIVES

- Develop PCBH curriculum and deliver training to increase knowledge, skills and abilities for internal behavioral health consultants (IBHCs), behavioral health care facilitators (BHCFs), external behavioral health consultants (EBHCs), primary care clinicians, and Patient-Centered Medical Home leaders
- Facilitate the service-funded PCBH Tri-service Trainers program, which provides structured mentorship for and evaluation of PCBH staff at military treatment facilities throughout DoD and includes providing feedback to clinic and service leads
- Conduct PCBH program evaluation, metrics and mentoring to measure successes and identify areas of improvement including BHCF monthly data pulls and PCBH case tracers
- Develop core competencies for PCBH staff

KEY 2017 ACCOMPLISHMENTS

- Conducted 64 site visits and 432 phone mentorship calls by tri-service traveling trainers
- Provided initial training for 79 IBHCs and 41 BHCFs. This multi-week training is required before IBHCs and BHCFs provide patient care in DoD clinics
- Developed PCBH core competency trainings on topics such as insomnia, smoking cessation, diabetes self-management and upcoming trainings on pain management
- Revamped the IBHC initial training to include a three-week distance orientation training followed by a five-day in-residence training, a series of follow-up webinar trainings and tri-service trainer mentorship calls and site visit
- Revamped the BHCF initial training to include a four-webinar (seven-hour) orientation training, an interactive five-day in-residence BHCF training and training tools

PCBH clinical pathways contain detailed guidance on strategies for the following:



SURVEILLANCE AND MEDICAL INTELLIGENCE

PHCoE aims to improve the efficiency, effectiveness and impact of the Military Health System (MHS) psychological health care system by supporting evidence-based decision-making through analytics. PHCoE performs agile data analytics to respond quickly with near-real-time data addressing questions influencing mental health policy and operations in the MHS.

ONGOING PROJECTS AND INITIATIVES

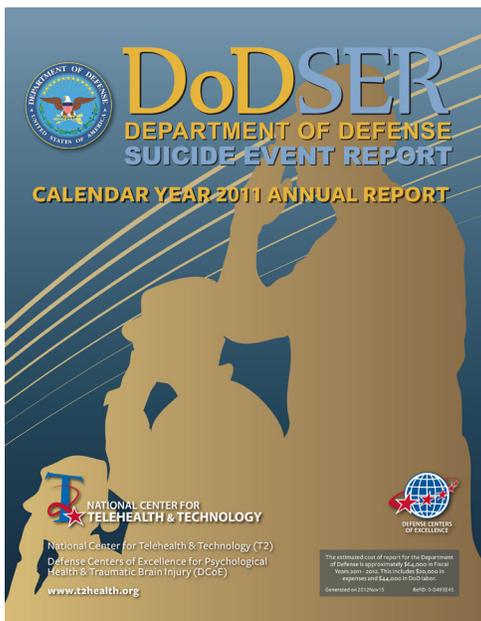
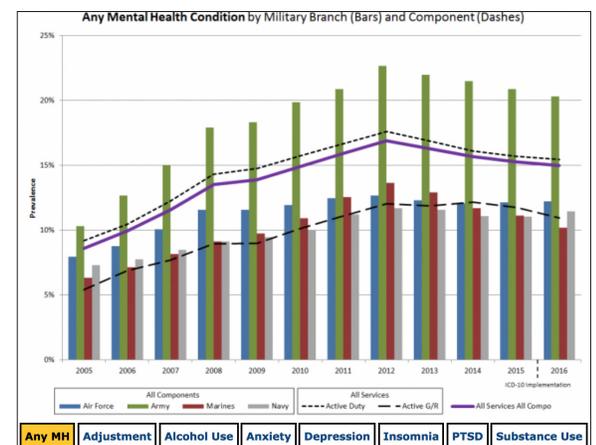
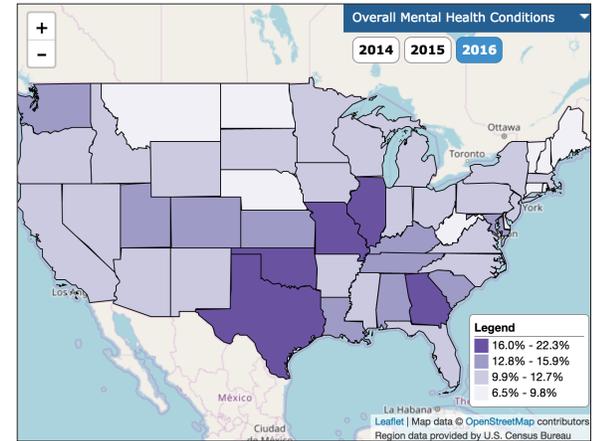
- Conduct surveillance of prevalence and incidence rates of mental health conditions of interest and monitor MHS utilization data for these conditions; produce reports to inform MHS leadership, clinicians and staff
- Provide analytic and program monitoring support to the Primary Care Behavioral Health initiative, including producing quarterly productivity reports, preparing tailored reporting tools for performance mentoring, and responding to specific ad hoc analysis requests from the services
- Prepare analyses of opioid prescription practice and opioid misuse disorder prevalence to monitor the scope of the problem for the MHS and support operational decision-making and response planning
- Support increased leadership visibility over the performance of the entire MHS psychological health system of care through the development and eventual deployment of an enterprise-wide dashboard of relevant psychological health process and outcome metrics
- Provide comprehensive suicide intervention and surveillance mission support including surveillance via the Department of Defense Suicide Event Report (DoDSER) system, dissemination via the DoDSER Annual Report, collaborative research and evaluative efforts with DoD stakeholders and fulfillment of select objectives from the Defense Strategy for Suicide Prevention (DSSP)

KEY 2017 ACCOMPLISHMENTS

- Completed baseline measurement of opioid prescription practice in the MHS and conducted a preliminary evaluation of the Opioid Provider Safety Training
- Designed and initiated an innovative clinic-level analysis of internal behavioral health consultant (IBHC) market penetration to identify opportunities for business practice change to increase productivity and direct additional patients to appropriate care

Conducted inquiries to examine the efficacy of modeling IBHC productivity as a function of clinic-level factors and to determine if changes to structured data entry platforms yielded sufficient information to identify episodes of IBHC care

- Conducted inquiries to examine the efficacy of modeling IBHC productivity as a function of clinic-level factors and to determine if changes to structured data entry platforms yielded sufficient information to identify episodes of IBHC care

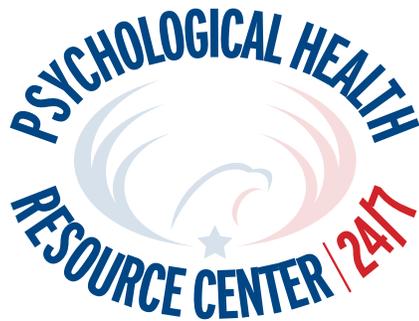


PREVENTION AND OUTREACH

PHCoE promotes a culture of support for psychological health by engaging in initiatives that prevent mental illness, link beneficiaries with services, and support health promotion and risk reduction efforts.

ONGOING PROJECTS AND INITIATIVES

- Oversees the [Real Warriors Campaign](#), a multimedia public awareness campaign to reduce stigma, encourage help-seeking behavior and educate service members, veterans and their families, leaders and providers about psychological health and available resources
- Oversees the [inTransition program](#) that supports a reduction in the number of service members who disengage from mental health care by providing behavioral health care assistance and coaching support for gaps in care during service members' times of transition
- Oversees PHCoE Outreach Team presentations and booths at Yellow Ribbon Reintegration Program events and conferences
- Oversees the [Psychological Health Resource Center](#), a 24/7 call center providing psychological health information and resources to service members, their family members, and veterans
- Implements the [Combat and Operational Stress \(COSC\)](#) mission for DHA and facilitates standardization across the services
- Facilitates [Chaplain Working Group webinars](#) that provide education on psychological health topics and enhance collaboration with mental health providers
- Supports the Department of Defense response to the Government Accountability Office (GAO) stigma report and GAO recommendations for barriers to mental health care



KEY 2017 ACCOMPLISHMENTS

- Wrote 50 [Clinician's Corner blogs](#) on current topics of interest for psychological health care providers in the MHS
- Received 53,787 user visits to the PHCoE website in 2017, up from 7,885 in 2016
- Reviewed more than 400 mental health-related policies for stigmatizing language and proposed changes
- Developed an item bank for military surveys to measure levels of stigma and other barriers to mental health care, and changes over time, at the enterprise level
- Conducted a cross-agency evaluation of four mental health public awareness campaigns implemented across DoD, the VA, and Department of Health and Human Services
- COSC mission accomplishments:
 - Created COSC Work Group Charter and facilitated three quarterly COSC work group meetings
 - Developed a five-year work plan and timeline for the COSC mission
 - Led and facilitated the DoD COSC panel discussion at the DCoE Summit
 - Developed a work plan with timeline for the Headquarters Marine Corps G-10 to provide assistance to their COSC program and training

- inTransition program accomplishments:
 - Opened 8,102 coaching cases and closed 6,692 cases
 - Performed 144,765 outbound outreach calls to service members preparing to be separated from the military or reservists/ National Guard members transitioning back to their civilian jobs and conducted 33,554 intake assessments
 - Collaborated with the Marine Corps Intercept Program implementing a policy for Marines at high risk
 - Collaborated with VA Suicide Prevention coordinators to develop processes for a warm handoff
 - Drafted DHA Procedural Instruction (DHA-PI) 4690.01, which describes processes for inTransition coach roles, the services' roles, metrics and reporting
- PHCoE Outreach team exhibited at 17 Yellow Ribbon Reintegration Program events with 950 booth visitors and 2,107 brief attendees; performed nine site visits with 56 participants, and attended 22 conferences with 1,505 booth visitors
- 2017 Real Warriors Campaign accomplishments:
 - Developed Spanish language psychological health resources for the Reserve Command Army/Air Force
 - Received 179,291 interactions (likes, comments, shares, retweets, etc.) on 2,283 new posts via social media channels, which led to 18,453 new fans/followers
 - Participated in 25 events, directly engaged 3,617 attendees, distributed 23,851 pieces of material, and briefed more than 4,046 people
 - Facilitated four radio media tours and three audio news releases for Month of the Military Child, PTSD Awareness Month, Suicide Prevention Awareness Month and Warrior Care Month potentially reaching more than 50.7 million listeners
 - Received 416,561 page views on the website with 241,719 visits from 203,673 unique visitors



EVIDENCE SYNTHESIS AND GAP ANALYSIS

PHCoE conducts an integrated portfolio of psychological health research to improve the system of care, including research activities related to the generation of new findings, knowledge, and judgments based on extant and in-progress research, as well as the identification of gaps in research or practice. Evidence synthesis and gap analysis projects apply rigorous scientific methods to establish priorities and to answer specific questions pertinent to practicing clinicians, researchers, and funding sources.

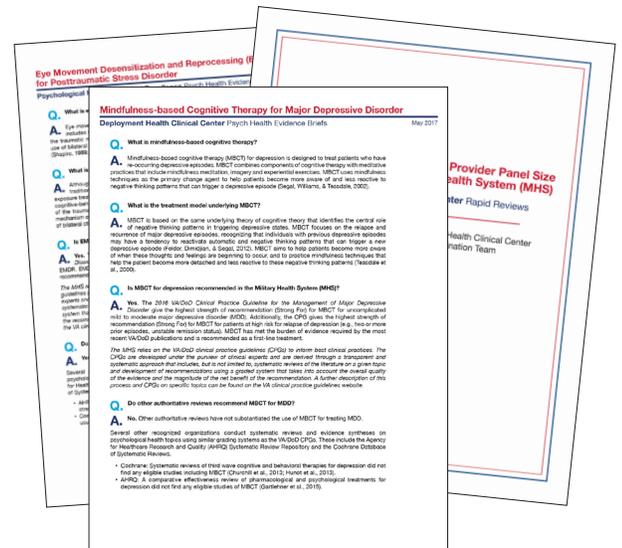
ONGOING PROJECTS AND INITIATIVES

Evidence synthesis and dissemination:

- Solicit input from key stakeholder groups to select and prioritize evidence synthesis topics
- Refine selected topics based on the scope of existing evidence, potential impact and other criteria
- Devise and execute a protocol that applies systematic, rigorous and transparent methods to evaluate and summarize available evidence
- Produce and disseminate various types of evidence synthesis products: Psych Health Evidence Briefs, rapid reviews, systematic reviews and evidence maps

Research gaps analysis:

- Select one to two significant psychological health topics each year
- Solicit key stakeholder input for process
- Engage in rigorous, efficient and transparent methodology to identify and prioritize research gaps in current research for selected topics
- Produce and disseminate an annual prioritized research gaps report



KEY 2017 ACCOMPLISHMENTS

- Published 20 Psych Health Evidence Briefs, produced a rapid review in response to an MHS stakeholder request on provider burnout and sponsored a series of RAND Corp. systematic reviews
- Produced the 2016 Research Recommendations Report "Posttraumatic Stress Disorder and Depression in the Military" to help inform military research funding decisions

Evidence Synthesis & Dissemination

- **Evidence Briefs**
Brief reviews of existing and potential psychological health treatments
- **Rapid Reviews**
Timely reports tailored for MHS stakeholder groups to inform health care decisions
- **Systematic Reviews**
Comprehensive, rigorous syntheses to address important clinical questions, identify research gaps, and inform policy

Research Gaps Analysis

- **Important Topics**
Key Stakeholders designate 1-2 important psychological health topics each year for analysis
- **In-depth Analyses**
For each designated topic, identify and prioritize gaps in current research
- **Annual Report**
Produce and disseminate annual "Prioritized Research Gaps Reports" to inform and direct psychological health research funding

HEALTH SERVICES POPULATION RESEARCH

PHCoE conducts an integrated portfolio of psychological health research to improve the system of care, including research activities related to the generation of new findings, knowledge, and judgments based on novel research. Health services population research projects leverage existing or novel data sets to answer questions not previously addressed in the literature. Research foci include health systems and population-level outcomes and trends.

ONGOING PROJECTS AND INITIATIVES

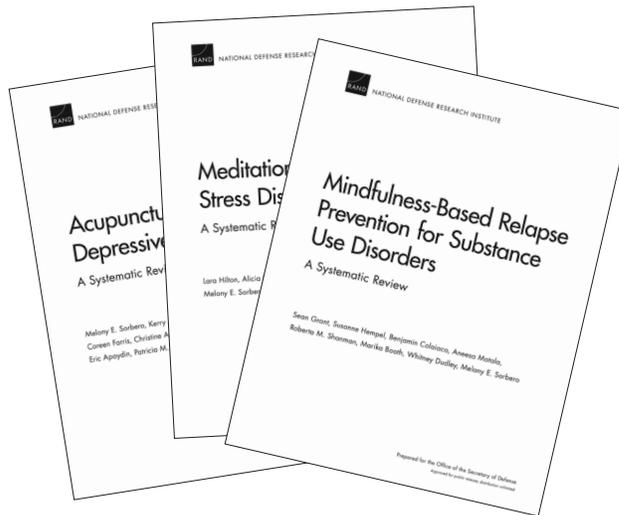
- Aggregate, prepare and validate large datasets of opportunity via direct collaborations and direct requests
- Leverage large datasets to answer relevant health services and population research questions
- Deliver research reports and policy memos to leadership and MHS stakeholders to inform psychological health care delivery

KEY 2017 ACCOMPLISHMENTS

- Collaborated with the Army Analytics Group, cleared institutional review board review and obtained health care administrative datasets for 12 studies using large population-based datasets
- Managed the PHCoE Federally Funded Research and Development Centers (FFRDCs) portfolio and served as action officers on four completed FFRDC projects and 10 active FFRDC projects.
- Completed, in coordination with the services and other agencies, a report to Congress: "Prescription Opioid Abuse and Effects on Readiness"
- Conducted women's mental health and sexual assault/sexual harassment literature and policy gap reviews

Health Services Population Research

- **Large Datasets**
Collect, aggregate and analyze large datasets to answer health services and population research questions
- **Outcomes and Policy**
Deliver research reports and policy memos to leadership and MHS stakeholders to inform psychological health care delivery



POLICY ANALYSIS AND DEVELOPMENT

PHCoE is involved in the review and creation of policies that impact psychological health care across the MHS and DoD.

KEY 2017 ACCOMPLISHMENTS

- Provided DoD support for health care management of sexual assault and sexual harassment efforts, including the DoD Sexual Assault Advisory Group; conducted literature reviews on psychological health needs related to sexual assault/sexual harassment; identified gaps in psychological health research, policy, treatment, and services for service members who disclose sexual assault or harassment; and led efforts to create new procedural instructions
- Led several working groups focused on women's mental health, including the VA/DoD Women's Health Work Group, the DoD Women's Mental Health Work Group, and the Health Affairs Women's Health Issues Work Group
- Established a Behavioral Health Technician Work Group with representation from all services to address the role of the behavioral health technician and strategies to improve provider understanding of the technician role
- Conducted substance use disorder (SUD)-related policy analysis and coordinated across the services to create new SUD procedural instructions
- Reviewed more than 400 mental health-related policies for stigmatizing language and proposed changes, with results informing policy changes at the DoD and service level

SPECIAL PROJECTS

PHCoE provides support and consultation to the services and combatant commands on psychological health matters and responses to taskers and queries from Congress and other external agencies.

KEY 2017 ACCOMPLISHMENTS

- Provided support to the combatant commands, including the following:
 - Provided consultation to the U.S. Central Command, command surgeon on the unique psychological health challenges of senior leaders and analysis of factors impacting redeployment for psychological health reasons
 - Supported Headquarters Marine Corps including proposed courses of action related to the Marines United Facebook group incident and advising on the U.S. Marine Corps' Assessment and Selection program for drill instructors
- Responded to 196 external taskers, including 43 congressional-related taskers
- Overhauled the concept approval and project review process to expand its scope to include all PHCoE activities while streamlining procedures and minimizing administrative burden and paperwork
- Served as the DoD sponsor of the International Initiative for Mental Health Leadership Military Issues Work Group, which shares operational, accessible practices for the delivery of mental health and addiction services across the globe. The work group collaborated with the U.S. Army Regional Health Command-Pacific global health engagement team to develop a functional area playbook Behavioral Health Risk Prevention, Assessment, and Mitigation, Subject Matter Expert Exchange to support U.S. State Department and Combatant Commands' efforts to strengthen partner nations' capacity to mitigate psychological health risks

Photos courtesy of the Defense Department.



Released July 2018 by the Psychological Health Center of Excellence.
This product is reviewed annually and is current until superseded.
301-295-7681 | pdhealth.mil PUID 4839