

Current Federally Funded Studies

November 2013

Building Strong Families in Rural Tennessee Program (Expansion)

Principal Investigators: Edwina Chappell, PhD- Tennessee Department of Mental Health

Evaluator: Randall Reiserer, PhD

This project is a partnership between the Tennessee Department of Mental Health (TDMH) and Centerstone. Funded by the Administration for Children and Families, this study is evaluating the efficacy of a program providing intensive in-home services to families residing in eight rural counties in south central Tennessee. Families served either have children at-risk of state custody because of parent's methamphetamine or other substance use or have children who are being reunified with the family after state custody. Building Strong Families uses the Homebuilders Model, an evidence-based approach that is designed to help keep the child safely with their families by removing risk factors and increasing family skills. The Homebuilders Model uses goal-oriented service planning, life skills training, parenting education, problem solving, motivational interviewing and other tools in order to strengthen families, prevent relapse and promote recovery. This program is being evaluated to assess whether increasing family communication and problem solving skills, reducing substance use and decreasing mental health symptoms results in better safety, permanency and well-being outcomes among children.

Treatment, Empowerment, Assistance, & Meaningful Recovery Project (TEAM Recovery)

Principal Investigator: Kathryn A. Mathes, BSN, CRNP, MS, PhD, Centerstone Research Institute

Evaluator: Randall Reiserer, PhD

Funded by SAMHSA, this project will improve public health and safety by addressing the treatment and recovery needs of adults with behavioral health conditions, who are involved with the criminal court system in the Tennessee counties of Franklin, Grundy, Marion, and Sequachie. The Hazelden-based services and targeted treatment for PTSD will be provided for an unduplicated minimum of 144 adults, 18 years and older (YR 1= 40; YR 2= 52, YR 3= 52). The intervention will include expanding collaboration between the 12th Judicial District Circuit and Drug Courts and other judicial components. The grant is also intended to expand collaboration among community providers and transform the 12th Judicial District Circuit and Drug Court program services in order to better address the broad behavioral health needs of individuals with mental health, substance abuse, or co-occurring disorders who are also in the justice system. This is to be accomplished by integrating recovery oriented, evidence-based, trauma informed, gender specific, comprehensive behavioral health treatment and recovery services.

Be In Charge! (Making a Difference)

Principal Investigator: Kathryn A. Mathes, BSN, CRNP, MS, PhD, Centerstone Research Institute

Evaluator: Heather Nelms, MPH

Funded by the Office of Adolescent Health, this project serves youth 12-19 years of age in 26 Middle Tennessee Counties, including: Bedford, Coffee, Cheatham, Davidson, Dickson, Franklin, Giles, Hickman, Houston, Humphreys, Lawrence, Lewis, Lincoln, Marshall, Maury, Montgomery, Moore, Perry, Robertson, Rutherford, Stewart, Sumner, Trousdale, Wayne, Williamson, and Wilson. The purpose is to implement evidence-based teen pregnancy prevention services that will reduce teenage pregnancy, behavioral risks underlying teenage pregnancy and other associated risk factors. The Evidence-Based Curriculum to be implemented is: Promoting Health Among Teens! (PHAT). Number to be served: 13,000 (Year 1: 300; Year 2: 2,500, Year 3: 4,000, Year 4: 2,000 and Year 5: 2,500).

Substance Abuse and HIV Prevention Services (Project REAL)

Principal Investigator: Doris Vaughan, M.Ed., Centerstone Tennessee

Evaluator: Charles Brown, PhD

Funded by SAMHSA, this project is focused on youth between the ages of 12-17 years old in 13 counties in Tennessee (primarily African-American and Hispanic/Latino) who are at risk for substance abuse and HIV/AIDS. Using two evidence-based curricula, Keepin' it REAL and Be Proud! Be Responsible!, this program aims to reduce the risk of youth developing substance abuse disorders and contracting HIV and other STDs. In addition, this program will offer rapid HIV testing/counseling to all participants and their sexual partners. During the course of this program, youth substance use and HIV risk behaviors will be assessed.

BE SHARP: Substance Abuse Prevention

Project Principal Investigator: Doris Vaughan, M.Ed., Centerstone Tennessee **Evaluator:** Charles Brown, PhD

The BE SHARP program is funded by the Tennessee Department of Mental Health and Developmental Disabilities (TDMHDD) and serves youth between the ages of 10-16 years old who are at high risk for initiating/continuing alcohol and substance use. This school-based prevention program utilizes the BE SHARP and Keepin' It REAL curricula in twelve rural Tennessee counties. The BE SHARP program staff also facilitate a Service-Learning component that provides program participants with the opportunity for meaningful experiential activities that enhance engagement in their communities. The evaluation will measure the extent to which the BE SHARP program enhance protective factors and reduce risk factors associated with drug and alcohol use among youth.

TN Co-Occurring Disorders Treatment and HIV/AIDS Services

Principal Investigator: Matthew Hardy, Psy. D., Centerstone of Tennessee

Evaluator: Charles Brown, PhD

This SAMHSA-funded project serves adults who have a mental illness and a substance use disorder and are at-risk for HIV/AIDS. Taking place in nine counties in Tennessee, it uses the Integrated Dual Disorders Treatment (IDDT) Model. This is a complex model of prevention and treatment services that includes rapid HIV testing and counseling, intensive outpatient therapy, medication education, medication monitoring, counseling with family and friends and peer-driven social activities (i.e. Narcotics Anonymous, Alcoholics Anonymous). This project will be evaluated to look at its effectiveness in reducing drug and alcohol use, reducing risky sexual behavior, increasing employment, reducing criminal justice involvement and increasing levels of mental and physical health.

IN Co-Occurring Continuum Program (Indiana Substance Abuse Treatment and HIV/AIDS Services)

Principal Investigator: Linda Grove-Paul, MPA, MSW, Centerstone of Indiana
Evaluator: John Putz, MS, PhD-Candidate

Funded by SAMHSA, the program provides and enhances access to an engaging, comprehensive, evidence-based, and community-based treatment and services for adult men and women who are highly affected by substance abuse and are at-risk for HIV/AIDS including those who have been released from prisons and jails within the past 2 years in 11 counties in south and central Indiana. The program is based Integrated Dual Disorders Treatment on the IDDT model, which offers HIV rapid testing and education, counseling (individual, group and family), and case management services.

BE Well: Building Exceptional Wellness

Principal Investigator: Kathryn Mathes, BSN, CRNP, MS, PhD
Evaluator: John Putz, MS, PhD-Candidate

Research evidence has demonstrated that individuals with serious mental illness (e.g., schizophrenia, bipolar disorder) often struggle with obtaining access to proper medical care for co-occurring physical health conditions. BE Well is a SAMHSA-funded four-year project charged with examining the implementation of the Revised Four Quadrant Model using Eli Lilly's Solutions for Wellness evidence-based intervention. This framework provides for introducing primary medical care services in a community-based mental health center. BE Well will create a team of medical and peer-support professionals to serve the medical needs of at least 250 adult consumers. The project aims to reduce emergency room utilization (by addressing medical needs as they emerge instead of waiting until they are at a critical level), reduce health-care costs to consumers and the community, reduce the severity and presence of symptoms related to five primary physical health conditions (diabetes, hypertension, obesity, dyslipidemia, and/or smoking), and instruct consumers in wellness-related living skills through a series of psychoeducational and physical activity-based groups.

Early Connections Network

Principal Investigator: Susan Steckel, MSW
Evaluator: Jessica Benton MS. Ed.

This project is a SAMHSA-funded mental health initiative in middle Tennessee that includes Cheatham, Dickson, Montgomery, Robertson, and Sumner counties. ECN will develop a comprehensive and trauma-informed System of Care for infants and young children ages 0-5 and their families. The Network seeks to transform traditional approaches to mental health care through the delivery of services that are community based, family driven, youth guided and culturally and linguistically competent. Using trained local parent caregivers as care coordinators in collaboration with early childhood specialists, ECN will serve a minimum of 400 unduplicated infants and young children and their families. Special attention will be given to the children and families of those persons serving in the military, as the Mid-Cumberland region includes Fort Campbell, one of the United States' largest military bases.

K-Town Youth Empowerment Network

Principal Investigator: Susan Steckel, MS, Tennessee Department of Mental Health

Evaluator: Heather Wallace, MS, PhD.

The K-Town Youth Empowerment Network project has grown out of a multiyear collaborative effort in Knox County (Knoxville Youth Transition Council) to address the needs of transition-age youth with multiple mental and behavioral health needs. The Knoxville Youth Transition Council is an alliance dedicated to creating a seamless web of services and supports to empower youth ages 16 to 21 with severe emotional disturbances or otherwise challenged by barriers or lack of family support to successfully transition to adulthood. K-Town serves youth ages 14-21 with SED/SPMI and their families using the Wraparound service model. K-Town's mission is to develop and sustain a system of care that is family driven, youth guided, and culturally and linguistically competent, empowering youth and their families with the knowledge, skills, resources, and supports they need for youth to be successful at home, in school, and in the community, as well as to transition successfully to adulthood. (Project period: 10/2009-9/2015). Total project enrollment: 400 (80/yr). Total evaluation enrollment target: 220 (55/yr for 4 years, October 1, 2010-September 30, 2014).

Residential Substance Abuse Treatment (RSAT)

Principal Investigator: Linda Grove-Paul, MPA, MSW, Centerstone of Indiana

Evaluator: Heather Cobb, MSW

The RSAT project is an Indiana State funded project focused on providing therapeutic reentry services to substance abusing female offenders with co-occurring disorders and a high risk of repetitive criminal behavior in Bartholomew County, Indiana. The project will reduce the number of female offenders and corresponding recidivism rates through a 12-month program of residential and aftercare services for 45 female offenders. This study measures criminal justice involvement, psychiatric symptoms, and substance use.

Young Adult Substance Abuse and HIV Prevention Services (Be Aware)

Principal Investigator: Doris Vaughan, M.Ed., Centerstone Tennessee

Evaluator: Heather Nelms, MPH

Funded by SAMHSA, this project is focused on young adults between the ages of 18-24 years old in 6 counties in Tennessee (primarily African-American and Hispanic/Latino) who are at risk for substance abuse and HIV/AIDS. Using two evidence-based curricula, RESPECT and PRIME for Life, this program aims to reduce the risk of young adults developing substance abuse disorders and contracting HIV and other STDs. In addition, this program will offer rapid HIV testing/counseling to all participants and their sexual partners. During the course of this program, young adult substance use and HIV risk behaviors will be assessed.

The Supportive Services for Veteran Families (SSVF) Program

Principal Investigator: Ken Saefkow, MA, Centerstone Tennessee

Evaluator: Heather Cobb, MSW

Funded by the Department of Veteran Affairs this is a new VA program that awards grants to private non-profit organizations and consumer cooperatives who will provide supportive services to very low-income Veterans and their families residing in or transitioning to permanent housing. The grantees will provide a range of supportive services designed to promote housing stability. During the course of this grant, placement into stable housing and service satisfaction will be assessed.

SBIRT Tennessee (Screening, Brief Intervention, Referral, & Treatment)

Principal Investigator: Angela McKinney-Jones

Evaluator: Charles Brown, PhD

This project is a SAMHSA-funded project that provides screening, brief intervention, brief therapy, and referral services in numerous primary care and community-based settings. SBIRT Tennessee is designed to curb substance misuse and abuse through early detection and treatment. On an annual basis, adult patients are universally screened at the primary care sites where the project is implemented. In community-based settings, Tennessee National Guard Soldiers are screened during their annual Physical Health Assessment to determine if there is a need for behavioral healthcare services. Anyone receiving a positive screen are further assessed as required in the SBIRT model and a brief intervention or referral for treatment is provided as appropriate. SBIRT Tennessee will serve a total of 14,461 individuals over the life of the grant. (Project period: 9/30/11 - 9/29/2016).

E-ROSC

Principal Investigator: Linda Grove-Paul

Evaluators: John Putz, MS, PhD-Candidate

The e-ROSC program is a three-year project designed to enhance and expand ROSC care coordination through the use of Health Information Technology (HIT) by establishing a web-based Recovery Oriented

System of Care (e-ROSC) that effectively and efficiently facilitates: 1) increased contact and communication with providers, 2) increased consumer involvement, 3) better monitoring of health outcomes, and 4) more responsive treatment adjustments leading to improved health outcomes for underserved persons with a substance abuse disorder. The program will serve 150 individuals in five rural Indiana counties.

TLC III/ Youth Villages

Principal Investigator: Melissa Sparks, MA, Tennessee Department of Mental Health

Evaluator: Jennifer Lockman, M.S., PhD-Candidate

Funded by SAMHSA, **The Tennessee Lives Count, Youth Suicide Prevention Early Intervention Project (TLC)** is a statewide early intervention/prevention project designed to reduce suicides and suicide attempts for youth (ages 10-24). TLC plans to build on the successes of its first two grant cycles, by continuing its gatekeeper training projects but adding components related to youth access to mental health, crisis services, and the implementation of postvention plans in schools. The TLC program provides the following suicide prevention services throughout the State of Tennessee: QPR Training (N=1500), ASIST training (N=100), Suicide Prevention Workshop for LGBTQ youth (N=200), Emergency Department Suicide Prevention Training (N=100) and AMSR for clinical mental health providers (N=100). TLC will also develop a postvention plan for a minimum of 35 schools. TLC will incorporate a pilot study involving youth identified by Youth Villages Specialized Crisis Service. The local evaluation uses a longitudinal mixed methods design to evaluate the efficacy of the Youth Villages Enhanced Follow-Up Crisis Service. Measures include the Children's Hope Scale and Reasons for Living Inventory.

Mental Health Transformation

Principal Investigator: Sue Karber, MS, Tennessee Department of Mental Health and Substance Abuse Services

Evaluator: Kathryn Mathes BSN, MS, CRNP, PhD and Randall Reiserer PhD

This five-year Tennessee Department of Mental Health (TDMH) project is being evaluated by Centerstone Research Institute under contract. The program is peer led and serves adult Tennesseans with mental health and substance use conditions. Specifically, members of the state's 45 consumer-run Peer Support Centers, A&D Peer Recovery Centers, and members of Behavioral Health Safety Net. The program provides service coverage for the entire state and proposes to provide services to 2,352 individuals. Services include the Stanford University's Chronic Disease Self-Management Program; support for healthy weight management, smoking cessation, safer sex and infectious disease, and alcohol and other substance use; connecting participants to a health care homes, including primary health care practitioners; the Stanford University's Diabetes Self-Management Program; and other essential services.

Centerstone Integrated Care Solutions (ICS)

Principal Investigator: Mary Moran MS, Centerstone Director of Adult Services

Evaluator: Katie Sewall, MBA

This 4-year project is designed to improve the physical and behavioral health of adults ages 18+ with

Serious Mental Illness (SMI) and co-occurring primary care conditions/chronic diseases by co-locating and sustaining primary/specialty health services in a behavioral health setting, becoming participants' health home, and building partnerships and infrastructure to coordinate, integrate, and enhance participants' experience of care and reduce/control the cost of care in Nashville/Davidson County, TN. Health Home Services will include comprehensive care management and transitional care, care coordination, health promotion, individual and family support, and referral and follow-up services for 600 adults with SMI (Yr 1: 200; Yr 2: 375; Yr 3: 475; Yr 4: 600).

Home Ties

Principal Investigator: Edwina Chappell, PhD, Tennessee Department of Mental Health and Substance Abuse Services

Evaluator: Kathryn Mathes, BSN, MS, CRNP, PhD

This intensive home-based program will provide services, supports, and follow-up for an unduplicated total of 500 families over the 5-year project (Year 1: 68; Years 2-5: 108 annually). A rigorous evaluation will be conducted in order to assess the effectiveness of integrating the philosophy of the Homebuilders Model and implementing Seeking Safety with fidelity in increasing well-being, improving permanency and enhancing the safety of children who are in or at risk of being placed in an out-of-home placement because of parent's/caregiver's substance abuse. This evaluation is intended to meet four overall objectives, 1) to monitor progress toward performance indicators that define success, 2) to use data to manage program implementation, 3) to use data to inform decision making, and 4) to measure changes in levels of collaboration across state and community partners over time. Information will be collected in key domains corresponding to project goals and objectives aimed at improving well-being, increasing permanency and ensuring the safety of children who are in, or at risk of being placed in an out-of-home placement as a result of a parent's or caretaker's substance abuse by supporting interagency collaboration and integration of services. Formative and summative evaluation will be used to document and disseminate results and outcomes.

REALives

Principal Investigator: Matthew Hardy, Psy. D., Centerstone of Tennessee

Evaluator: Jerome Viltz and Charles Brown, PhD

This SAMHSA-funded project serves adults who have a mental illness and a substance use disorder and are at-risk for HIV/AIDS. Taking place in ten counties in Tennessee, it uses the Hazelden-based Co-Occurring Disorders Model. This is a complex model of prevention and treatment services that includes rapid HIV testing and counseling, intensive outpatient therapy, medication education, medication monitoring, counseling with family and friends and peer-driven social activities (i.e. Narcotics Anonymous, Alcoholics Anonymous). This project will be evaluated to look at its effectiveness in reducing drug and alcohol use, reducing risky sexual behavior, increasing employment, reducing criminal justice involvement and increasing levels of mental and physical health.

Renewal House Footprints Project

Evaluator: Jennifer Lockman, MS, PhD-Candidate

The Renewal House Footprints Project is funded by the Administration for Children and Families (ACF), and is aimed at improving and expanding the services and geographic reach of Renewal House, a residential recovery program for women and their children. Through the Footprints Project, Renewal House is lengthening the continuum of care for residents by providing additional support as they transition to independent living, adding four new evidence-based treatments to the menu of services available to residents, and expanding their current partnership with Tennessee's Department of Children's Services. Evaluation of the Footprints Project includes measures to monitor implementation, assess the fidelity of evidence-based practices, and track outcomes related to maternal recovery and symptomatology, family functioning, and child permanency, safety, and well-being. The evaluation also includes a cost study.

I TRY

Evaluator: Vivian Park, MS and Kathryn Mathes, PhD (Supervising Evaluator)

TDMHSAS' Treatment and Recovery for Youth (TRY) will improve substance abuse treatment and recovery services for Tennessee adolescents (ages 12-18) and transitional aged youth (18-24) and their families by developing a "learning laboratory" in Madison and Maury counties that will inform infrastructure development/systems improvements and provide direct service delivery for 400 unduplicated youth (Year 1: 60; Year 2: 100; Year 3: 120; Year 4: 120).TDMHSAS will partner with two community-based treatment providers, Pathways and Centerstone, to provide comprehensive treatment and recovery support services that encompass the complexities of addiction, mental health (including trauma), and recovery, for adolescents and transitional aged youth with substance use and/or co-occurring disorders and their caregivers. Both providers will offer assertive outreach, assessment, treatment, and continuing care, including in-home case management, linkages to other services, and transportation, using the family-centered, evidence-based treatment interventions, Adolescent Community Reinforcement Approach (A-CRA) and Assertive Continuing Care (ACC).

Current Clinical Research Studies

Investigation of the Integrity of Cerebellar-mediated Timing Functions in Schizophrenia

Principal Investigator: William Hetrick, PhD

Site Director: David W. Ayer, PhD

The purpose of this study is to better understand how eye movements are related to information processing in healthy people and people diagnosed with schizophrenia. We will specifically be examining the learning, unlearning, and timing of automatic eye-blinks. Because much is known about brain areas that control these automatic eye-blinks, we will learn more about the relationship between these brain areas and other aspects about how the brain handles information.

IRT-based Self-report Screener for Prodromal and Early Psychosis

Principal Investigator: David W. Ayer , PhD and Benajmin Brodey, MD, MPH

This study is designed to develop new surveys for youth and young adults to assist with early detection of psychosis, leading to significantly improved treatment for this illness. The study will evaluate feelings and experiences that are relevant to youth and young adults like those being served at Centerstone.

Extended Duration Pharmacotherapy for Prevention of Relapse to Smoking

Principal Investigator: David W. Ayer , PhD and Edin Evans, MD

The purpose of this study is to evaluate the safety and effectiveness of 40 weeks, extended-duration varenicline and CBT, compared with placebo and CBT, for prevention of relapse to smoking in patients with schizophrenia or bipolar disorder. The main hypothesis is that the varenicline group will achieve greater abstinence at the end of the 40-week, double-blind, relapse-prevention phase than the placebo control group.

Computerized adaptive self-report diagnostic assessment for mental health: the SCID-SR (self-report)

Principal Investigator: David W. Ayer , PhD and Benajmin Brodey, MD, MPH

The purpose of this study is to develop a patient self-report diagnostic tool that will aid clinicians in making the correct diagnosis. This new survey will measure many areas of a person's mental health, including depression, anxiety, and substance use.

New CAT Research Tool: IRT/CAT Software for Secure Web & IVR Survey Administration

Principal Investigator: David W. Ayer , PhD and Benajmin Brodey, MD, MPH

The purpose of this study is to develop computer and telephone survey software using Computer Adaptive Technology (CAT). In a CAT survey, the answers that selected will be used to determine the next question in the survey. The goal of this software is to increase the speed of standard mental health surveys, while still obtaining accurate results.