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TREATMENT WORKS | RECOVERY IS POSSIBLE

the freudian slip

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Coronavirus and Mental Health: Taking care of ourselves during infectious disease outbreaks

www.psychiatry.org

Infectious disease outbreaks create significant distress for the public and health care providers. Timely and accurate information play a critical role in controlling the spread of illness, and managing fear and uncertainty. Knowing what to do helps people feel safer and believe that they can take steps to protect themselves.

Stay informed. Obtain current information from trusted sources and **correct misinformation** by sharing credible, established public health resources.

Anticipate and address stress reactions. Keep in mind that it's normal to feel stress in reaction to an infectious disease outbreak. Take steps to minimize and address stress, such as keeping normal routines, taking part in enjoyable activities, focusing on positive aspects of your life and things that you can control; and engaging in stress reduction techniques and physical activity.

Meet basic needs. Eat, hydrate, and sleep regularly to optimize your ability to provide care for yourself and others.

Take breaks. Rest and relaxing activities can provide a helpful distraction.

Stay connected. Giving and receiving support from family, friends, and colleagues can reduce feelings of isolation.

Self check-ins. Monitor yourself for signs of increased stress. Talk to a family member, friend, peer or supervisor if needed.

Honor service. Remind yourself (and others) of the important work you are doing. Recognize colleagues for their service whenever possible.

These recommendation are adapted from mental health education fact sheets at the Center for the Study of Traumatic Stress at www.cstsonline.org.

The Medical Association of the State of Alabama provides a 24/7 hotline for physicians experiencing the effects of burnout, anxiety, and other mental health issues. Call 334-954-2596.

APPA 2020-2022 Executive Council Spotlight:

Dan Dahl, MD, Secretary



Dan Dahl, MD, is a supervising psychiatrist at the Birmingham VA Medical Center (BVAMC). He has worked with multiple programs and students at the BVAMC including the telehealth program, which was ranked

second in the country for most visits at one point. He enjoys teaching psychiatry residents, nurse practitioners and physician assistants.

Dr. Dahl completed medical school training at the University of Nebraska Medical Center in Omaha, followed by a one-year surgery residency and internship in psychiatry at UAB. He later added qualifications in geriatric psychiatry.

He was in private practice in Birmingham for 11 years before joining the UAB as the Psychiatry Residency Program training director. He soon rose to become the vice chair for Education and Clinic Services, serving at UAB for 10 years.

He is married to Birmingham psychiatrist, Terri Steele, MD, who practices at Eastside Mental Health Center.

Dr. Dahl says the best part of his day is seeing veterans. 🌐

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CHAPTER CONTACTS

Birmingham

Psychiatric Society
Paul O'Leary, MD, DFAPA,
BPS President
dr.paul@me.com

Central Alabama
Psychiatric Society

Linda Teel
linda.teel@mpa1040.com

Mobile Bay

Psychiatric Society
Praveen Narahari, MD, FAPA,
MBPS President
pnarahari@altapointe.org

Tuscaloosa

Psychiatric Society
Thaddeus Ulzen, MD
tulzen@cchs.ua.edu

WHAT'S UP AROUND THE STATE...

Three Alabama cities to receive crisis center funding

Gov. Kay Ivey, Commissioner Lynn Beshear of the Alabama Department of Mental Health and House Majority Leader Nathaniel Ledbetter have announced the awardees of funding for crisis centers to serve individuals with mental illness and substance use disorders – **AltaPointe Health in Mobile**, the **Montgomery Area Mental Health Authority** and **WellStone Behavioral Health in Huntsville**. The crisis care centers are a result of an \$18 million appropriation in the FY2021 General Fund budget approved earlier this year.

Jails and hospitals are often the first entry point for many individuals in mental health crisis. These locations are not equipped to care for those with serious mental illness. Neither have the personnel or resources to address the needs.

The bold goal of establishing a crisis continuum of care supports the ideal outcome of zero unnecessary admits to the hospital emergency department and zero unnecessary bookings into jail. Crisis centers can provide many of the mental health resources that local law enforcement, hospitals, judges, families and individuals are desperately seeking in Alabama communities.

To learn more, please visit mb.alabama.gov/initiatives.

USDA awards \$3 million in grants for Alabama distance learning, telemedicine infrastructure

alreporter.com

The USDA has announced \$72 million in grants to help rural residents gain access to health care and educational opportunities. The grants will help buy equipment and software needed to deploy distance-learning and telemedicine services to rural residents.

“The need for rural broadband has never been more apparent than it is right now as our nation manages the coronavirus emergency,” said Sonny Perdue, U.S. Secretary of Agriculture. “Access to telehealth services, remote learning for school children and remote business operations all require access to broadband.”

Alabama has been awarded six projects through the Distance Learning and Telemedicine grant program:

- **Clay County** – \$304,801 grant to connect the Clay County Hospital and Clay County Board of Education. Clay County Hospital will use this partnership to connect to teletherapy providers for mental health and drug counseling services.
- **Central North Alabama Health Services** – \$173,818 grant to help deliver an interactive communication platform across five health centers in northern Alabama. Distance learning will include opiate substance treatment and counseling.
- **Dale County Board of Education** – \$716,114 grant to allow the launch of a new Distance Learning project that will serve seven schools, a career and technical campus, and an alternative school.
- **Franklin Primary Health Center** – \$610,927 grant to connect health center hubs located in Mobile with rural end-user medical and dental sites.
- **Macon County** – \$469,859 grant to assist in purchase of video conferencing equipment.
- **Madison County Board of Education** – \$775,058 grant to allow the expansion of STEM education augmented curriculum and virtual field trip opportunities.

Physician Finder: Huntsville

Huntsville Hospital seeking BC/BE Psychiatrist for inpatient hospital coverage to include ED, medical floor consults and follow ups, with average of 15 patients per provider. Coverage of pediatric consults required. Monday through Friday position, call requirements of weekend call 1:4 and weekday call of 2-3 days per month. Tina.baker@hhsys.org 256-265-7073.

Bipartisan legislation aimed at combating veteran suicide signed into law

www.wavy.com

A bipartisan legislation designed to combat veteran suicide was recently signed into law. The “Commander John Scott Hannon Veterans Mental Health Care Improvement Act” includes provisions that:

- Authorizes a community grant program through the VA that will enhance outreach in the community to help identify isolated veterans and provide services aimed at identifying veterans within the community who may be in need of assistance. The bill also expands eligibility for comprehensive VA mental health services to all veterans with Other Than Honorable discharges if they are referred to the VA through an organization in the grant program.
- Requires VA to provide a detailed plan to implement SAFE VET on a nationwide, uniform basis. Suicide Assessment and Follow-up Engagement: Veteran Emergency Treatment (SAFE VET) is a relatively new clinical intervention that is associated with 45 percent fewer suicidal behaviors in the six-month period following emergency department care and more than doubles the odds of a veteran engaging in outpatient behavioral health care.

The VA estimates that around 20 veterans die by suicide each day. Unfortunately that number has remained unchanged despite Congress more than tripling the VA's funding for suicide prevention efforts over the last ten years to nearly \$222 million in FY20.

The legislation co-introduced by North Carolina Sen. Thom Tillis and Virginia Sen. Mark Warner is said to improve outreach to veterans and offer mental health care options including:

- Bolster the VA's mental health workforce to serve more veterans by giving the VA direct hiring authority for more mental health professionals, offering scholarships to mental health professionals to work at Vet Centers and placing at least one Suicide Prevention Coordinator in every VA hospital.
- Improve rural veterans' access to mental health care by increasing the number of locations at which veterans can access VA telehealth services and offering grants to non-VA organizations that provide mental health services or alternative treatment to veterans.
- Strengthen support and assistance for service members transitioning out of the military by automatically giving every service member one full year of VA health care when they leave the military and improving services that connect transitioning veterans with career and education opportunities.
- Study and invest in innovative and alternative treatment options by expanding veterans' access to animal, outdoor or agri-therapy, yoga, meditation and acupuncture. Investing in VA research on the impact of living at high altitude on veterans' suicide risk and identifying and treating mental illness.
- Hold the VA accountable for its mental health care and suicide prevention efforts by examining how the VA manages its suicide prevention resources and how the VA provides seamless care and information sharing for veterans seeking mental health care from both the VA and community providers. 🌐



Photo by Spencer Imbrock on Unsplash

Volunteers sought for evaluating asylum seekers

<https://mountsinaihumanrights.org/>

The Remote Evaluator Network for the Mount Sinai Human Rights Program (MSHRP) is looking for volunteer mental health practitioners to conduct remote telephonic or video psychiatric evaluations of those seeking asylum in this country.

MSHRP offers continuity clinical and social services to clients, conducts research about the experiences of their clients, and aims to increase awareness of the unique health care needs of asylum seekers among healthcare professionals.



Since the program's inception in 2013, the clinic has performed more than 450 evaluations. Outcomes research on a sample of their cases suggests that 98 percent have positive decisions in favor of clients seeking asylum.

Asylum seekers in remote geographic regions, particularly those in immigration detention centers, are amongst the highest risk: their cases are heard in immigration courts with low asylum grant rates, and they often have limited access to forensic evaluations. In addition, COVID-19 restrictions have created a higher demand for a platform to conduct evaluations remotely.

MSHRP routinely conducts telephonic psychiatric evaluations for clients in hard-to-reach areas. Their prior research suggests a comparable quality of telephonic evaluations and medical-legal affidavits compared with those from in-person evaluations. They have created a program that connects volunteer evaluators to asylum seekers in areas where in-person resources are limited and asylum grant rates are low.

To learn more, please contact Aliza.Green@icabn.mssm.edu and Gus.Ruchman@icabn.mssm.edu or visit <https://mountsinaihumanrights.org/>. 🌐

SAVE *the* DATE

Coming Attractions

2021 APPA Spring Conference

April 23-24 | Embassy Suites, Montgomery

2021 APPA Fall Conference

October 8-9 | Westin Huntsville

2022 APPA Spring Conference

April 1-2 | The Lodge at Gulf State Park

2022 APPA Fall Conference

October 7-8 | Marriott Resort, Auburn-Opelika Grand National

2023 APPA Spring Conference

TBA

APA News Briefs

November Course of the Month – Advances in Understanding and Treatment of Treatment-Resistant Depression

Major depressive disorder (MDD) is a primary cause of disability in the United States and worldwide. Current, commonly utilized treatments are not effective in a substantial group of individuals who may be described as suffering from treatment-resistant depression (TRD). As a group, these individuals tend to suffer a chronic, more severe course of illness, utilize the majority of health care resources devoted to the treatment of depression, and are at elevated risk for suicide. This course will explore and describe critical current topics in the understanding and treatment of TRD. Access the *Course of the Month* and sign up for updates about this free member benefit.

Free Virtual Conference on First-Episode Psychosis | Nov. 12-13

Registration is open for the Third National Conference on Advancing Early Psychosis Care in the United States, Addressing Inequalities: Race, Culture and COVID. All sessions address key issues and challenges around how to provide the best possible care to individuals who experience early psychosis. Choose from four in-depth tracks: Systems-Level Improvements, The Human Experience, Culturally Informed Care, and The New Normal. Learn more and register at SMLadviser.org/virtual.

APA Develops Model Telemedicine Language for States

The federal government, all 50 states, and the District of Columbia have taken action to strengthen insurance coverage of telemedicine since the beginning of the COVID-19 public health emergency. With states reopening, there have been concerns that some of these positive changes, such as payment parity with in-person visits, might be revoked. In response, APA created model telemedicine language for states. Learn more at <https://www.psychiatry.org/psychiatrists/advocacy/state-affairs/model-telemedicine-legislation>.

College Mental Health, Telepsychiatry: Best Practices, Policy Considerations & COVID-19

As a result of COVID-19, college students have been abruptly displaced from their campuses, leaving many to rely on telehealth to continue seeing their on-campus mental health provider. While numerous state and federal regulations have been introduced to increase access to telehealth services during the pandemic, challenges to continuity of care remain unique to college students. Learn more in this new resource developed by APA's Committee on Telepsychiatry and APA's College Mental Health Caucus at <https://www.psychiatry.org/psychiatrists/practice/telepsychiatry>.

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Alabama Psychiatric Physicians Association

19 S. Jackson Street
Montgomery, AL 36104

(334) 954-2500

Fax (334) 269-5200

www.alabamapsych.com

Godehard Oepen, MD, PhD,
DLFAPA, Publisher
Meghan Martin,
Executive Editor
Charlotte H. Morris,
Senior Editor

Articles or advertisements should be sent to Charlotte H. Morris, at cmorris@alamedical.org two weeks in advance of printing.

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