

Vermont Emergency Telepsychiatry Network

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Maine Telehealth and Telemonitoring Advisory Group

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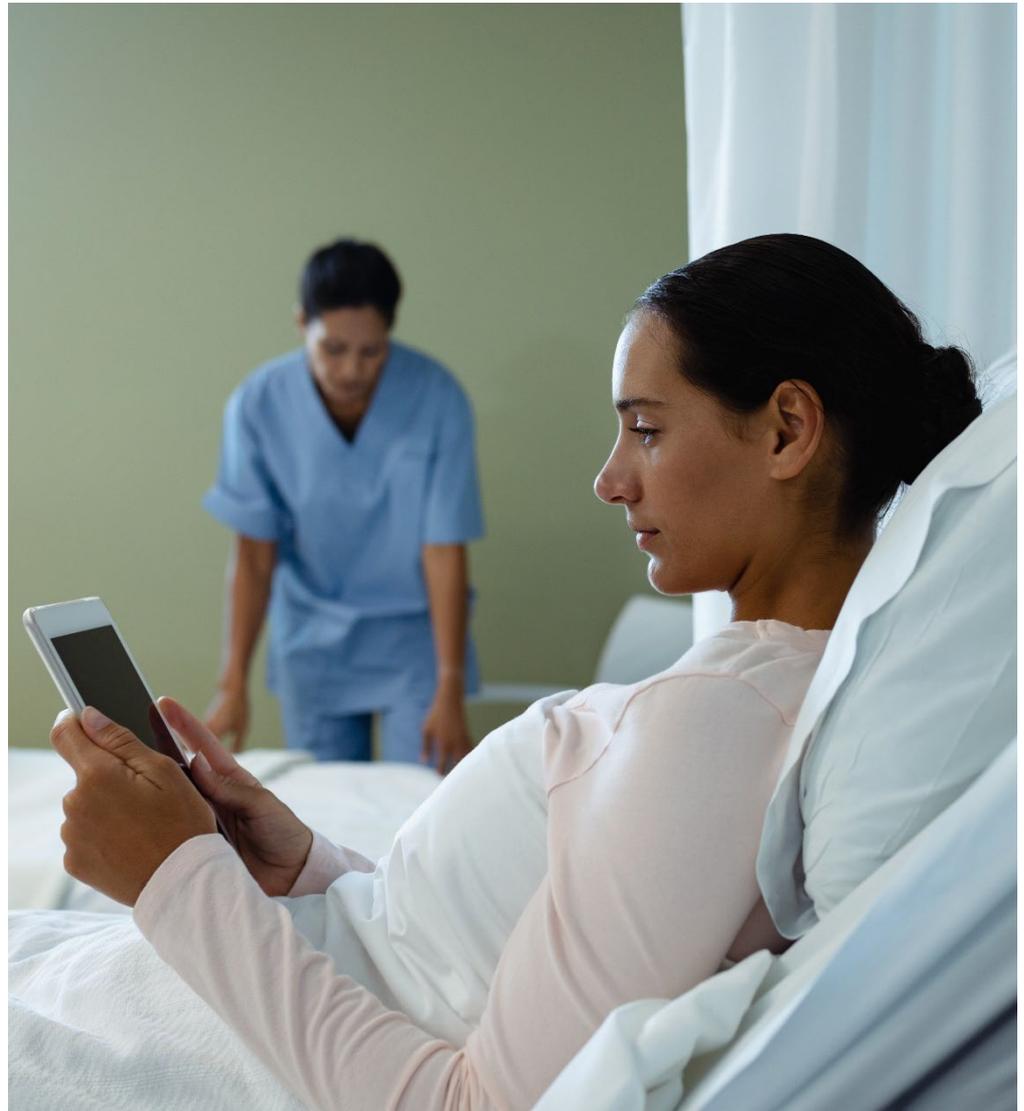


Outline

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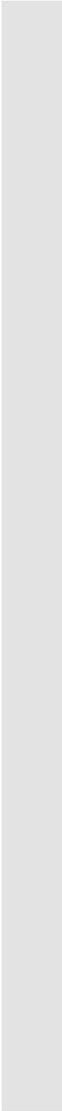
Need for Telepsychiatry

Trying to Solve the
Problem of ED Boarding



Need for Telepsychiatry

- ED boarding of patients with mental health needs is having negative impacts on
 - patients,
 - providers, and
 - the hospital system.
- In VT, one in seven ED beds is occupied by a patient waiting for mental health care.
- Telepsychiatry can
 - reduce the time these patients spend awaiting evaluation & treatment and
 - enable EDs to offer more meaningful care.



VETN Overview

Purpose



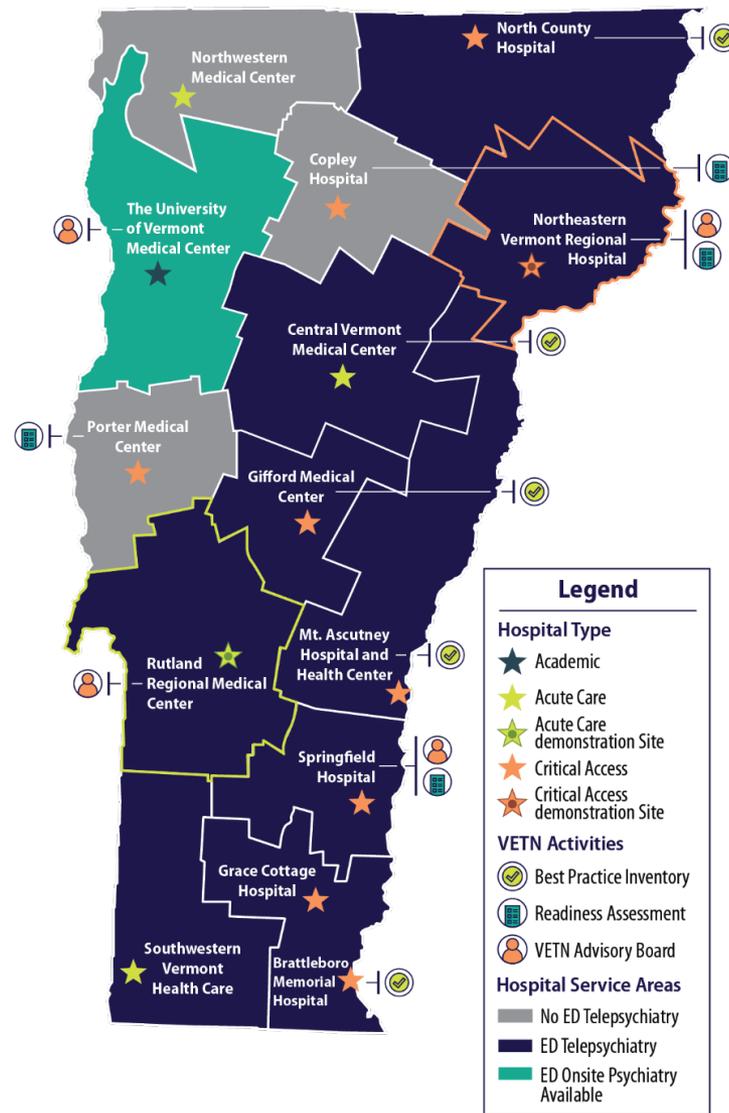
Vermont Emergency
Telepsychiatry
Network

VETN

a statewide system helping Vermont
EDs provide timely **psychiatric** care
via **telehealth** for individuals with
mental health needs



VETN Activities



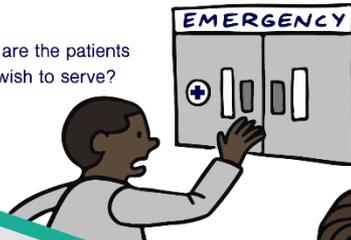
Please Visit
Us

- [VETN Landing Page](#)
- [VETN Project Charter](#)
- [2023 VETN Evaluation Results](#)
- [VETN Needs Assessment Report](#)
- [ED Telepsychiatry Intro Video](#)

PATIENT CARE

ESTABLISH INCLUSION/EXCLUSION CRITERIA.

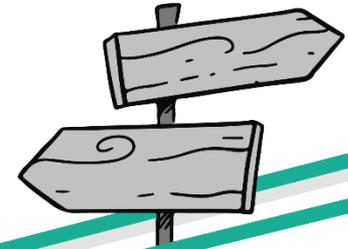
- What is the greatest pain point in patient care?
- Who are the patients you wish to serve?



CLINICAL GUIDANCE

DEVELOP CLEAR CLINICAL QUESTIONS TO MAKE BEST USE OF A SCARCE RESOURCE.

- How will telepsychiatry clinicians complement other clinical resources?
- What clinical guidance is needed?



OWNERSHIP DUTIES

ESTABLISH WHETHER TELEPSYCHIATRY PROVIDER WILL SUPPORT ONGOING CARE.

- Is the consultant providing advisement or direct management of patient care?
- What is the involvement of ED staff, other mental health providers and Designated Agencies in executing recommendations?



KEY CONSIDERATIONS for implementing and optimizing a TELEPSYCHIATRY program in the ED.



TELEMEDICINE CAPACITY

ENSURE STAFF ARE TRAINED ON OPERATIONS OF HARDWARE AND SOFTWARE.

- What hardware and software is already in place?
- Is new equipment needed?
- What is the status of network connectivity?



DOCUMENTATION/INTEGRATION

DEFINE A WORKFLOW AND PROTOCOL FOR DOCUMENTATION.

- Do remote access capabilities exist for EMR documentation?
- Is any reformatting needed to accommodate notes and orders?



QUALITY IMPROVEMENT

IMPLEMENT SATISFACTION SURVEYS, REVIEW OUTCOMES AND IDENTIFY KPIS AFFECTED BY TELEPSYCHIATRY.

- What data and metrics are impacted and how?
- Are interventions having the intended outcomes?

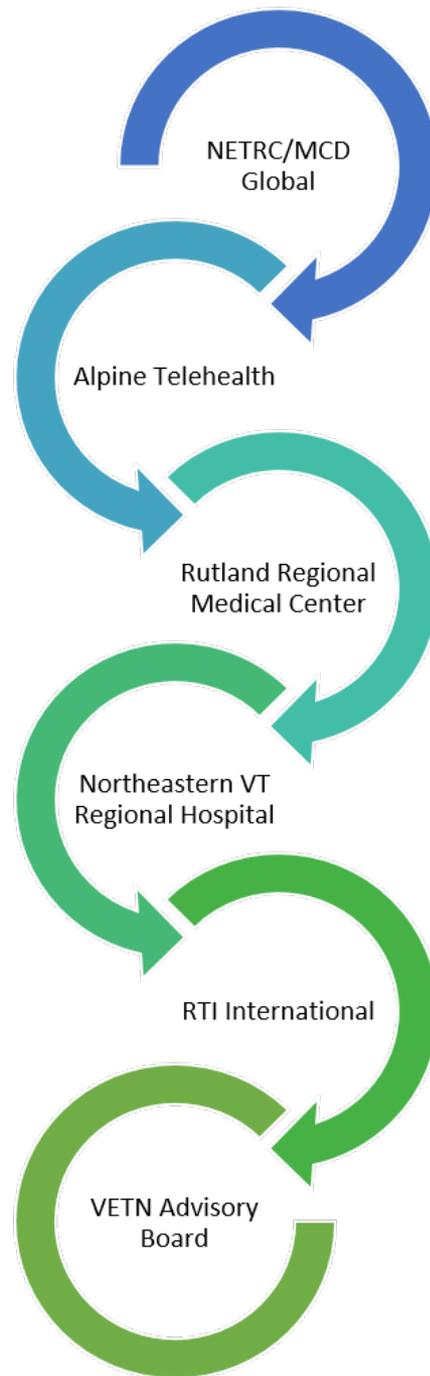


The Vermont Emergency Telepsychiatry Network (VETN) is a statewide system helping Vermont EDs provide timely psychiatric care via telehealth for individuals with mental health needs. To learn more about VETN, visit vpqhc.org. This project is supported by Grant Number 1H79FG000756-01 from SAMHSA. It's contents are solely the responsibility of the author and do not necessarily represent the official views of SAMHSA.

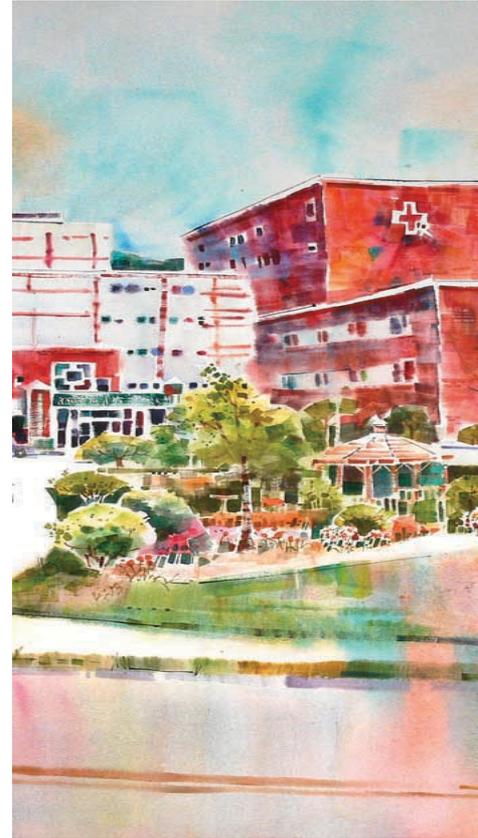
Acknowledgement

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Many Thanks



Rutland Regional Medical
Center
PPS Pediatric Project



Background

- Our hospital offers adult psychiatric services. Adult patients boarding in our ED awaiting a psychiatric bed can receive a consult to help guide treatment
- We were concerned that we were unable to offer that level of treatment to our children and adolescents in the same position
- Boarding times during and right after Covid were significant (combination of increased demand and decreased capacity statewide)
- RRMC reached out to Brattleboro to see if there was a telehealth solution
- Pandemic demonstrated that psychiatric consults over iPads worked well in our emergency department
- VPQHC happened to be looking for pilot projects to support a grant application to SAMSHA at the same time that we were looking for funding to get this project off the ground

RRMC Project Overview

- Project went live January 2023
- Eligible patients include
 - Children and adolescents up to age 18
 - Meet criteria for inpatient treatment
 - Referred to Brattleboro Retreat (or potentially eligible for Brattleboro on a case-by-case basis)
- Consults happen Monday and Thursday afternoons (with some flexibility)
- Charting performed remotely within the RRMC EMR

RRMC

Preliminary
Data

Rutland Regional Medical Center PPS Pediatric Project
January - December 2023, Preliminary

Measure	All Patients ¹ (n=237)	Patients ² Receiving Telepsychiatry Assessments or Consults (n=28)
Recommended for discharge home	169	6
Recommended for admission to inpatient psychiatric unit	68	28
Same-day discharge	121	2
Mean length of stay (hours)	30	75
Overtaken involuntary commitments	0	0

¹Children and adolescents under the age of 18 with a primary mental health diagnosis presenting to the Emergency Department (ED).

²Children and adolescents under the age of 18 with a primary mental health diagnosis presenting to the Emergency Department (ED) referred to BBR.

RRMC Staff and Patients

Preliminary Feedback

- Staff reports increased satisfaction managing pediatric mental health patients because of the proactive management being offered.
- Creating a therapeutic relationship with a Brattleboro provider has convinced some reluctant patients/families to agree to transfer.
- Based on positive feedback, we were able to expand the service in the last quarter to make it available to any pediatric patient waiting for an inpatient bed. (Other facilities include Four Winds and Champlain Valley in NY and in VT, the Northeastern Family Institute.)

Brattleboro Retreat

Preliminary Feedback

- Providers report positive experience with the consultations, appreciating being able to initiate treatment early, noting smoother transitions into the hospital.
- Appreciate the great tech support from the RRMC team.
- Relationship building with the RRMC ED referral team is proving valuable, with expanded communications and improved understanding of the referrals helping to expedite the admissions process.



Discussion

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