



Introducing
**The National Telehealth
Webinar Series**

Presented by
The National Network of Telehealth Resource
Centers

Telehealth Resource Centers

www.TelehealthResourceCenters.org

- **California Telemedicine & eHealth Center (CTEC)**
- ***Great Plains Telehealth Resource & Assistance Center (GPTRAC)***
- **Heartland Telehealth Resource Center (HTRC)**
- ***Mid Atlantic Telehealth Resource Center (MATRC)***
- **Northeast Telehealth Resource Center (NWTRC)**
- ***Northwest Regional Telehealth Resource Center (NRTRC)***
- **Pacific Basin Telehealth Resource Center (PBTRC)**
- ***South Central Telehealth Resource Center (SCTRC)***
- **Southeastern Telehealth Resource Center (SETRC)**
- ***Southwest Telehealth Resource Center (SWTRC)***
- **TexLa Telehealth Resource Center (TTRC)**
- **Upper Midwest Telehealth Resource Center (UMTRC)**
- **National Telehealth Resource Center – Policy (NTRC-P)**
- **Telehealth Technology Assessment Center (TTAC)**



Creative Approaches to Serving Patients, Saving Resources and Stretching Dollars

The South Carolina Department of Mental Health
Telepsychiatry Consultation Program

Produced by the
Southeastern Telehealth Resource Center

May 16, 2013

Overview

- the Problems – Patient Back-up in the Emergency Department (ED)
- the Partnerships –
 - The Duke Endowment, SC Department of Health and Human Services, SC Department of Mental Health, and the SC Hospital Association
- the Proposal – an initial Three-year Grant
- the Purpose – Achieving Tomorrow, Today

Primary Goals

- Timely Psychiatric Assessment and Rapid Initiation of Treatment
- Increased Quality of Care
- Reduced Lengths of Stay (LOS)
- Comprehensive Discharge Planning
- Savings to the Hospital and Community

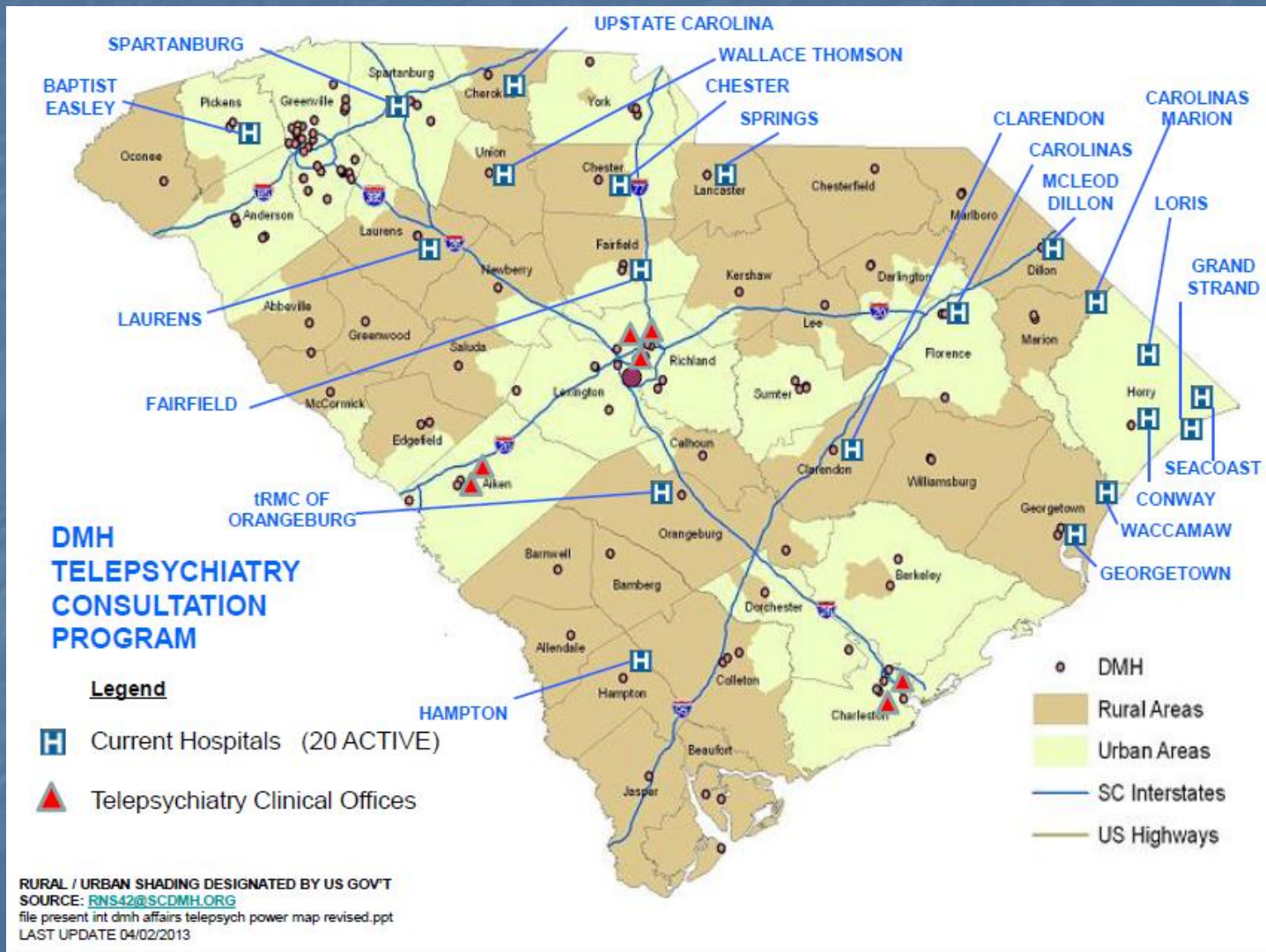
Benchmarks

- Nov 2007 – TDE 1st Award
- May 2009 – Presented at APA Convention
- Aug 2009 – EMR Operational
- Jun 2010 – Computerworld Finalist; TDE 2nd Award
- Oct 2011 – Silver Award, APA Convention
- Feb 2012 – 10,000th Consult
- May 2012 – Presented at APA Convention
- Jun 2012 – TDE 3rd Award
- Oct 2012 – SCORH Outstanding Rural Program of the Year
- Apr 2013 – 15,000th Consult

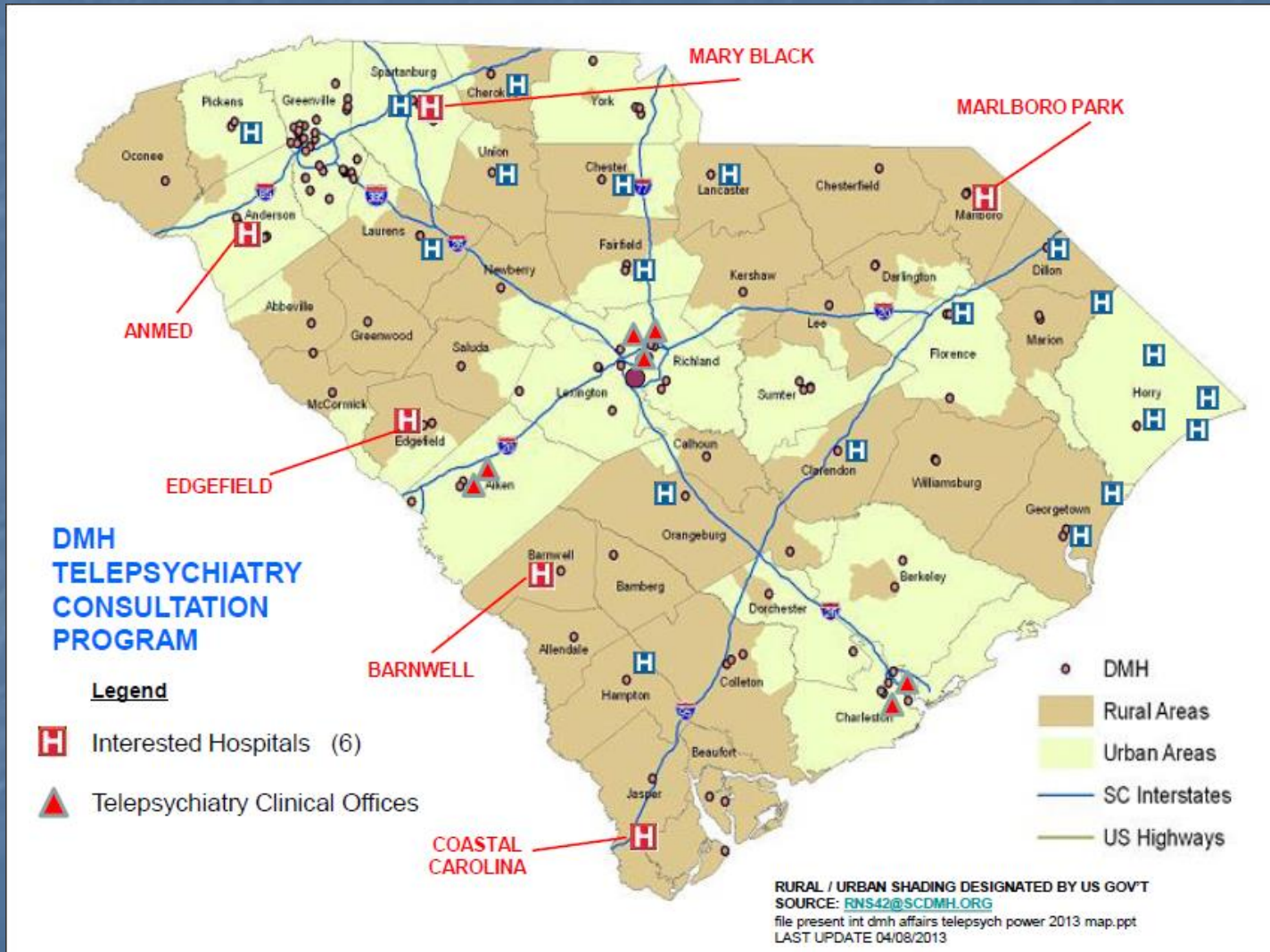
Partnership Diagram



Remote Site Locations



Next Remote Sites



Clinical Office Locations



Columbia, SC
(3)



Aiken, SC
(2)



Charleston, SC
(2)



Future
Site(s)

Consultation Process

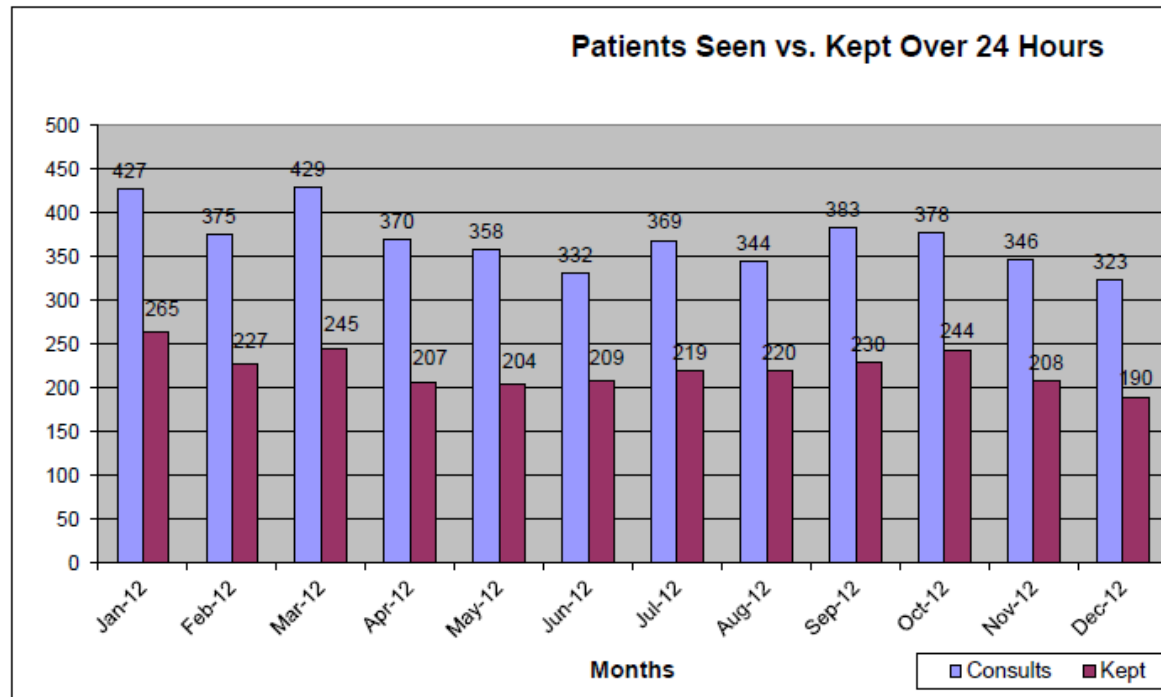
- Patient Presents in ED
- ED Physician Requests Consult
- Psychiatrist Reviews CIS/SCHIEx, EMR
- Patient Consulted
- Video Encounter Ends
- Psychiatrist Electronically Signs Consult
- Recommendations Sent to ED
- Hospital Dispositions the Patient

Consults & Patients Kept (2012)

South Carolina Department of Mental Health (DMH)
Division of Medical Affairs

DMH TELEPSYCHIATRY CONSULTATION PROGRAM

CALENDAR YEAR 2012



TOTALS FROM 03/2009 TO PRESENT... CONSULTS **13638** KEPT **7821**

Source: ms42@scdmh.org
Printed: 1/2/2013
Consult Log 2012a

Page 1 of 13 Pages

Clinical Operations

DMH Telespsychiatry On Call Calendar - Windows Internet Explorer

http://www.state.sc.us/dmh/telespsyc_calendar/index.php

File Edit View Favorites Tools Help

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DMH Telespsychiatry On-Call Calendar

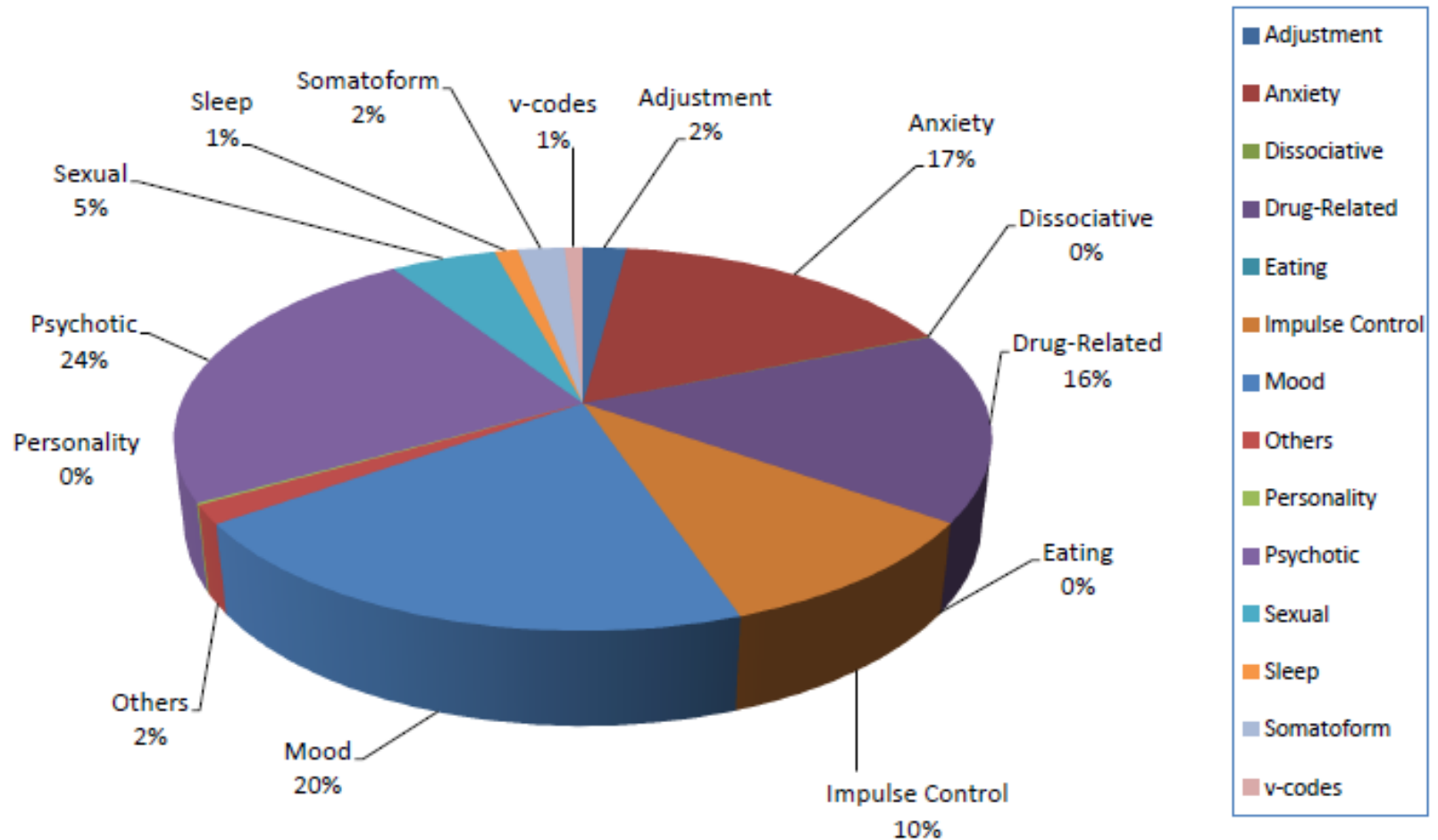
Please select the calendar that you wish to view: April 2013 Go [Current Consult Queue](#)

<p>8:00AM-4:00PM D. HIOTT 10:00AM-8:30PM M. MAZUMDER 4:00PM-8:00AM (A) G. SMITH 4:00PM-11:30PM</p>	<p>8:00AM-4:00PM M. EMBRESCIA 10:00AM-8:30PM G. SMITH 4:00PM-12:00AM</p>	<p>8:00AM-4:00PM N. NNADI 10:00AM-8:30PM B. RATLIFF 4:00PM-12:00AM</p>	<p>8:00AM-4:00PM N. NNADI 8:00AM-4:00PM D. HIOTT 10:00AM-8:30PM B. RATLIFF 4:00PM-12:00AM</p>	<p>8:00AM-5:30PM D. HIOTT 8:00AM-4:00PM G. SMITH 10:00AM-8:30PM D. HIOTT 4:00PM-12:00AM</p>	<p>8:00AM-4:00PM B. RATLIFF 10:00AM-8:30PM N. NNADI 4:00PM-12:00AM</p>	<p>8:00AM-4:00PM N. NNADI 10:00AM-8:30PM G. SMITH 4:00PM-12:00AM</p>
<p>14 N. NNADI 8:00AM-4:00PM J. CLAYTOR 9:00AM-7:30PM N. NNADI 4:00PM-12:00AM</p>	<p>15 G. SMITH 8:00AM-4:00PM M. EMBRESCIA 10:00AM-8:30PM G. SMITH 4:00PM-12:00AM</p>	<p>16 M. EMBRESCIA 8:00AM-4:00PM N. NNADI 10:00AM-8:30PM M. EMBRESCIA 4:00PM-8:00AM</p>	<p>17 N. NNADI 8:00AM-4:00PM (A) B. RATLIFF 8:00AM-4:00PM D. HIOTT 10:00AM-8:30PM B. RATLIFF 4:00PM-12:00AM</p>	<p>18 D. HIOTT 8:00AM-4:00PM (A) B. RATLIFF 8:00AM-5:30PM G. SMITH 10:00AM-8:30PM D. HIOTT 4:00PM-12:00AM</p>	<p>19 M. EMBRESCIA 8:00AM-4:00PM D. HIOTT 10:00AM-8:30PM A. HORRIGAN 5:00PM-12:00AM</p>	<p>20 G. SMITH 8:00AM-4:00PM M. EMBRESCIA 10:00AM-8:30PM M. MAZUMDER 4:00PM-12:00AM</p>
<p>21 D. HIOTT 8:00AM-4:00PM G. SMITH 10:00AM-8:30PM D. HIOTT 4:00PM-12:00AM</p>	<p>22 G. SMITH 8:00AM-4:00PM M. EMBRESCIA 10:00AM-8:30PM G. SMITH 4:00PM-12:00AM</p>	<p>23 M. EMBRESCIA 8:00AM-4:00PM N. NNADI 10:00AM-8:30PM B. RATLIFF 4:00PM-12:00AM</p>	<p>24 N. NNADI 8:00AM-4:00PM (A) B. RATLIFF 8:00AM-4:00PM D. HIOTT 10:00AM-8:30PM B. RATLIFF 4:00PM-12:00AM</p>	<p>25 D. HIOTT 8:00AM-4:00PM (A) B. RATLIFF 8:00AM-5:30PM G. SMITH 10:00AM-8:30PM D. HIOTT 4:00PM-12:00AM</p>	<p>26 G. SMITH 8:00AM-4:00PM B. RATLIFF 10:00AM-8:30PM A. HORRIGAN 4:00PM-12:00AM</p>	<p>27 B. RATLIFF 8:00AM-4:00PM J. CLAYTOR 10:00AM-8:30PM B. RATLIFF 4:00PM-12:00AM</p>

Done Internet | Protected Mode: On 125%

Diagnoses

Consults by Diagnoses (Primary Only)



Dashboard - Time

- Current program results: 40% discharge rate for same day (24-48 hours) of consultation
- Comparing end of first quarter CY 2009 (pre-Telepsychiatry) to end of first quarter CY 2013 (Telepsychiatry) for Mental Health Patients in SC ED's...
 - Overall Patient Wait Times for Inpatient Admissions were down by 46%

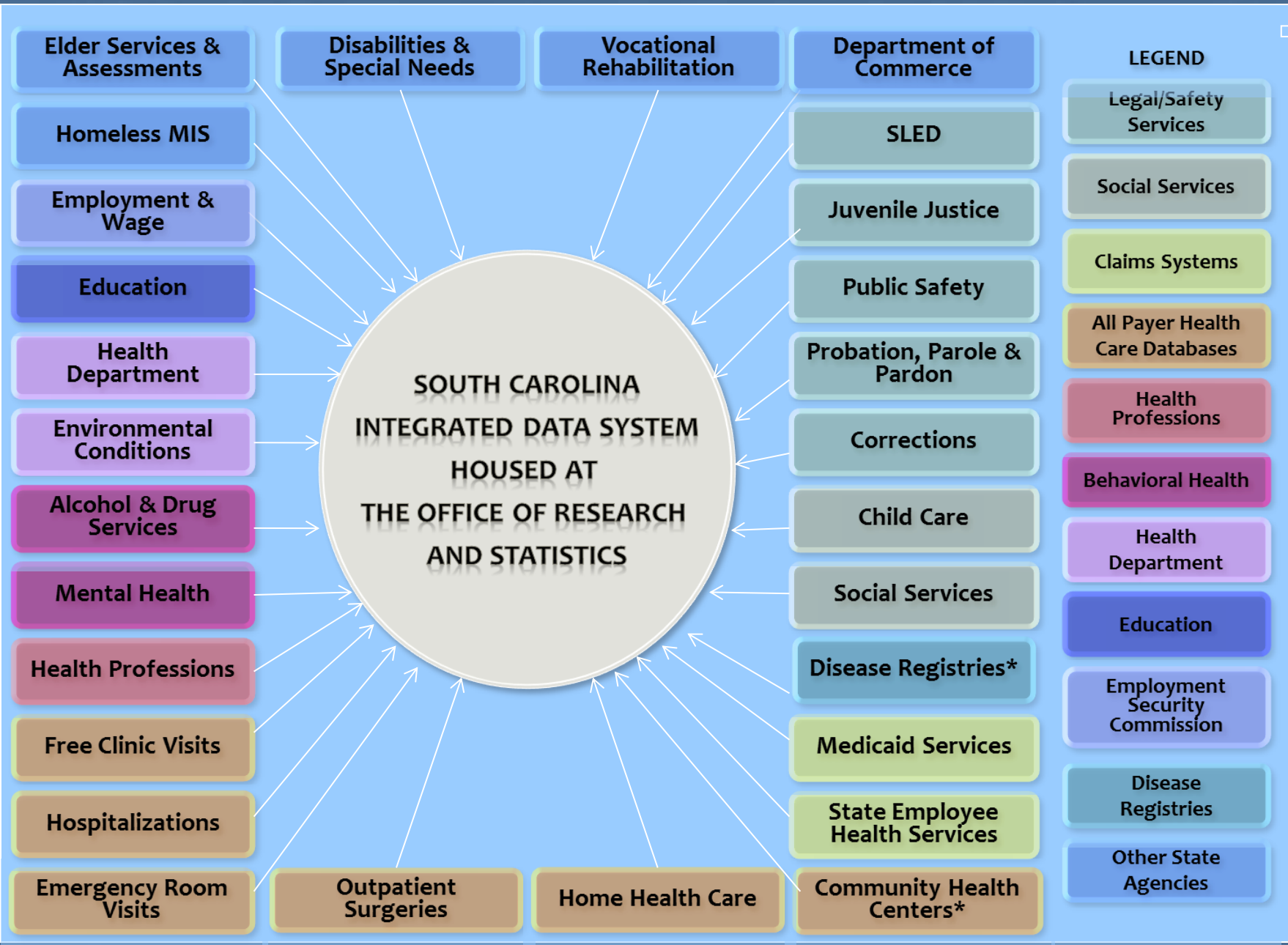
Turn-Around

- 9.1 hours from initial ED request for Telepsychiatry to transmission of patient recommendations (CY 2013 to date)
 - Compared to 2-4 days, pre-Telepsychiatry
- 12.1 consults every 16 hour day (CY 2013 to date)
 - Compared to 1-4 consultations by local MHC MHP's (post-weekend) during a 8 hour day

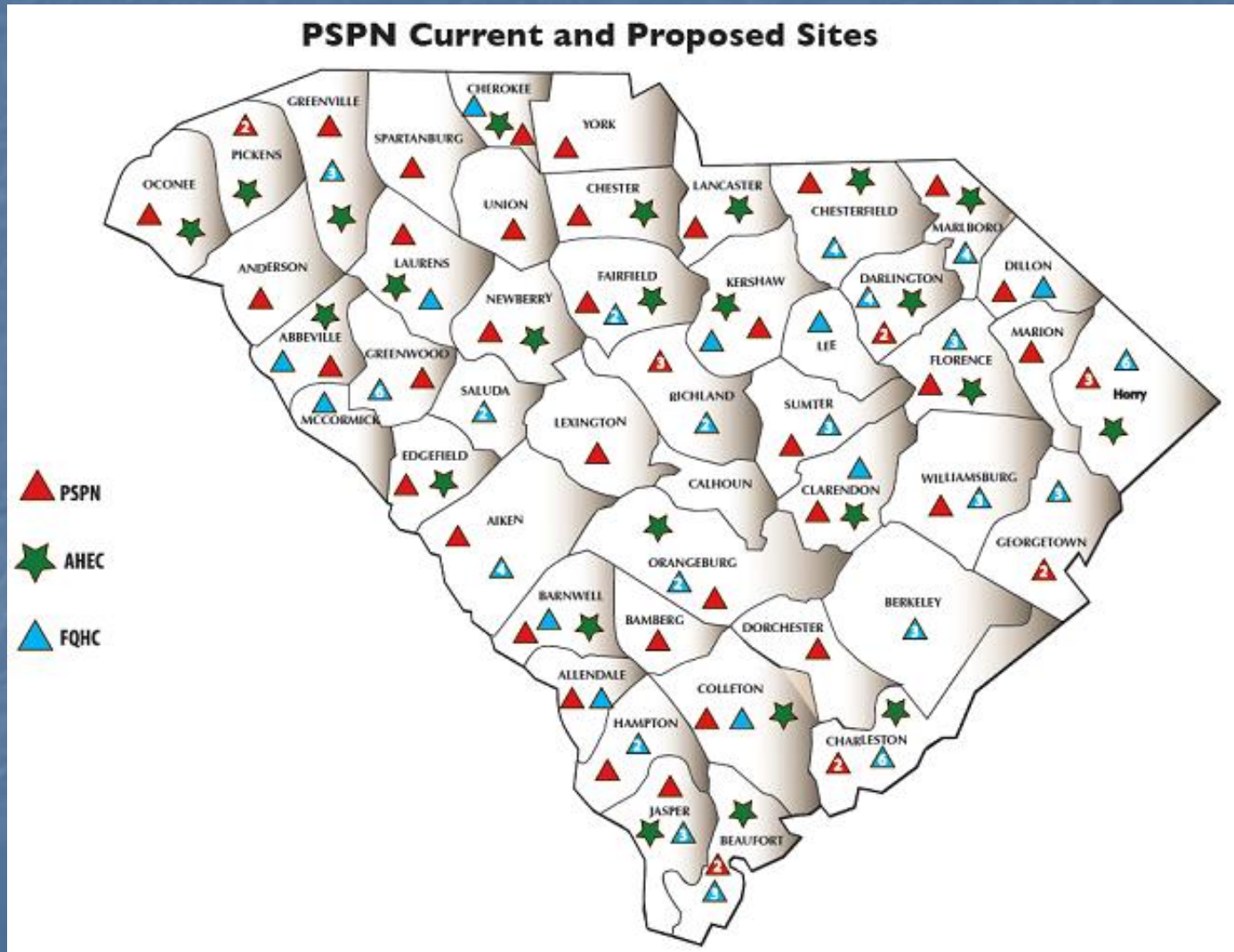
Patient Data Resources

- CIS – DMH patients (past/present) *
- EMR – DMH Intranet-based medical assessment form
- SCHIEx – statewide repository for multi-agency database downloads *

* 75-80% ED patients known across both databases



Palmetto State Providers Network



Satisfaction Surveys

The DMH Telepsychiatry Hospital CEO Satisfaction Survey

In order to provide the best possible services to your hospital, we would like to ask what you think about the Telepsychiatry services you have received and their impact on your hospital. Thank you for taking the time to complete this survey.

Results Duke Telepsychiatry Staff Satisfaction Survey

In order to provide the best possible services to your Emergency Department, we need to know what you think about the services you have received. Please indicate if you Strongly Disagree, Disagree, Are Undecided, Agree, or Strongly Agree with each of the statements below. Fill in the circle that best describes your answer. Thank you for your time and effort in helping us make this project most successful.

1. The overall utilization of telepsychiatry services has increased.
2. The length of time to receive a telepsychiatry consultation (e.g., Tech, etc.) that are available to your hospital is shorter than that of a traditional in-person consultation.
3. Overall, telepsychiatry services have reduced the time to receive a consultation.
4. Emergency department staff are better prepared to handle telepsychiatry consultations.
5. Medical and nursing staff are better prepared to handle telepsychiatry consultations.
6. There is a need for more telepsychiatry services.
7. Receiving telepsychiatry services is easier than receiving in-person services.
8. Our hospital has been successful in implementing telepsychiatry services.
9. Our hospital has invested enough resources in telepsychiatry services.
10. Access to telepsychiatry services is sufficient for our hospital.
11. Telepsychiatry services are cost-effective.
12. Patients are satisfied with telepsychiatry services.
13. I was comfortable receiving telepsychiatry services.
14. Arrangements for telepsychiatry services are safe.

Duke Telepsychiatry Physician Satisfaction Survey

In order to provide the best possible services to your Emergency Department, we need to know what you think about the services you have received. Please indicate the level of agreement or disagreement with each of the following statements. Thank you for your time and effort in helping us make this project most successful.

Section 1 Telepsychiatry Patient Satisfaction Survey

In order to provide you with the best possible services, we need to know what you think about the services you have received by telemedicine today. Please indicate your level of agreement or disagreement with each of the following statements. Your answers are confidential and will now influence the services you receive. Thank you for your time and effort in helping us improve our services to you.

1. Have you heard of telemedicine before today?
 - Yes
 - No
2. Have you had mental health or substance abuse treatment before today?
 - Yes
 - No
3. Have you had mental health or substance abuse treatment by telemedicine in the past?
 - Yes
 - No
4. Have you had any telemedicine services before today?
 - Yes
 - No
 - If yes, what:

Section 2

Please indicate if you strongly disagree, disagree, are undecided, agree, or strongly agree with each of the statements below.

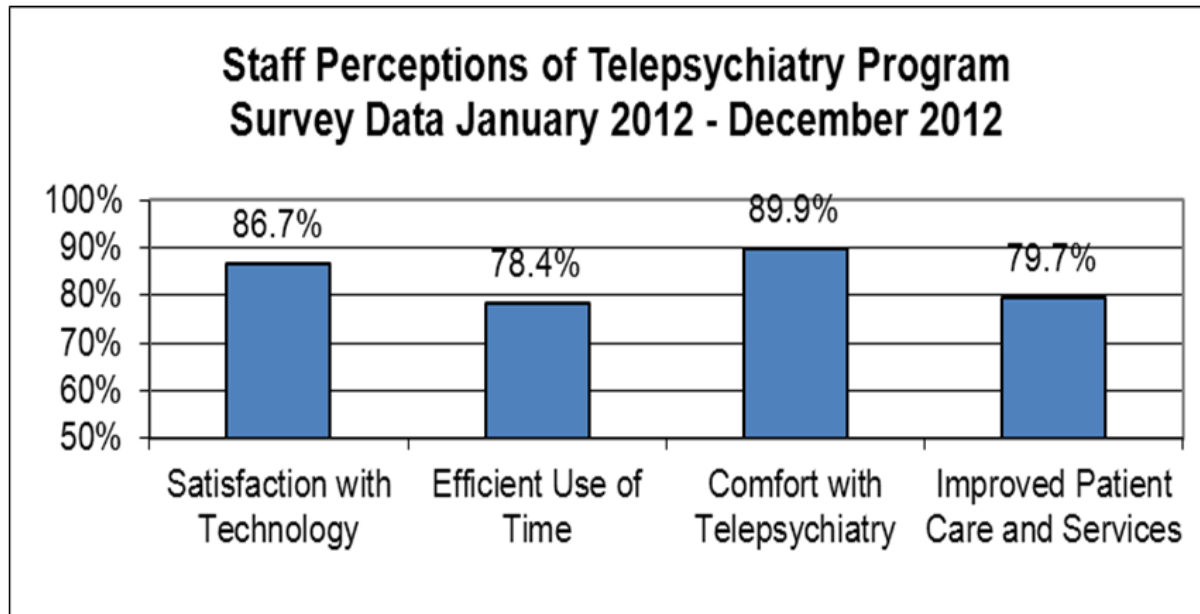
	Strongly Disagree	Disagree	Undecided	Agree	Strongly Agree
5. I was comfortable receiving services by telemedicine today.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. I was satisfied with the mental health or substance abuse services given today.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Survey Results – ED Staff

Staff Perceptions of Telepsychiatry Program

Survey Data January 2012 through December 2012

(n=37)

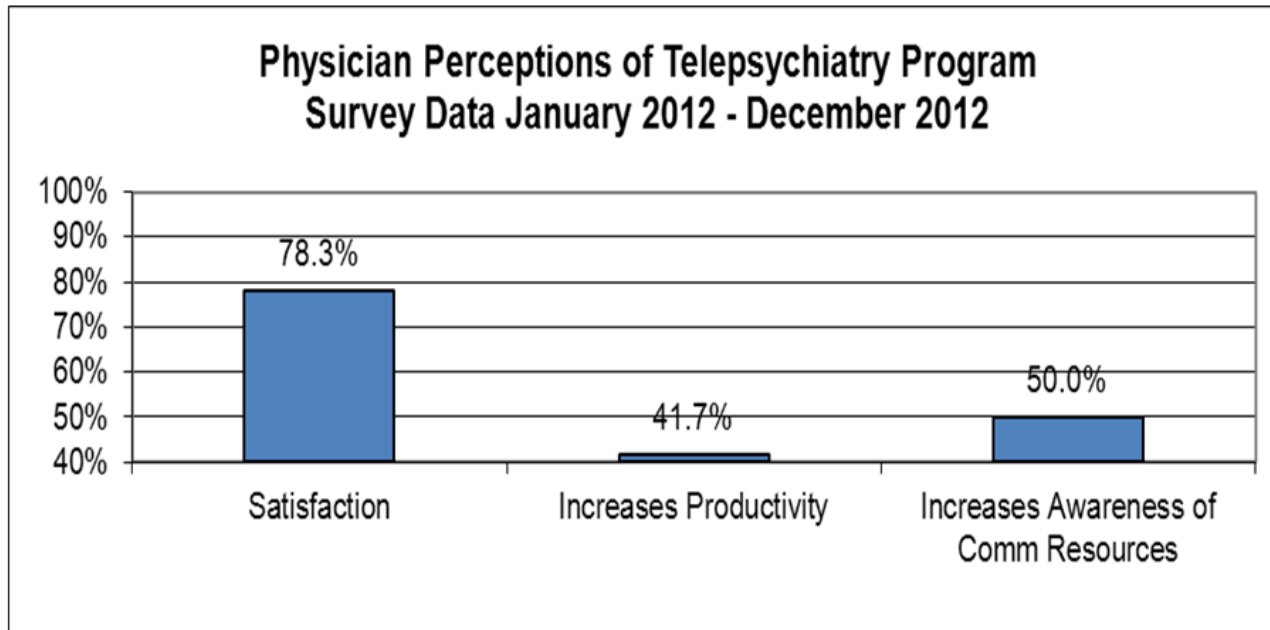


Survey Results - Physician

Physician Perceptions of Telepsychiatry Program

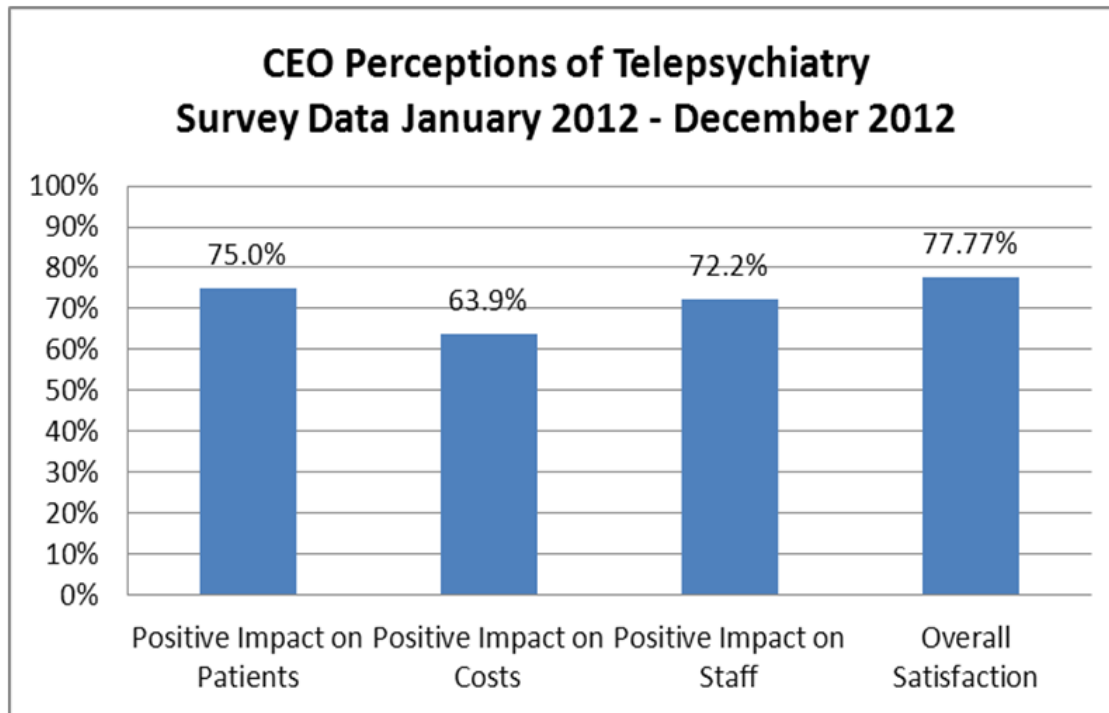
Survey Data January 2012 through December 2012

(n=24)



Survey Results - CEO

Hospital CEO Perceptions of Telepsychiatry Program Survey Data January 2012 through December 2012 (n=12)

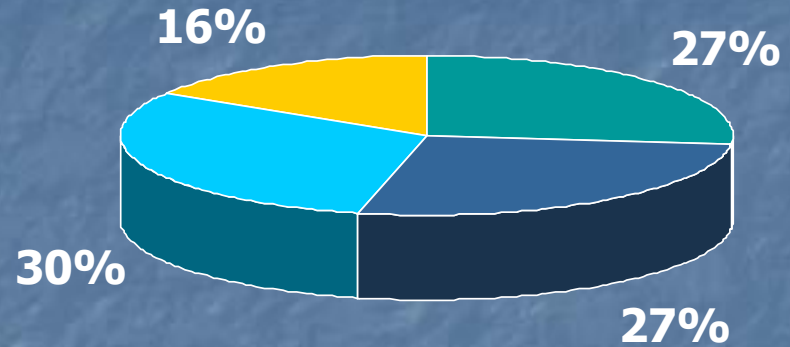


R01 Grant Research

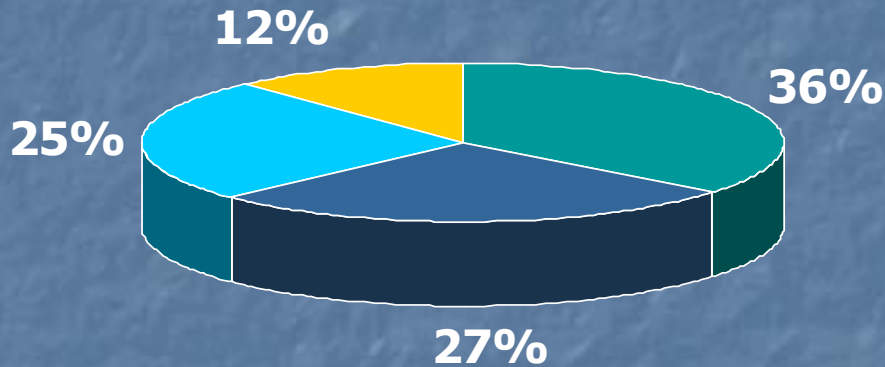
- Collateral Effect: Reallocation of Resources by ED's to ED-appropriate care
- Reduced Commitment Rate to BH Inpatient Beds
- Reduction in Average Inpatient LOS
- Produced Savings of \$1,800 in BH Inpatient Settings per Care Episode
- Equals (approx.) \$27.4 M in BH Inpatient Savings

Sustainability – Revenues

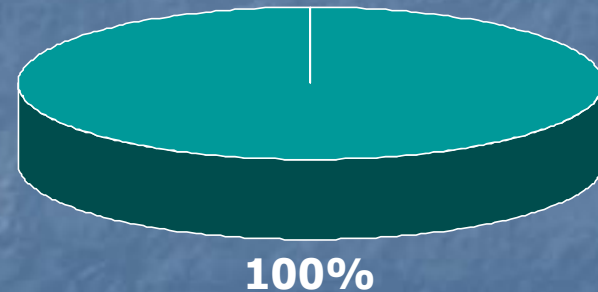
FY 14 PROJECTED



FY 13



PRIOR YEARS



■ TDE
 ■ SC DHHS
 ■ SC DMH
 ■ Hospitals

■ TDE

Website

The screenshot displays the website for the South Carolina Department of Mental Health (SCDMH) Telepsychiatry Program. The header includes the SCDMH logo, the department name, and the program title. A navigation bar contains links for Home, Contact, FAQ, News, Services, and Site Map, along with a search box. A left sidebar lists various site sections. The main content area features an article about behavioral health emergency services, updated on 01-27-13. A right sidebar provides contact information for the project office and links to an on-call calendar, consult queue, and on-line surveys.

DMH South Carolina Department of Mental Health

DMH Telepsychiatry Program

[DMH Home](#) | [Contact DMH](#) | [FAQ](#) | [News](#) | [Services](#) | [Site Map](#)

About SCDMH
Career Opportunities
Centers and Hospitals
Client Resources
Clinical Information
DMH Employees
Procurement
Publications
Services
SC Information
Strategic Planning

The DMH Telepsychiatry Program Updated 01-27-13

**“Partners in Behavioral Health Emergency Services”
Achieving Tomorrow, Today**


Summary:

DMH and the South Carolina Hospital Association (SCHA) requested assistance from The Duke Endowment (TDE) to develop a statewide telepsychiatry network for all SC hospitals operating emergency departments (EDs) and received the first grant on November 30, 2007. To date, the program has received more than \$7.25 million to this end.

The continuing objective of the program is to make psychiatric consultation available in all SC EDs at any hour. The consultations have increased the quality and timeliness of triage, assessment and initial treatment of patients; reduced the number of individuals and length of stay in EDs; and allowed hospitals to direct critical personnel and

Contact Project Office

Phone: (803) 898-8579
Email: rns42@scdmh.org

 [On-Call Calendar](#)

[Consult Queue](#)

On-line Surveys

Please tell us how satisfied you are with telepsychiatry, by completing the survey that pertains to you.

- **Patient**
- **Physician**

Model of Protocol



For more information, please visit:

www.scdmh.org/telepsychiatry

or contact our program office:

**Ed Spencer, M.Ed. MSW,
Director
(803) 898-8579**

Ralph Strickland, Coordinator
rns@scdmh.org



The National Telehealth Resource Center Webinar Series

3rd Thursday of every month

Next Webinar:

Topic: The future of telemedicine: What you should know now

Presenter: Great Plains Telehealth Resource & Assistance Center

Date: Thursday, June 20, 2013

Times: 2:00 PM Eastern Time



Insert Title Here

We value your opinion on this presentation.

Please complete the brief survey found at:

<http://www.surveymonkey.com/s/NationalTRCWebinarSeries>

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from the Office of Rural Health Policy, Health Resources and Services
Administration, DHHS**