

Telehealth Integration of Behavioral Health and Psychiatry into Skilled Nursing Facilities

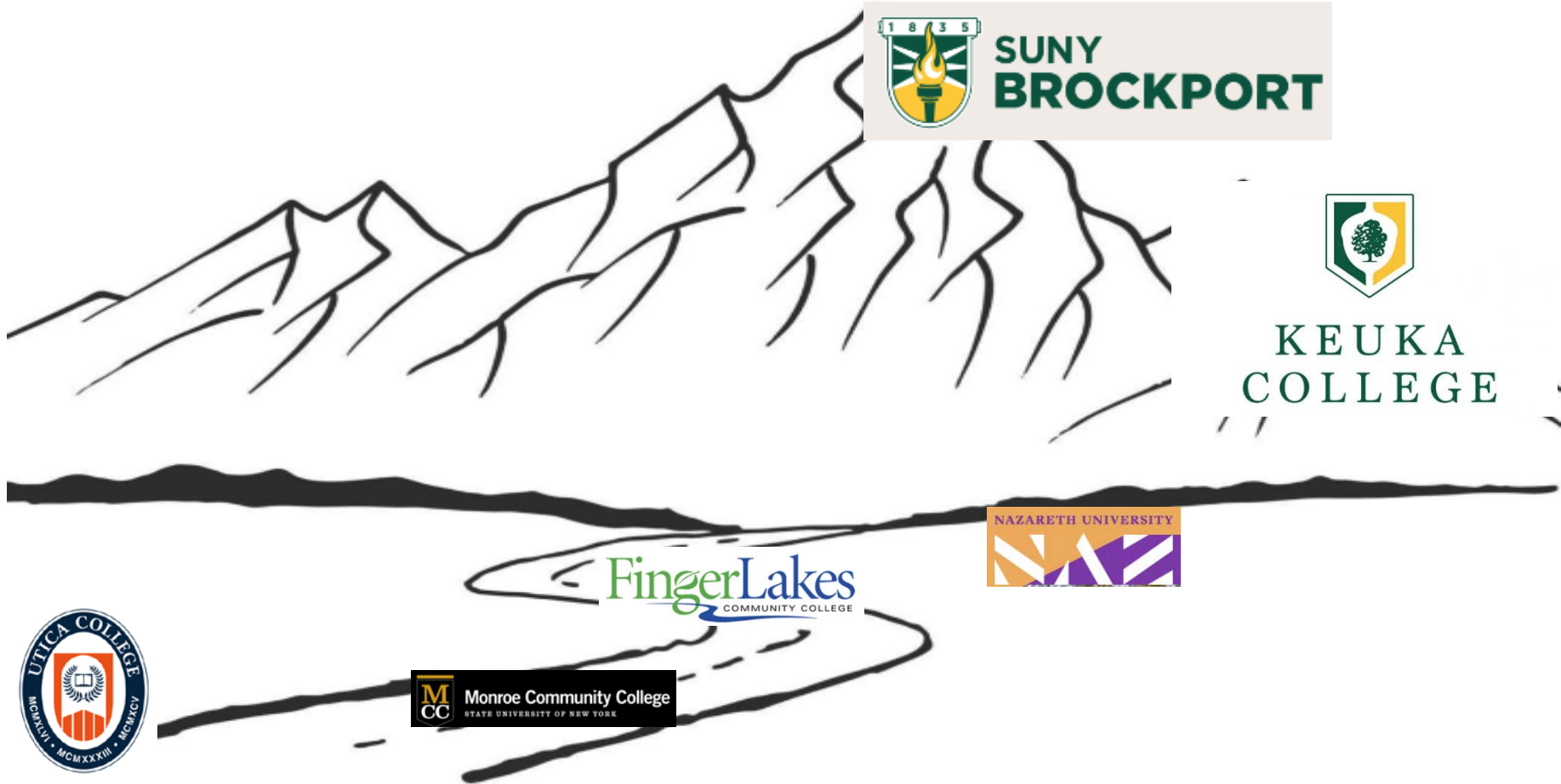
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Disclosure

I have no financial relationships with a commercial entity producing health-care related products and/or services to the content I am presenting.



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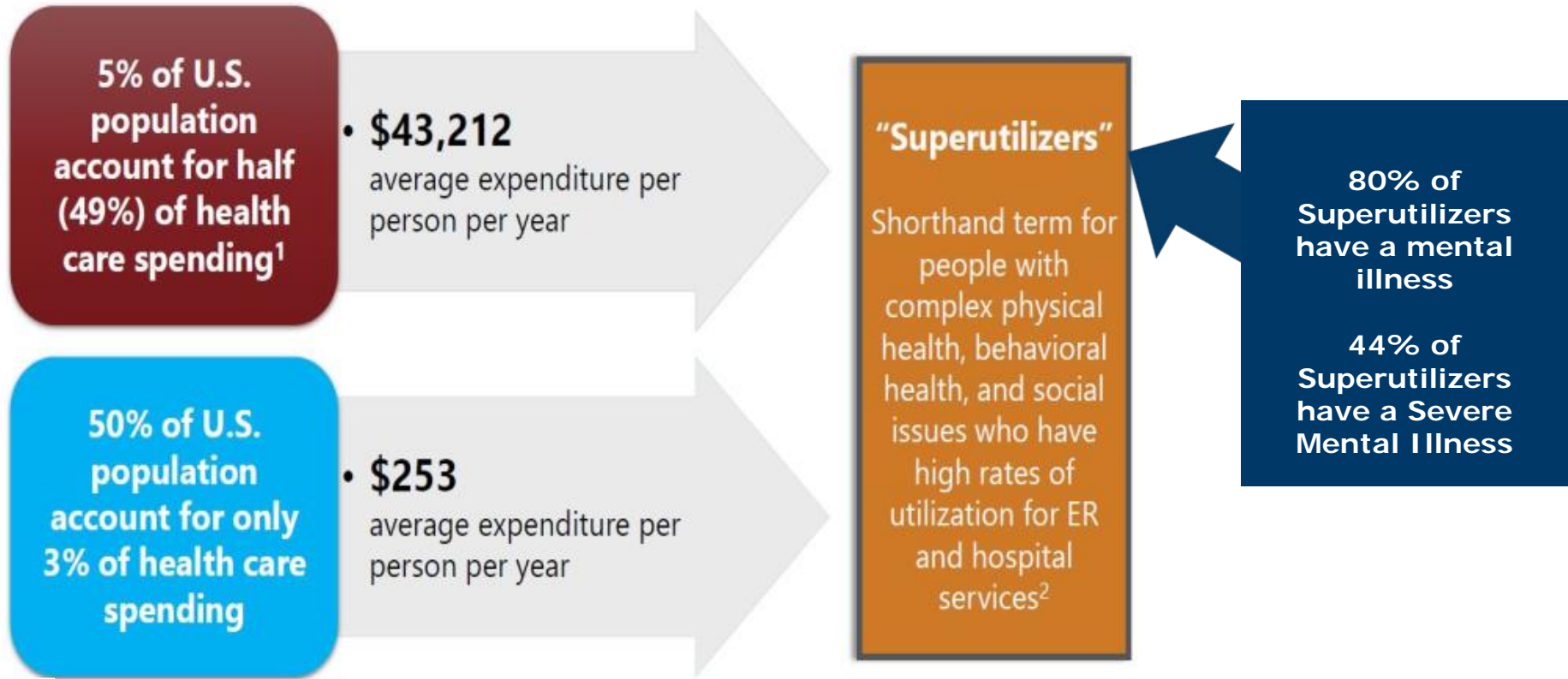
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Learning Objectives

1. Describe the three primary components of URMC's Telepsychiatry program
2. Distinguish between Tele-ECHO® and Telepsychiatry
3. Understand the goals of Project ECHO®
4. Understand the barriers to Telepsychiatry in Skilled Nursing Facilities

Cost of “Complex” Population



 **OPEN MINDS**
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1. NIHCM. (Nov 2014). Health care's 1%: The extreme concentration of U.S. health spending. Retrieved from: <http://www.nihcm.org/concentration-of-health-care-spending-chart-story>
2. The Robert Wood Johnson Foundation. (2015). Better care for superutilizers. Retrieved from <http://www.rwjf.org/en/library/collections/super-utilizers.html>

NYS Skilled Nursing Facility Needs Assessment

624 Nursing Homes

- 30% of new admissions are among persons with mental illness
- 50% of all patients have cognitive impairment
- Three-fold increased risk of hospitalization

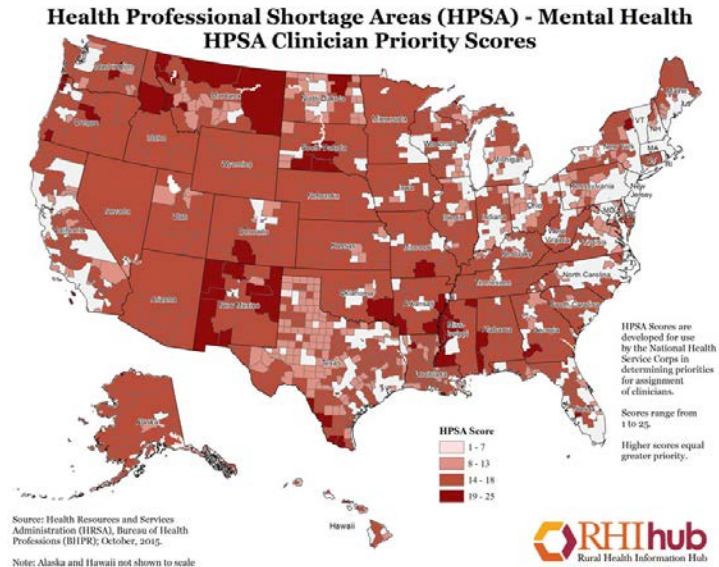
Growing Need

- Aging and disease impact in New York State (NYS)
 - Population age ≥ 65 years will rise from 2.5 to 4 million by the year 2030
 - Elderly with mental illness will rise from 495,000 to 772,000 by the year 2030



Workforce Shortage

- Only **1,596 physicians** are currently certified in **geriatric psychiatry**
- **One for every 11,372** older Americans
- By **2030** that total is predicted to rise to only **1,659**, which would then be only **one for every 20,195** older Americans (ADGAP, 2007b).
- Half of fellowship positions go unfilled nationwide
- General psychiatry is a partial solution
 - **71%** feel very prepared to dx and treat delirium
 - **56%** to diagnose and treat dementia.

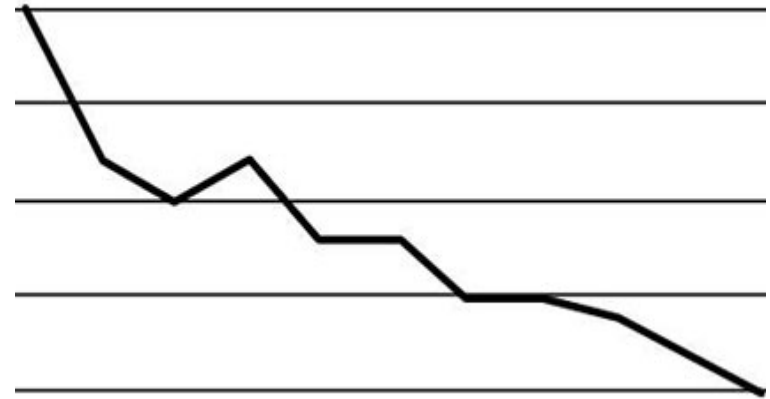


Prevalence of Mental Illness in Nursing Homes

- **Federal deinstitutionalization policies in 60 and 70's**
- **Federal laws and policies to address inappropriate Skilled Nursing Facility placement**
- **Appropriateness of those with significant mental illness living in Skilled Nursing Facilities (SNF)**

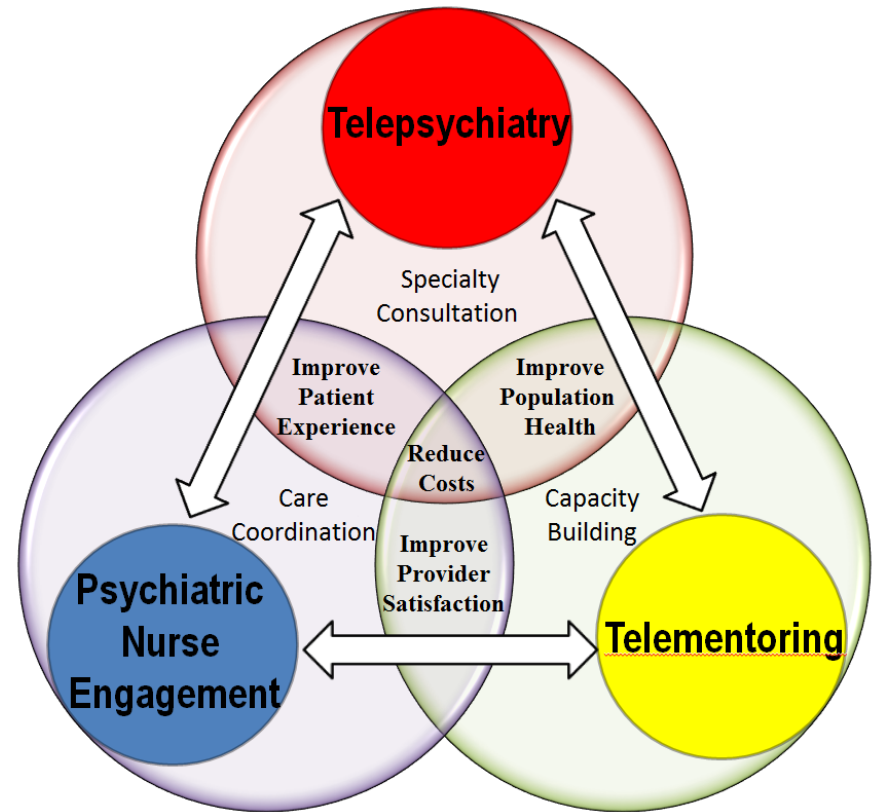
Access to Specialty Care in Skilled Nursing Facilities

- Relative decrease:
- 14.4% orthopedics
- **67.9% psychiatry**

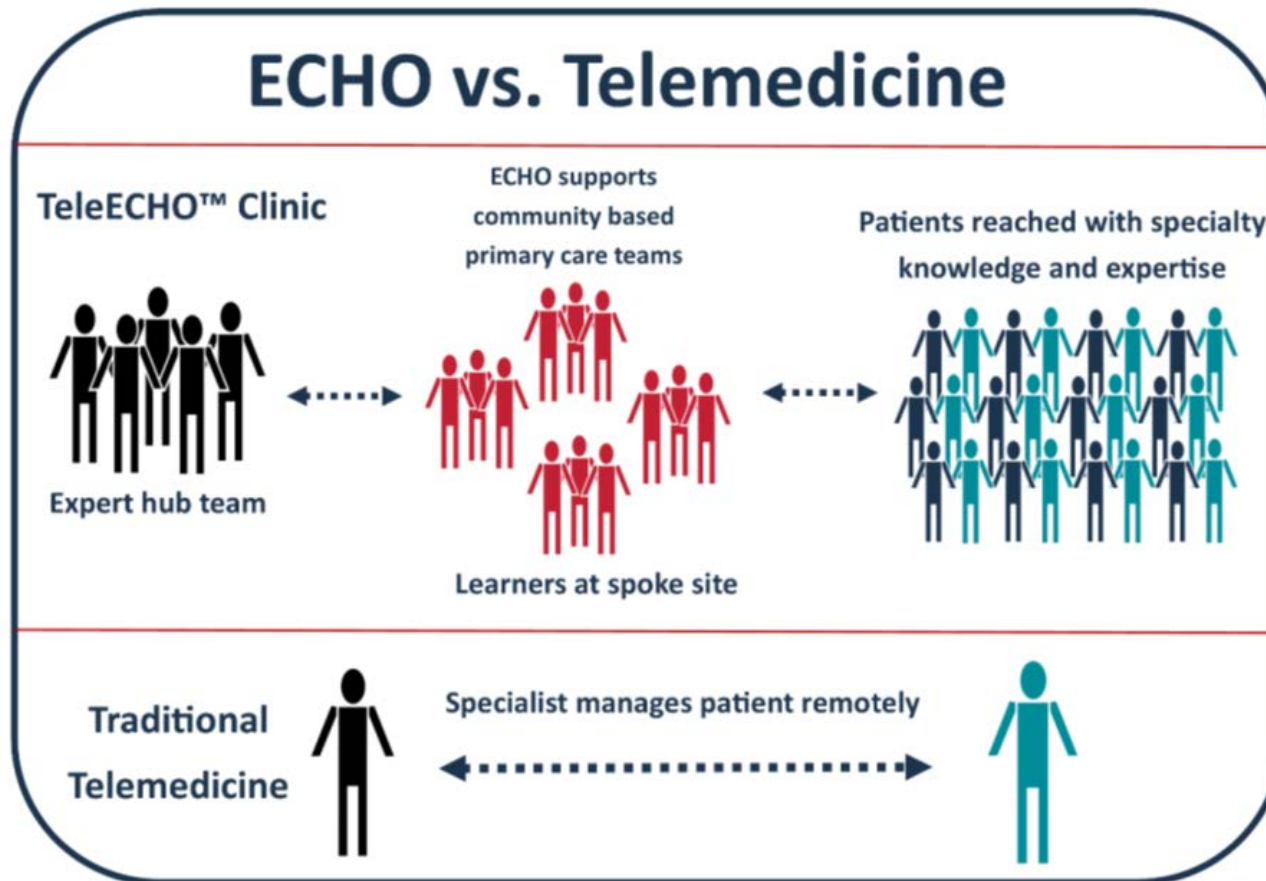


Multi-level Service Approach

- Telementoring: Project ECHO[®] in Geriatric Mental Health (**Extension for Community Healthcare Outcomes**)
- Telepsychiatry
- Psychiatric Nurse Engagement Specialist



Telementoring vs. Telemedicine



Telementoring



University of Rochester **ECHO**

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How Project ECHO[®] Works

- Technology (multipoint videoconferencing and Internet)
- Disease Management Model focused on reducing variation in care processes and sharing “best practices”
- Case-based learning



Goal of Project ECHO[®]

To have a “community of practice” that results in increased skills, knowledge, and self-efficacy of nursing home staff in their management of older adults with complex chronic, psychiatric or dementia illness.



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Project ECHO[®] – HUB Team

Utilizes a URMC **behavioral health specialist team** that consists of:

- Geriatric Psychiatrist
- Psychiatric Nurse Practitioner
- Geriatrician
- Psychiatric Pharmacist
- Psychologist
- Psychiatric Social Worker
- Representative from the Alzheimer's Association



Project ECHO[®] Didactics

- Antipsychotics and GDR
- Disease Specific:
 - Delirium, Depression, Dementia
 - Personality Disorders
 - Psychosis
 - Anxiety
 - PTSD
 - Bipolar
 - Schizophrenia in Late Life
 - Traumatic Brain Injuries



- Behavior
 - Challenges in Dementia Care
 - Care Planning
 - Behavior and Medication Documentation
- Countertransference
- Trauma Informed Care
- Medication
 - Long-Acting Antipsychotics
 - Prescribing Practices in Long Term Stabilization

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Project ECHO[®] Case Presentation

- Nursing home staff can present challenging geriatric mental health and dementia care cases
- Great opportunity to collaborate with the ECHO team and SNFs across the state
- De-identified – No consent needed
- Structured format followed by guided group discussion
- Recommendations provided by the behavioral specialist hub team



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Project ECHO[®] Attendees

- Nursing Home staff at all levels are encouraged to participate in the clinic:
 - Physicians
 - Midlevel providers
 - Nurses
 - Nursing aides
 - Social workers
 - Therapists
 - Activities
 - Administrators

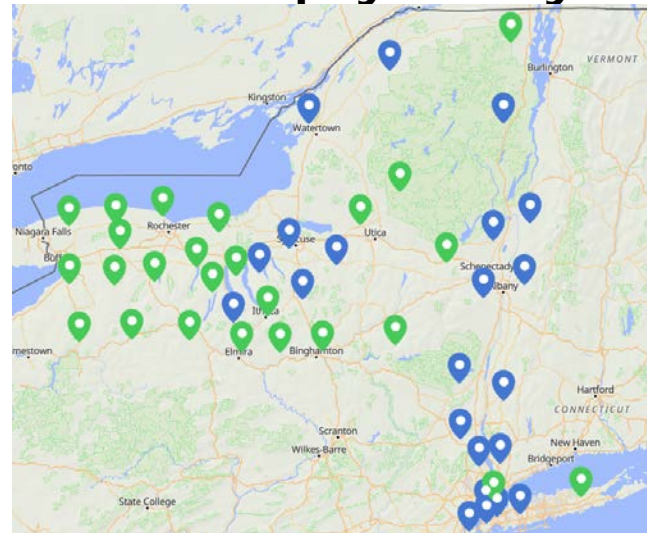


ECHO[®] Reach Across New York State

OMH ECHO[®] Data July 2017 – Present

- 150 Clinics
- 9,000 Attendees
 - 73% Case Presentations from SNFs

ECHO[®] and Telepsychiatry



Counties with no Utilization



Telepsychiatry

- OMH definition: "...a means of using two-way real time interactive audio and video equipment to provide and support psychiatric care at a distance."
- Advantageous for rural populations or areas with limited psychiatric services.



Benefits

- Enhance psychiatric education and clinical skills for the treatment team
- Minimize physical/emotional disruption to the patient as the evaluation takes place in *their* setting
- Enhance multidisciplinary coordination of care
- Cost savings related to travel time of Psychiatric providers; increased patient caseload
- Interventions associated with reductions in Emergency Room use and acute hospital stays



Telepsychiatry Video Consultation

Common Indications for a Telepsychiatry Referral:

- Suicidal ideation
- Aggression or behavioral disturbance
- Delirium
- Dementia
- Medication management
- Depression
- Anxiety
- Capacity Evaluation
- PASRR



Intake/Referral Form

PSYCHIATRY CLICK HERE TO PRINT FORM

SNF Telepsychiatry Referral Form

Name: _____ Date of Birth: _____

Date of referral: _____

New Patient Is this resident presently being followed by Psychiatry at your home? YES NO

Follow up Was this resident admitted from an OMH facility? YES NO

Reason for Referral: Behaviors Depression Anxiety Medication Review Other: (Specify) _____

PASRR Evaluation. Please provide a brief descriptive of current status in the summary section: Stable or changes since the last PASRR assessment. *Must send updated info with each PASRR request (ASCEND), always include updated medication list. If there are days/times that absolutely don't work, you may place them here but please know that this may push out the appt offer further. (ex: dialysis or SW onsite certain days)

Nursing Facility Name: _____ Contact Person(s): Include Phone # and Email _____
Note: (This email will be used to send the meeting ID#)

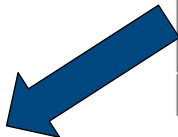
Facility Fax #: (for sending consult summary) _____

ALL REFERRALS MUST INCLUDE ITEMS BELOW: *First 3 items should be at the front of the packet.*

Consent form (must be signed/verbal by resident or HCP or provider)
 Doctor's order including reason for referral (this cannot be a blanket/PRN/standing order)
 Demographic form (Face Sheet with complete diagnosis list)
 Relevant progress notes (a few recent examples related to the reason for referral)
 Most recent provider assessment/evaluation
 List of Medications (dosages and schedule) Recent labs/Diagnostic tests(as available)
 BIMS Score/Date PHQ9 Score/Date

Please include if available:
 AIMS MOCA Serianic Depression Scale Cornell Scale for Depression in Dementia
 MMSA Psychiatric History Past medication trials/ODR records Other: (Specify) _____

Summary of resident's current psychiatric issues (include onset, duration of symptoms, associated



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- List of Medications (dosages and schedule) Recent labs/Diagnostic tests(as available)
- BIMS Score/Date PHQ9 Score/Date

During the Video Consultation

1. Nursing Home Support staff will sign on initially without the resident to discuss the case
2. Support staff will need to be available to
 - Discuss current medications and behavioral concerns
 - Discuss past trials (pharmacologic and/or non-pharmacologic)
 - Provide reassurance to the resident
 - Manage and operate the telehealth equipment
 - Help troubleshoot and resolve problems



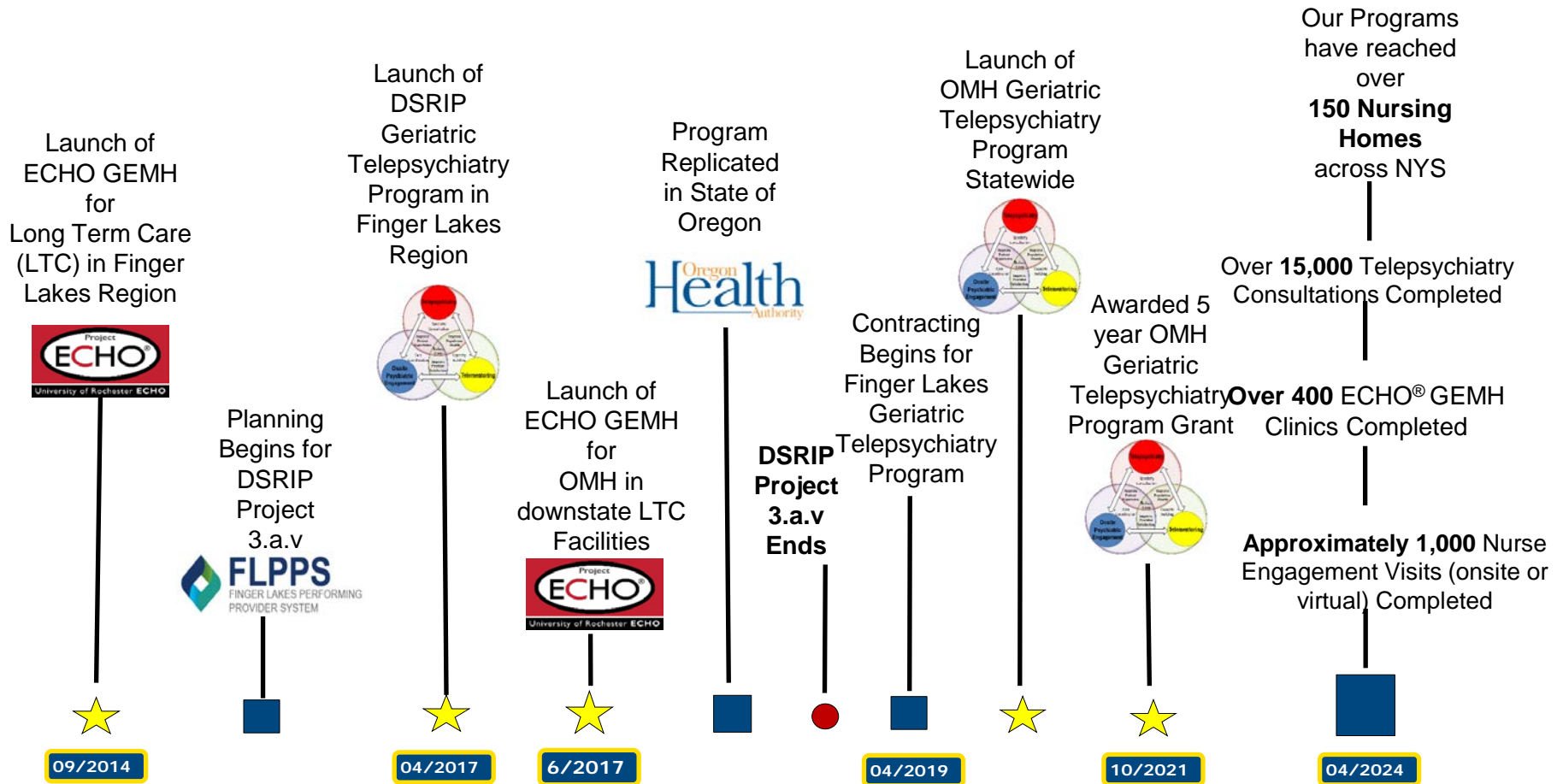
Nursing Support Staff are the Telepsychiatry provider's **“hands”**

Nurse Engagement Specialist

- Provide virtual assistance with Behavioral Care Plans
- Serves as a resource to OMH CMHN and SNF staff
- Provide virtual assistance with ECHO and Telepsychiatry engagement
- Provides Telepsychiatry triage for urgent requests from SNF
- Serves as ECHO Project Coordinator

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Program Milestones

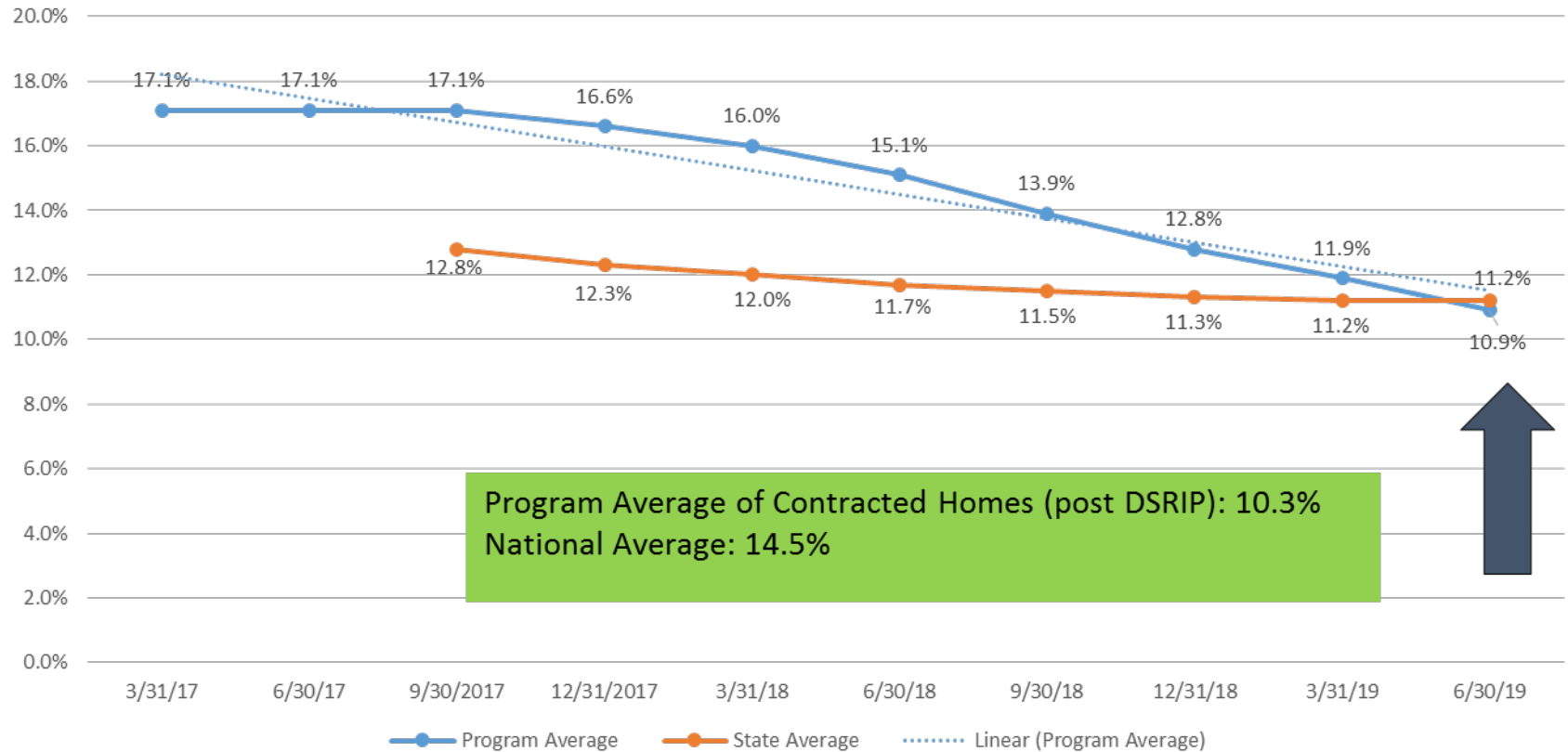


Successes

URMC DSRIP Program 2017-2019

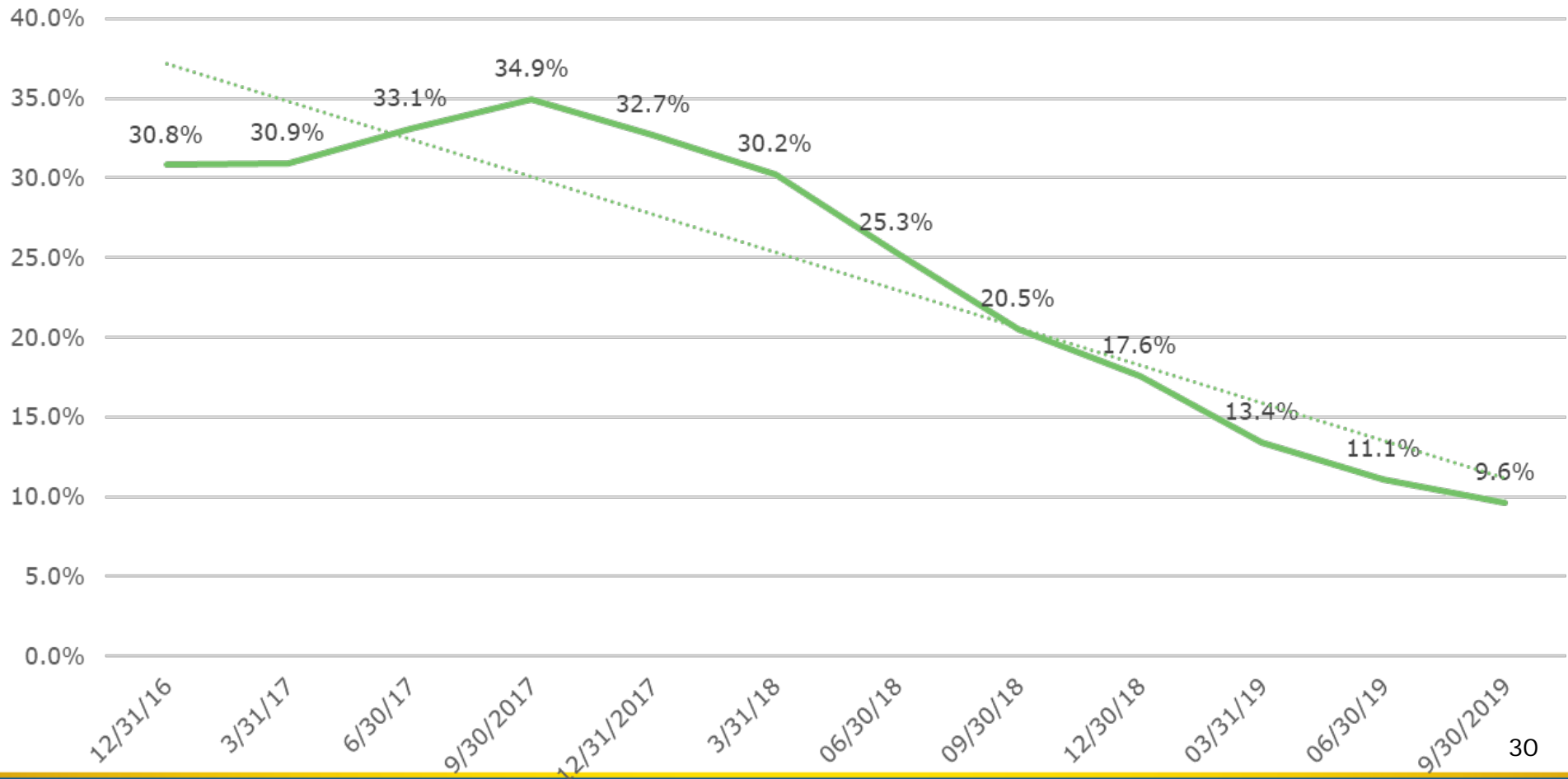
- **29 SNFs** in the Finger Lakes region
- Goal: decrease antipsychotic use in long-stay residents met: **37% decrease**
- **Quarterly meetings** with key stakeholders at each facility
- **1,748 completed consultations**

DSRIP: Antipsychotic Use in Long-Stay Residents



SNF Success Story

Antipsychotic Use in Long-Stay Residents



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Successes

URMC – OMH Telepsychiatry Program 2019-Present

- 60 SNFs across New York State
- Goal: increased collaborations between the Office of Mental Health and SNFs across the state
- **Over 9,000 completed consultations**

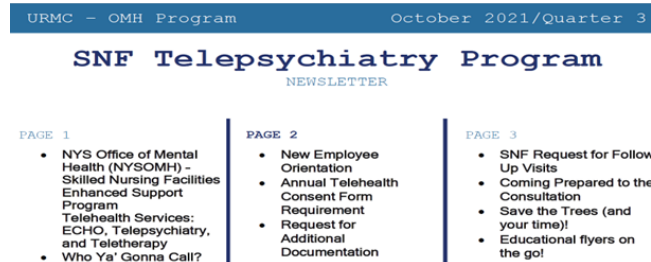
Planning and Implementation

Program Development

- Process
- Data Management
 - Appt tracker
 - Facility/Contact Spreadsheet
- Engagement – Quarterly reports/meetings with key stakeholders
- Continuous Quality Improvement

Keeping our Partners Engaged

1. Quarterly Newsletter



2. Quarterly New Employee Orientation



3. ECHO® Survey Tool



4. Resource "BOX"

Forms, Education, ECHO® Materials




Resource BOX

WELCOME!

Always stop here first to see what's new, read about hot topics and learn how to explore what's in the BOX.

This BOX account holds many valuable resources for your facility!

- WELCOME FOLDER
 - Updates to Telepsychiatry processes/procedures, important new information
 - Family Involvement Flyer
 - Telepsychiatry Quick Reference Guide
- FORMS FOLDER– Telepsychiatry Referral, Telehealth Consent, Capacity Referral, and Telepsychiatry Appointment Notes Form
- EDUCATIONAL MATERIALS FOLDER– Educational flyers and staff self-care blips can be found here along with other educational resources. *Please note* – you can also find educational resources in the ECHO folder.
- TELEPSYCHIATRY NEWSLETTERS - The last four editions of the Newsletter will be kept on file.
- ECHO – Upcoming ECHO didactic topics, past didactic power points and related educational items.

 Fillable PDF referral- Telepsychiatry.pdf

 Referral Form BLANK - Telepsychiatry .pdf V2

 Referral Form SAMPLE - Telepsychiatry .pdf

 Capacity Referral Form - Telepsychiatry.pdf

 Items Needed For Telepsych Referral Flyer.pdf

 Consent Form - BLANK.pdf

 Consent Form - SAMPLE.pdf

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****STOP HERE FIRST****WELCOME AND UPDATES CENTER

FORMS - Telepsychiatry-ONLY FOR USE WITH CREDENTIALLED FACILITIES

ECHO

Educational Materials

Newsletters

UPCOMING DIDACTICS:

9/24/24 Monitoring of Psychiatric Meds

10/8/24 Difficult Discussions Re: Goals of
Care Planning

10/22/24 ?Working with Difficult Families

Barriers

- Nursing Home **Staffing/Turnover/Shift-Changes**
 - Lack of recommendation implementation
 - Need for clinical personnel to be present during the encounter
- Provider Resistance
- Knowledge Gaps
- Credentialing and Privileging



Additional Services

- Process Group intervention – COVID
 - Delivered via Project ECHO[®]

- Resident Suicide debriefing with SNF staff and URMIC Psych NP



Customer Feedback

“Over the years, we have been fortunate to utilize the services of the URM C Telepsychiatry Program for our residents with mental or behavioral health needs. These services were not readily available in our area, and, through the use of video equipment, our residents do not need to travel outside of the facility for professional consultation. The telepsychiatry team has been instrumental in helping us improve the quality of life of our residents offering assessment, medication review, treatment recommendations, and capacity determinations. The nurse engagement specialist collaborates with us monthly, helping create behavioral care plan interventions, and providing staff education.

We greatly appreciate the services provided by the telepsychiatry team.”

~Director of Nursing – Skilled Nursing Facility has participated since 2017

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Customer Feedback

“The Nurse Engagement visits are so valuable to our team. She has helped on the units with challenging residents/behaviors, modeling appropriate responses and interventions. She has also been a wonderful resource to our nursing leadership.”

~Nursing Home Administrator– Skilled Nursing Facility has participated since 2018

Acknowledgements

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University of Rochester Medical Center
Associate Professor of Psychiatry, Neurology and Medicine
Clinical Chief, Division of Geriatric Mental Health and Memory Care

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