Vermont Emergency Telepsychiatry Network

LANDSCAPE SCAN

2024

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INTRODUCTION

As a part of a multi-year effort beginning in 2022, the Vermont Emergency Telepsychiatry Network (VETN) was established as a **statewide system** helping Vermont EDs provide timely **psychiatric care via telehealth for individuals with mental health needs**. In May 2022, we surveyed all Vermont EDs about telepsychiatry. Results were published in the **VETN Needs Assessment Report**. As the first project period reaches its end, VETN assessed a high level "state of the state," in terms of the current utilization of telepsychiatry in EDs and how that landscape might inform future funding efforts to continue to improve timely access to psychiatric and mental health care for all Vermonters.

A short survey was developed and distributed to all EDs throughout Vermont during Summer 2024.

This effort gathers point-in-time perspectives on:

Current utilization of telepsychiatry in EDs

Workflow considerations

Potential future projects and pilots

Needs for future training/education and support

METHODOLOGY

In July 2024, the VETN project team designed a needs assessment survey to gather insights on the use of telepsychiatry in EDs across Vermont. The survey aimed to **assess current telepsychiatry use cases, provider and staff satisfaction, workflows, success and challenges, and collaboration with the Designated Agency (DA).**

The needs assessment was structured using SurveyMonkey and included a mix of multiple-choice, Likert scale, and open-ended questions. The survey was sent to 14 hospitals via email in August 2024 by Vermont Program for Quality in Health Care. Hospitals were given two weeks to complete the survey, with follow-up reminder emails sent midway through the response period to encourage participation. **Eight of the 14 hospitals completed the survey, yielding a 57% response rate.** Responses were received from the following entities:

Northeastern Vermont Regional Hospital

Grace Cottage Hospital

Mt. Ascutney Hospital

Central Vermont Medical Center

North Country Hospital

Brattleboro Memorial Hospital

Southwestern Vermont Health Care

Copley Hospital

The data were received and analyzed by the MCD team in September 2024. This analysis involved reviewing both quantitative and qualitative responses to **identify trends, gaps, and potential areas for future involvement and engagement** from the Vermont Emergency Telepsychiatry Network.

KEY FINDINGS
Based on survey responses

Telepsychiatry usage is widespread.

Of the 8 hospitals that responded to the survey, 7 currently offer telepsychiatry services in their EDs. All 7 hospitals reported **24/7 availability of telepsychiatry services**, demonstrating widespread access to psychiatric support for emergency situations.

External providers are more common than internal.

The majority of hospitals (6 out of 7**) rely on external vendors** such as Array Behavioral Care, and others to provide telepsychiatry services. Only one hospital employs an internally employed psychiatrist for this purpose.

A variety of services are offered – some more common than others.

The **most commonly provided telepsychiatry services** include:
- Consultation and guidance directly to ED providers (86%)
- Initial evaluations (71%)
- Consultation and treatment directly to patients (57%)
- Safety assessments (57%)

Less common but still utilized are services such as follow-up evaluations and assistance with involuntary treatment orders (43%).

KEY FINDINGS

Based on survey responses

A range of diagnoses are treated via telepsychiatry.

The hospitals reported treating **a range of psychiatric conditions** via telepsychiatry, including:

- Mood disorders, schizophrenia, and anxiety disorders (100%).

- Substance-related disorders and delirium/dementia (71%).

Consistent collaboration between EDs and Designated Agencies remains a challenge.

Consistent collaboration between EDs and Designated Agencies (DAs) remains a challenge. Key areas of collaboration include:

- Getting DA records into the hospital's EHR (57%)

- Daily huddle time (14%)

- Only one hospital indicated that DA mental health clinicians could document directly into the ED's EHR, and no hospital staff had direct access to DA medical records.

These findings underscore the importance of telepsychiatry services in supporting emergency psychiatric care, but also highlight significant challenges in accessing local psychiatrists, collaboration with DA providers, and the need for more integrated care processes. Addressing these issues can help streamline the delivery of telepsychiatry and improve overall patient outcomes.

LESSONS LEARNED

Telepsychiatry services have become a valuable tool for EDs throughout Vermont. Based on feedback from survey respondents, several key lessons have emerged from the ongoing implementation of these services.

These insights provide a clearer understanding of the current strengths and areas that need improvement to maximize the impact of telepsychiatry in ED settings.
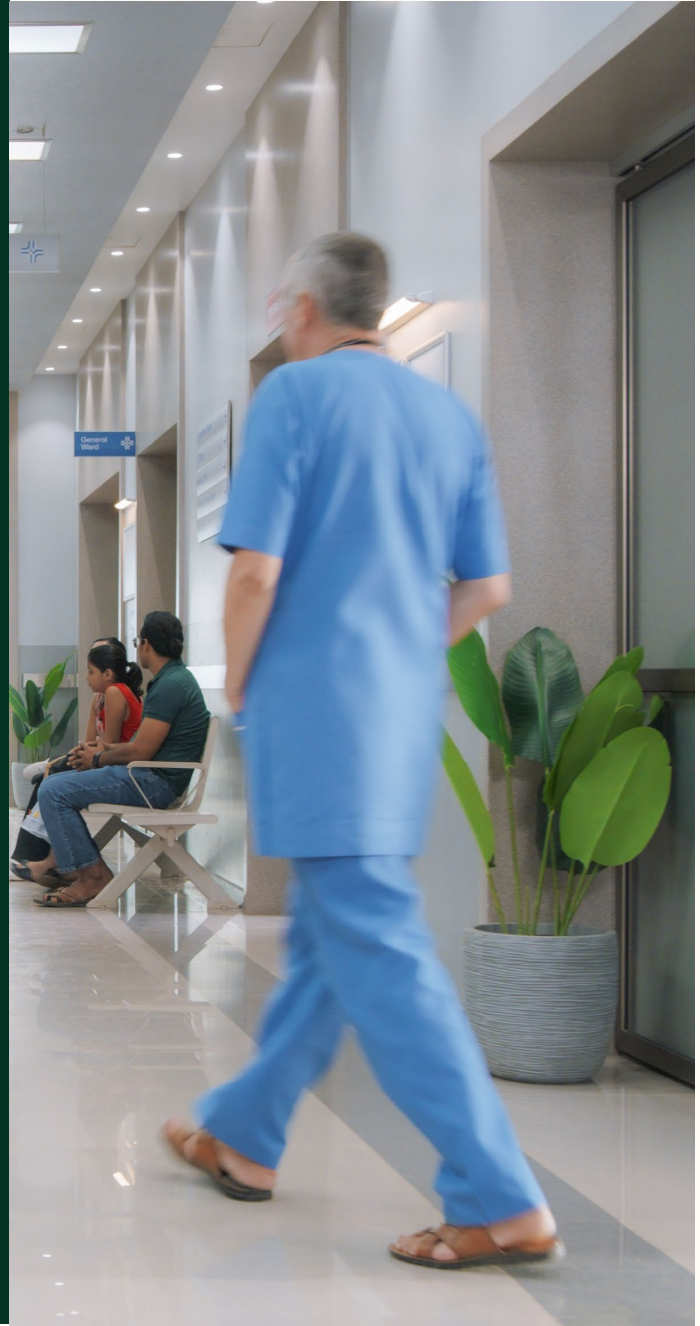
- **Timeliness of Telepsychiatry Services:** Although telepsychiatry coverage was reported as adequate (24/7), delays in telepsychiatry responses were a common issue, with some hospitals experiencing wait times of up to 8-10 hours. Non-urgent requests were also often delayed, further complicating care provision. These gaps illustrate the need for broader coverage and more efficient response mechanisms to meet patient needs. This suggests that while telepsychiatry offers vital support, timely access to psychiatric expertise remains a challenge.

- **Variability in Service Quality:** The quality of telepsychiatry services varied across hospitals, with some reporting satisfactory outcomes while others expressed frustration over provider shortages and inconsistent service. The dependency on small number of providers, exacerbated these issues as staffing shortages impacted response times.

LESSONS LEARNED

- **DA Psych Provider Role and Limitations:** Designated Agencies are mostly limited to mental health assessments by mid-level clinicians. Their role includes assessing safety and supporting disposition planning. Only one respondent reported DA psychiatric providers consulting in their ED. The limited involvement of DA psychiatric providers was attributed to capacity issues, and the survey highlighted the need for more efficient integration and better collaboration between ED and DA staff.

- **Collaboration and Integration with DA Providers:** Effective collaboration between ED and DA psychiatric providers is critical for patient care, yet many hospitals reported difficulties in this area. Limited access to hospital EHR systems for DA providers, coupled with slow documentation turnaround, created workflow inefficiencies. Improving these connections would help streamline patient care coordination.

While telepsychiatry has brought essential psychiatric services to emergency departments, there are clear areas for improvement. Addressing issues related to service timeliness, collaboration with DA providers, and overall workflows can significantly enhance the efficacy of telepsychiatry programs. Hospitals can use these lessons and share best practices with one another to refine their current telepsychiatry operations and deliver better patient outcomes.

FUTURE OPPORTUNITIES

There are significant opportunities to **optimize telepsychiatry services in emergency departments throughout Vermont** and for VETN to support the area hospitals. These opportunities build on the lessons learned and address the key challenges hospitals currently face.

Improvement in Response Times
Reducing the wait time for telepsychiatry consultations is a critical opportunity for improvement. By exploring alternative providers or negotiating with existing vendors to enhance response times, hospitals can ensure that psychiatric support is more rapidly accessible when needed.

Strengthening EHR Integration
A stronger integration of DA providers into hospital electronic health record (EHR) systems would streamline patient care and enhance communication across care teams. Providing DA psychiatric providers with real-time access to hospital EHRs and the ability to document directly within the system would significantly improve workflow and coordination.

Promoting Standardized Workflow Processes
Developing more standardized care coordination processes, such as daily huddles or integrated communication platforms between ED and DA teams, could improve collaboration. Hospitals can adopt best practices from high-performing telepsychiatry programs to streamline coordination and enhance communication across all care teams.

FUTURE OPPORTUNITIES

Increasing Statewide Resources

The expansion of statewide psychiatric resources, such as a learning collaborative or a regularly occurring office hours, represents a long-term opportunity to address ED challenges and share best practices. Respondents also cited the need for patient and family/caregiver engagement materials to support their emergency telepsychiatry programs. Development of such materials could be supported by the VETN Advisory Board and project partners such as MCD and NETRC.

Economies of Scale

One opportunity could lie in leveraging existing partnerships and negotiated pricing from a shared vendor, to achieve economies of scale. By centralizing contracting through one entity, individual hospitals could benefit from reduced costs and streamlined processes. A shared vendor could manage contracts and pass on the savings to user sites, making telepsychiatry services more affordable and accessible across Vermont's emergency departments. This collaborative approach could help improve the sustainability and expansion of telepsychiatry services while reducing the financial burden on smaller facilities.

In Conclusion...

The future of telepsychiatry in Vermont EDs holds many opportunities for enhancement. By addressing the current gaps in service and investing in coordination, hospitals can improve the delivery and efficiency of psychiatric care in emergency settings. These changes will enable telepsychiatry to reach its full potential and provide better outcomes for patients across the region.