

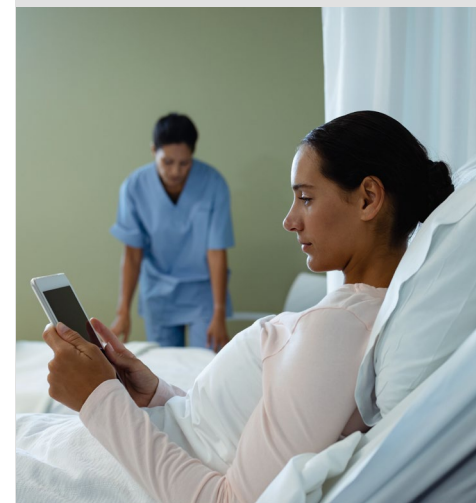
VPQHC

Vermont Program for Quality in Health Care, Inc.

VETN Advisory Board

August 11, 2023

Ali Johnson, MBA | Quality Improvement Specialist



Agenda

- Welcome
- Best Practice Inventory
 - Caren Bishop, MS | Reid Plimpton, MPH
 - MCD Global, NETRC
- Project Updates
- Evaluation
 - Nikie Sarris Esquivel, MPH
 - RTI International
- Timeline
- Funding
- Discussion
- Wrap-Up



Best Practice Inventory

Caren Bishop, MS | Reid Plimpton, MPH

Northeast Telehealth Resource Center, MCD Global



VETN Best Practices Inventory

- Assessment Development
 - ED Outreach
- Assessment Review
 - Key Takeaways

Assessment Development

- VPQHC / NETRC / MCD Teams
- **Goal:** To learn more about the ED's workflow(s) for emergency telepsychiatry services and to share best practices with other EDs throughout the state.
 - What we learn will be used to help inform the development of an online training resource that will be made available to all hospitals and EDs throughout the state.
- Invitees:
 - Brattleboro Memorial Hospital
 - Central Vermont Medical Center
 - Gifford Medical Center
 - Grace Cottage Hospital
 - Mt. Ascutney Hospital and Health Center
 - North Country Hospital
 - Southwestern Vermont Medical Center
 - The University of Vermont Medical Center*

Assessment Development Continued

Survey Topics / Areas of Interest

- Workflows
- Technology
- Patient and Family Engagement
- Health Equity
- Coordinating with Community Partners
- Quality Improvement

ED Outreach and Participation

- Survey Monkey - <https://www.surveymonkey.com/r/VETNEDASSESSMENT>
- Participating EDs
 - Central Vermont Medical Center
 - Gifford Medical Center
 - Brattleboro Memorial Hospital
 - North Country Hospital
 - Mount Ascutney Hospital
- Compensation
 - \$10k per organization that submitted complete responses



Vermont ED Telepsychiatry Best Practices Assessment

Thank you for participating in this VETN ED assessment. Several people may be needed to collaborate on this activity, including clinical, IT, nursing, quality, care management, and leadership professionals. What we learn from you and others will be used to help inform the development of an online training resource that will be made available to all hospitals and EDs throughout the state.

Please note, the deadline to complete this survey is Wednesday, June 21st.

This project is supported by Grant Number 1H79FG000756-01 from SAMHSA. Its contents are solely the responsibility of the author and do not necessarily represent the official views of SAMHSA.

Next

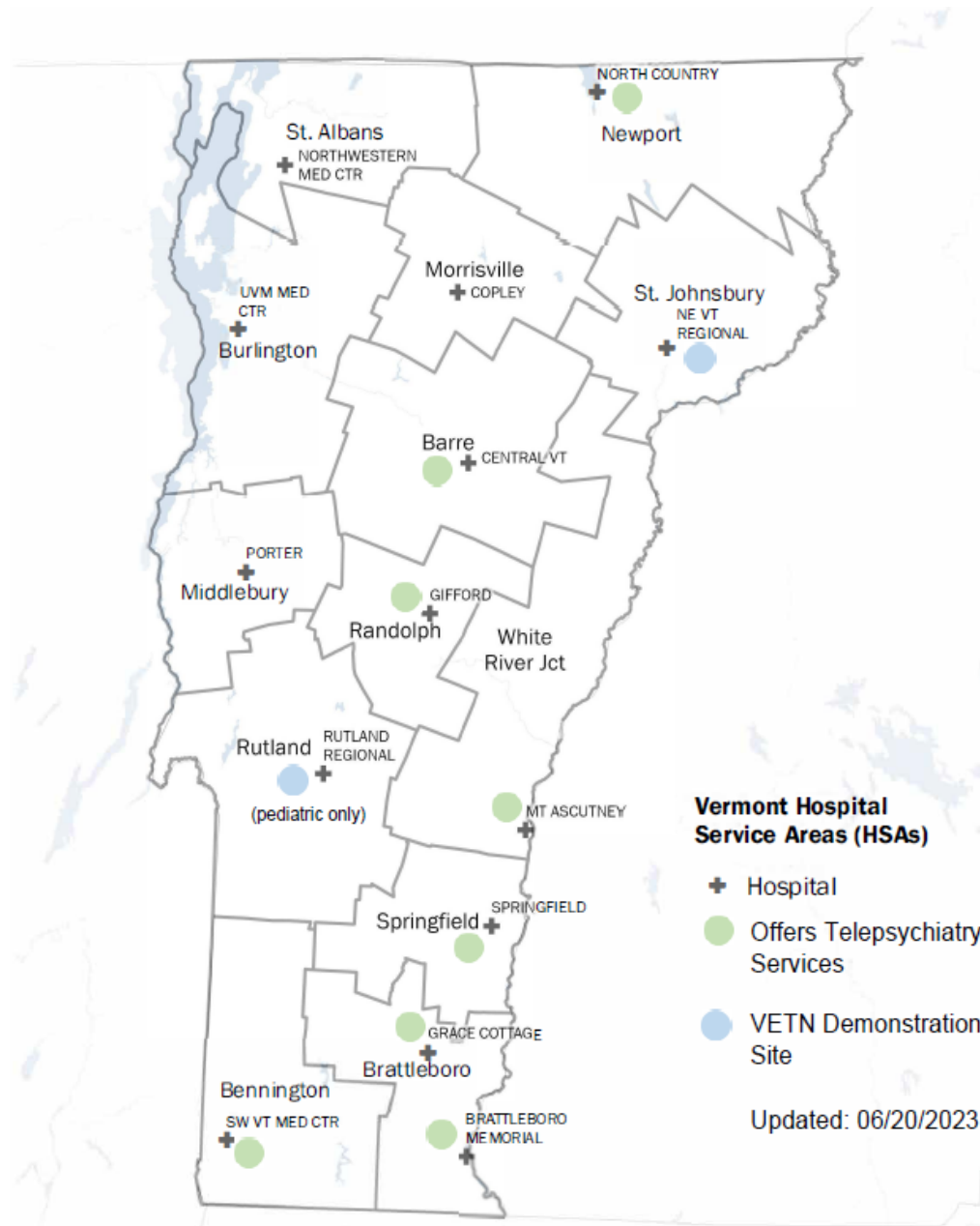
Key Takeaways

- Workflows vary:
 - Utilizing internal providers
 - Utilizing external, regional providers (*Dartmouth Hitchcock*)
 - Utilizing external, national providers (*Array*)
 - Partnering with [Sketch Effect](#) to develop video and infographic to visualize varying workflows
- Common uses for the service:
 - Patient presents with suicidal ideations.
 - Boarded patients needing medication changes.
 - Confirming or denying the need for the patient to be referred to inpatient treatment.
- Technology kept simple
 - Most (not all) EDs using iPads / laptops as opposed to telemedicine carts
- Greatest benefit = timeliness of care



Project Updates

Current Vermont ED Telepsychiatry Capacity







Program Management

Program Management

- Weekly meetings:
 - Alpine Telehealth
 - MCD Global/NETRC
 - VPQHC
- Monthly meetings:
 - VPQHC Leadership
 - VPQHC Finance
- Advisory Board survey
 - (see Evaluation section)



Training

Training

- Requested best practice from hospitals with established ED telepsychiatry services
- Scanning for available training content
- Creating web-based training

Telehealth Classroom



WELCOME TO ACHIEVING QUALITY IN TELEHEALTH: PRACTICAL RESOURCES FOR PROVIDERS

TOPICS COVERED

- OPERATIONAL BEST PRACTICES
 - Telehealth Integration
 - Patient Selection
 - Patient Engagement
 - Team-Based Care Approach
- CLINICAL BEST PRACTICES
 - Etiquette & Webisode Manner
 - Clinical Appropriateness
 - Quality Measures

INTENDED AUDIENCE

Providers who treat patients via telehealth (video and/or audio-only visits)

TIME TO COMPLETE

Approximately 60 minutes for both modules

CEU AND CME

See course descriptions for Nursing and Physician credit information

The background image shows a white ambulance parked in front of a modern building. A large red sign with the word 'RECEIVE' in white letters is visible on the right side of the image. The text 'VETN Toolkit and Training Resource' is overlaid in white on the left side of the image.

VETN Toolkit and Training Resource

BEGIN

<https://360.articulate.com/review/content/a7b3757e-960e-4a87-9391-7490f831f7f2/review>

The Sketch Effect: [Project ECHO example](#)



The Collaborative for Advancing Rural Excellence & Equity (CARE2)

NETRC

LEARN MORE



CARE2

collaborative for Advancing Rural Excellence + Equity



AVAILABLE AT NO COST

FUNDED BY HEALTH RESOURCES AND SERVICES ADMINISTRATION



RESOURCES

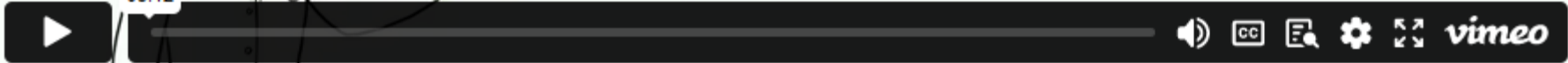


eLEARNING COURSES



RURALCARE2.ORG

03:12



Training

- Please indicate in the chat if you are interested in being part of the editorial team.



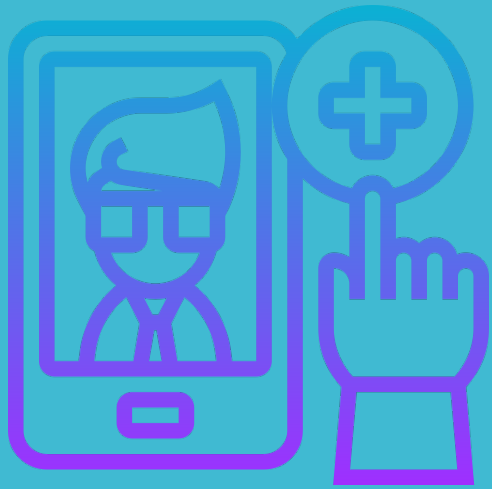
SCRIPT

Monday, August 14: *The Sketch Effect* to provide initial script

Wednesday, August 23: MCD Team to provide collected feedback of the script

Monday, August 28: *The Sketch Effect* to provide final script

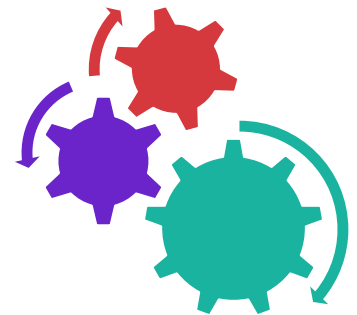
Tuesday, September 5: MCD Team to provide final script approval

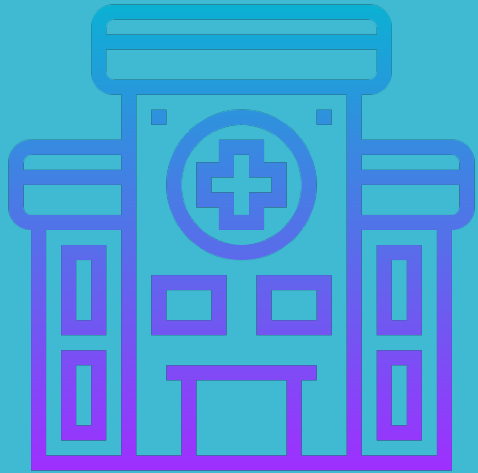


Demonstration Projects



- Continuing to work with **ARRAY** on standing up a TelePsych program.
- Credentialing and enrolling **17 providers** to provide this service.
- Coordinating ARRAY, ED, Med/Surg, and ICU units to work out the **logistics**.
- Meeting with coding, billing, and finance teams to be sure we are able to **account for these visits**.
- Working with **Information Services** team to onboard this new service.
- There are **many moving parts**.
- Anticipating a **November go-live date**.





Hospital Enhancements

[no progress to report]



Evaluation

VETN Logic Model

Short-term Outcomes

Individual [Patient/Caregiver]

- Increased knowledge and experience of ED staff supporting telepsychiatry services
- Increased patient satisfaction*
- Increased provider/staff satisfaction*

Organizational [Hospital/Systems]

- Increased telepsychiatry capacity in hospitals not participating in DP
- Increased telepsychiatry capacity in hospitals*
- Decreased number of involuntary commitments*
- Reduced transfers (or admits) to inpatient hospitalization*

State-level

- Increased # of key partners engaged on Advisory Board
- Increased communications and collaborations among key stakeholders across Vermont

** Denotes Demonstration Project (DP) hospital site*

Long-term Outcomes

Individual [Patient/Caregiver]

- Reduced readmission rates for psychiatric care

Organizational [Hospital/Systems]

- Telepsychiatry services fully integrated into all Vermont hospitals' workflows
- Telepsychiatry services available in Vermont EDs 24/7
- Reduced wait time for patients in the ED in need of psychiatry consultation*

State-level

- Availability of emergency telepsychiatry consultations in all EDs in Vermont
- Stabilized outpatient ED visits with same-day discharge*
- Increased coordination among Vermont EDs regarding telepsychiatry services
- Improved provider communication along the continuum of care after telepsychiatry consultation/ED discharge
- Stronger statewide system helping Vermont EDs provide timely psychiatric care via telehealth for individuals with mental health needs
- State or federal funding to support program sustainability and maintenance

Evaluation of Vermont Emergency Telepsychiatry Network (VETN)

Updates





Hello Nikie,

As part of the VETN Evaluation, RTI has developed a short survey to assess different aspects of the VETN Advisory Board including: membership composition; member satisfaction; and the perceived benefits and drawbacks to participating in the VETN Advisory Board. We will use survey findings to identify what is working well and what may be adapted to increase member satisfaction.

The survey should take 5-10 minutes to complete. Your responses will be kept confidential.

We ask that you please complete the following survey at your earliest convenience: [VETN Advisory Board Survey](#)

Please do not hesitate reaching out to us if you have any questions or concerns.

Thank you in advance for your participation!

VETN Advisory Board Survey

- Launched on Monday, August 7
 - 1st reminder sent Wednesday, August 9
- 11 completes (39% response rate)
- Average time to complete: 4 minutes!
- Submit by Friday, August 18
- Descriptive analysis

Hospital Staff/Provider Interviews

- 11 individuals contacted across both RRMC and NVRH
- 30-minute interviews about experiences with implementing VETN
- 4 interviews scheduled/ completed
 - 2 in process of being scheduled
- Rapid Turn-around analysis (RTA)



Photo source: Getty Images

Next Steps

- Analyze Advisory Board Survey results and qualitative interview data
- Monitor for Patient/Caregiver Survey responses; summarize findings
- Complete cost analysis (cost of VETN and cost-savings)
- Produce final deliverable suitable for funders / elected officials





Timeline



Timeline

JUN

- Request best practice
- NVRH-Array contract
- Scan for training content



AUG

- Credential CAH vendor providers
- Collect evaluation data
- Post web-based training content
- Survey Advisory Board

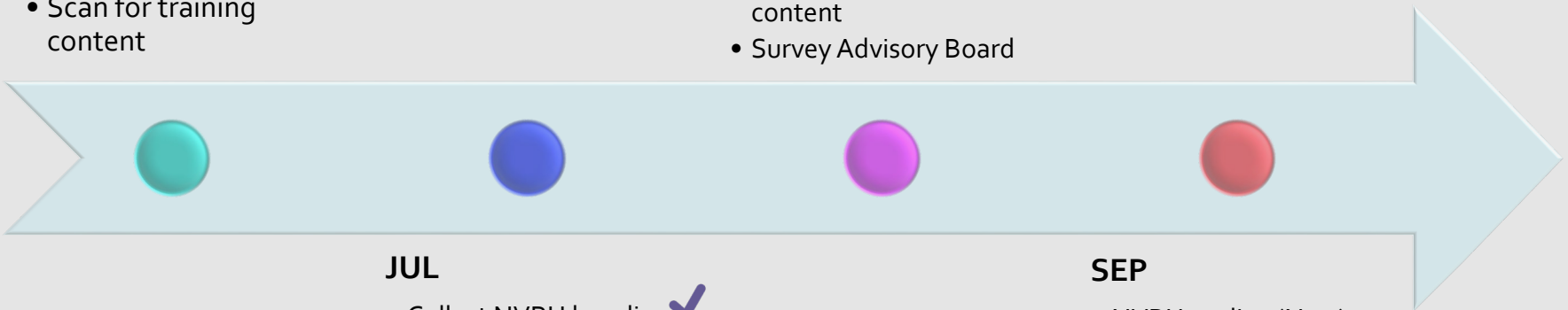
JUL

- Collect NVRH baseline data
- Create web-based training



SEP

- NVRH go-live (Nov.)
- Final Evaluation Report
- Assess equipment needs
- Order equipment





Funding

Funding

- SAMHSA no-cost extension approved through September 2024
- Reassessing current contracts that expire September 2023
 - Alpine Telehealth (SME)
 - MCD Global, NETRC (Training, T/A)
 - NVRH (Demonstration)
 - RTI International (Evaluation)
 - RRMC (Demonstration)
- Seeking private funding for Oct. 2023 – June 2024
- Plan to seek State funding July 2024 & beyond



Discussion



Wrap-Up



Upcoming Events

NETRC

- Northeast Regional Telehealth Conference
- September 18 & 19
- DoubleTree by Hilton
- Nashua, NH



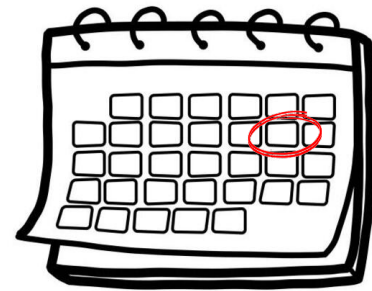
NERHA

- 2023 Fall Conference
- November 8 & 9
- Killington Grand Resort Hotel
- Killington, VT



Next Meeting

- Friday, Sept. 8
- 12:00 p.m.
- NC-STeP
- RTI Evaluation



Acknowledgement

This project is supported by Grant Number 1H79FG000756-01 from SAMHSA. Its contents are solely the responsibility of the author and do not necessarily represent the official views of SAMHSA.

Contact

Ali Johnson, MBA

Quality Improvement Specialist

Vermont Program for Quality in Health Care, Inc.

alij@vpqhc.org

(802) 262-1305

