

# VETN Advisory Board

Inaugural Meeting | January 13, 2023

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# Today's Agenda

- Keynote
- Background
- Needs Assessment
- Charter
- Next Steps

# Keynote

Emily J Hawes, LADC  
Commissioner  
Vermont Department of Mental Health





# Background

# Psychiatric Patient Boarding

- Vermonters with mental health needs are waiting days in EDs before discharge or psychiatric inpatient care admission.
- On most days, the majority of people have been waiting more than 24 hours for placement.<sup>1</sup>
- The rate of suicide-related ED visits in youth is increasing.<sup>2</sup>

<sup>1</sup> *Mental Health Boarding in VT Emergency Departments, Monday and Thursday mornings, point-in-time, from 5/24/2021 through 3/31/2022*, Vermont Association of Hospitals and Health Systems.

<sup>2</sup> *Youth Emergency Department (ED) Visits for Suicidal Ideation and Self-Directed Violence*, Vermont Department of Health, May 2021.

## Psychiatric Patient Boarding

- From October 2020 - September 2021,  
**7,875 adults** and **1,438 youth**  
waited in EDs for psychiatric  
care in Vermont.<sup>3</sup>



- This translates to **1.5% of adults** and  
**1.2% of youth**.

<sup>3</sup>[Patients Seeking Mental Health Care in Hospital Settings Report to the Legislature](#), Vermont Department of Mental Health, 2022.

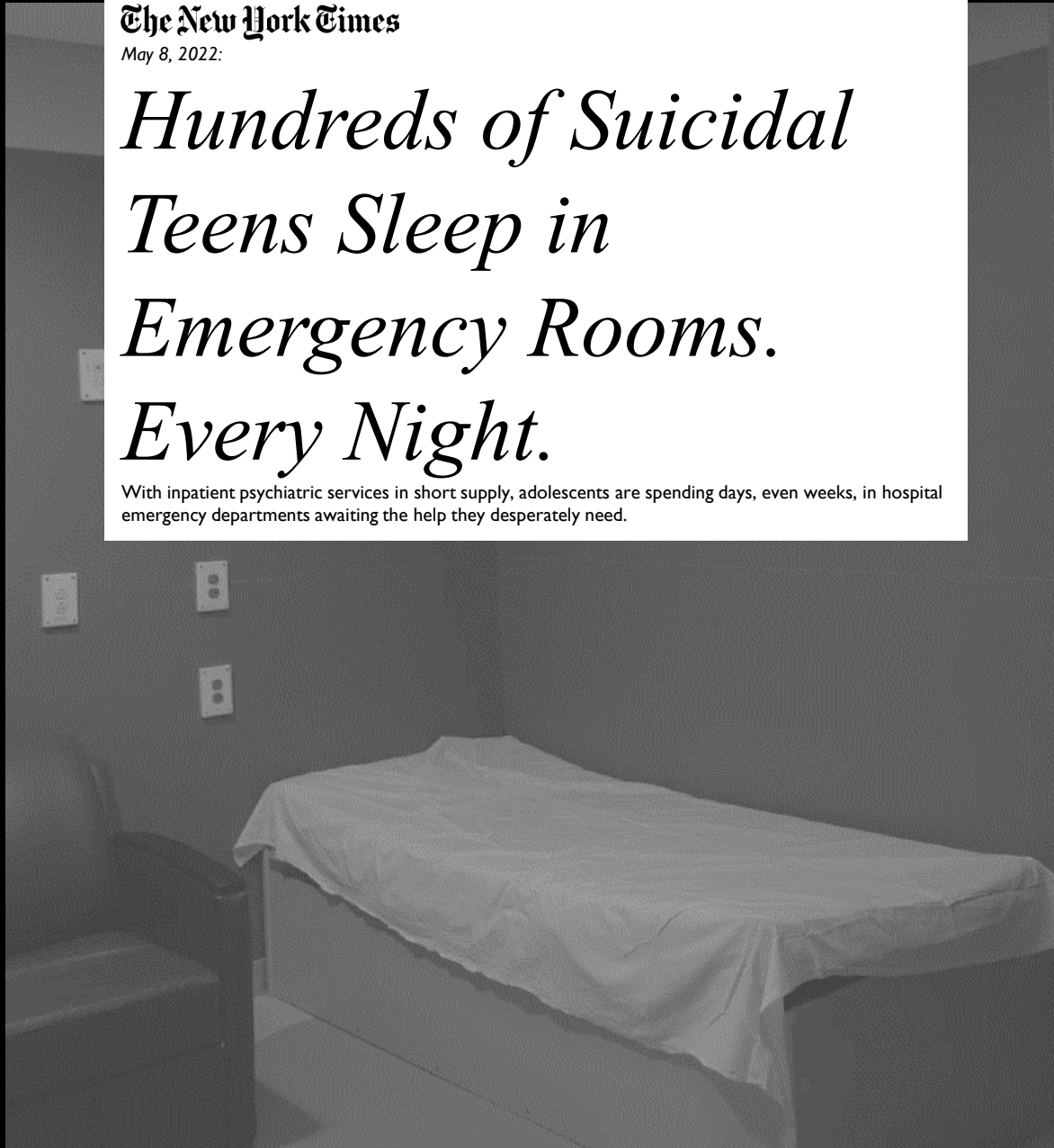
Image credit: ABC News

**The New York Times**

May 8, 2022:

*Hundreds of Suicidal  
Teens Sleep in  
Emergency Rooms.  
Every Night.*

With inpatient psychiatric services in short supply, adolescents are spending days, even weeks, in hospital emergency departments awaiting the help they desperately need.





# Needs Assessment



## Acknowledgement



This project was supported by a grant from the Mental Health & Suicide Prevention initiative of the VT COVID-19 Response Fund of the Vermont Community Foundation.

# Needs Assessment Components

- Literature Review
- National Environmental Scan
- Emergency Department Assessment
- Stakeholder Survey
- Key Informant Interviews
- Recommendations

# VERMONT EMERGENCY TELEPSYCHIATRY NETWORK

NEEDS  
ASSESSMENT

20  
22



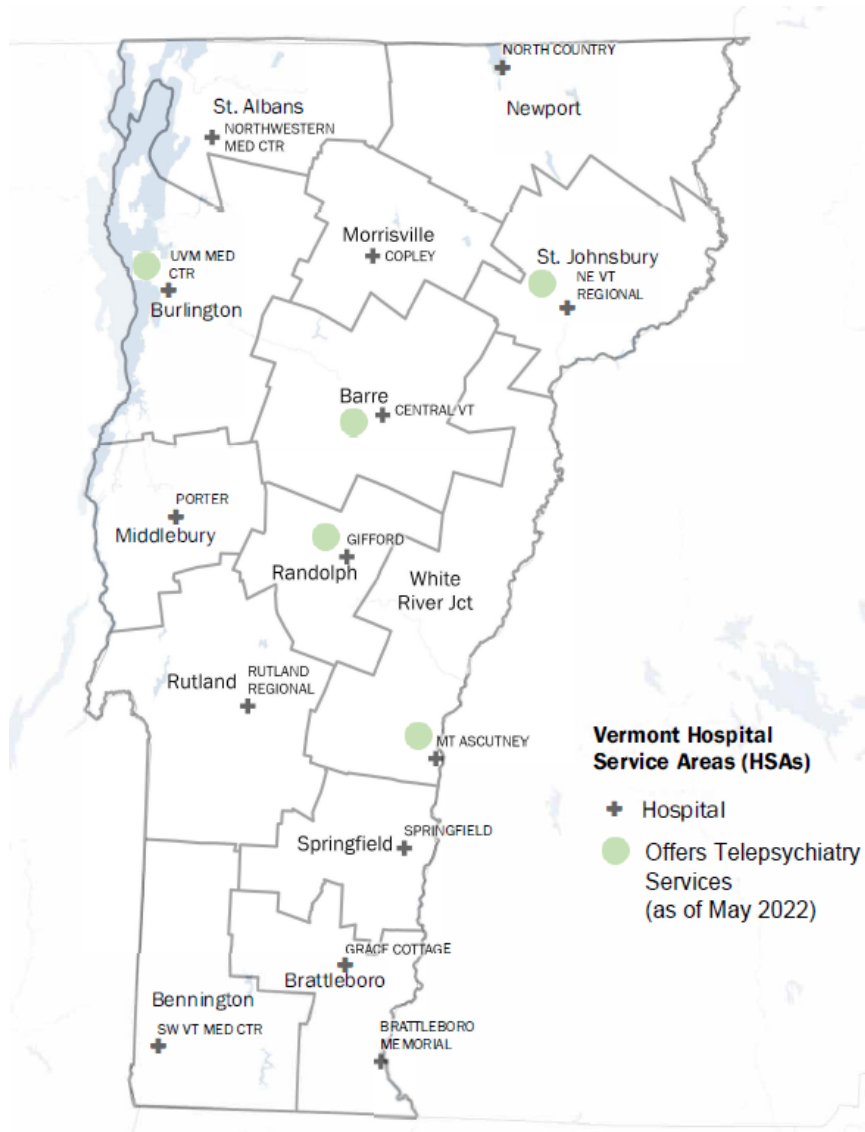
## Executive Summary (1 of 2)

- Literature shows that emergency telepsychiatry is associated with reduced lengths of stay in the ED, lower hospital admission rates, and lessened overcrowding.
- The NC Statewide Telepsychiatry Program (NC-STeP) stood out as another state's model program.
- Of 12 Vermont EDs reporting, six hospitals currently offer emergency telepsychiatry services.\*
- Hospitals identified these needs:
  - Funding
  - Equipment
  - Software
  - Staffing
  - Technical assistance

\* Gifford and NVRH discontinued their ED telepsychiatry services after completing the assessment. One hospital's location is unknown.

# Capacity

VERMONT HOSPITALS  
OFFERING EMERGENCY  
TELEPSYCHIATRY SERVICES



## Executive Summary (2 of 2)

- Reasons for an emergency telepsychiatry network include:
  - Timeliness of care
  - Workforce capacity
  - Training
  - Geographic access
  - Financial access
  - Prevention
- “Success” might be defined as improved quality of care and higher patient and provider satisfaction.
- If out-of-state telepsychiatry providers are to be used, they must have access to and knowledge of local resources to manage the care needs of patients across the continuum of care, including transitions of care.

## Recommendations



1. VETN should have five areas of focus:
  - Program Management
  - Training
  - Demonstration Projects
  - Hospital Enhancements
  - Evaluation
2. Convene an advisory board that meets regularly to discuss the program and inform decision making.
3. Take care when vetting potential emergency telepsychiatry vendors.
4. When selecting critical access hospital (CAH) pilot site, consider a hospital that already has a strong relationship with the local mental health resources.
5. An independent organization should perform program and economic evaluation.
6. Determine how the VETN will complement other existing services offered in Vermont EDs, such as peer support services and services provided by the Designated Agencies.

## Recommendation 2

CONVENE AN ADVISORY  
BOARD THAT MEETS  
REGULARLY TO DISCUSS  
THE PROGRAM & INFORM  
DECISION MAKING

- Invite stakeholders periodically to share best practices.
- Build relationships at the academic and state levels – taken from the successful models out of North Carolina and South Carolina.
- Ensure the VETN is patient-centered and formed from a patient-centered design approach.



# The Full Report

... may be accessed on the [VETN webpage](#).

## Vermont Emergency Telepsychiatry Network

### VERMONT EMERGENCY TELEPSYCHIATRY NETWORK (VETN)

### VERMONT EMERGENCY TELEPSYCHIATRY NETWORK (VETN)

A statewide system helping Vermont emergency departments provide timely psychiatric care via telehealth for individuals with mental health needs.

#### VETN Advisory Board Membership

December 2022 Needs Assessment Report 

Appendix 1. Annotated Bibliography

Appendix 2. Organizational Assessment Instrument

Appendix 3. Stakeholder Survey Instrument

Appendix 4. Key Informant Interview Guide

November 2022 Presentation

September 2022 Press Release

Contact [Ali Johnson](#), project lead, for more information.



# VETN

Vermont Emergency Telepsychiatry Network

## Acknowledgements

Congressionally Directed Spending grant from Senator Patrick Leahy (D-Vt.)



image credit: [www.leahy.senate.gov](http://www.leahy.senate.gov)

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“

I have been proud to support the Vermont Program for Quality in Health Care’s funding to assist Vermonters suffering from mental health crises to **access timely psychiatric assessment** via telehealth. The negative impact the COVID pandemic has had on the mental health of our youth and our most vulnerable populations is staggering. This program will work to provide a creative solution by **creating a network of care** that is timely, efficient and effective. All of this effort will ultimately lead to **better outcomes** for Vermonters who are struggling with **mental illness**. The Substance Abuse and Mental Health Services Administration funding will allow for expedited crisis stabilization and a better quality of healthcare for all Vermonters.

”

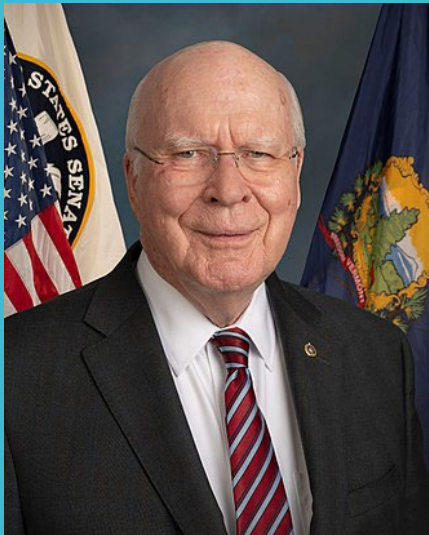


image credit: [en.wikipedia.org](https://en.wikipedia.org)



# Draft Charter



A scroll with a list of items. The scroll is unrolled, showing a list of items in the center. The scroll is held by two wooden rollers on the left and right sides. The background is a light blue gradient.

## Draft Charter

Vision

Purpose

Business Case

Project Scope

Schedule

Advisory Board Membership

Resources

## Vision (Draft)



Vermonters with mental health needs receive the highest quality of coordinated services along the continuum of care.

image credit: [www.nami.org](http://www.nami.org)



Purpose  
(Draft)

Vermont Emergency  
Telepsychiatry  
Network

**VETN**



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

# Business Case (Draft)

- Vermont EDs currently lack capacity to fully care for patients presenting with mental health crises.
- Emergency telepsychiatry provides timely care in the right place, at the right time, in the right amount for people boarding in emergency departments awaiting mental health services.
- Benefit to Stakeholders:
  - Improved patient clinical outcomes
  - Reduced cost
  - Improved patient satisfaction
  - Improved provider satisfaction and support

# Strategic Goals

“Establish a statewide telepsychiatry program in emergency departments.”<sup>4</sup>

## Health Care Workforce Development Strategic Plan

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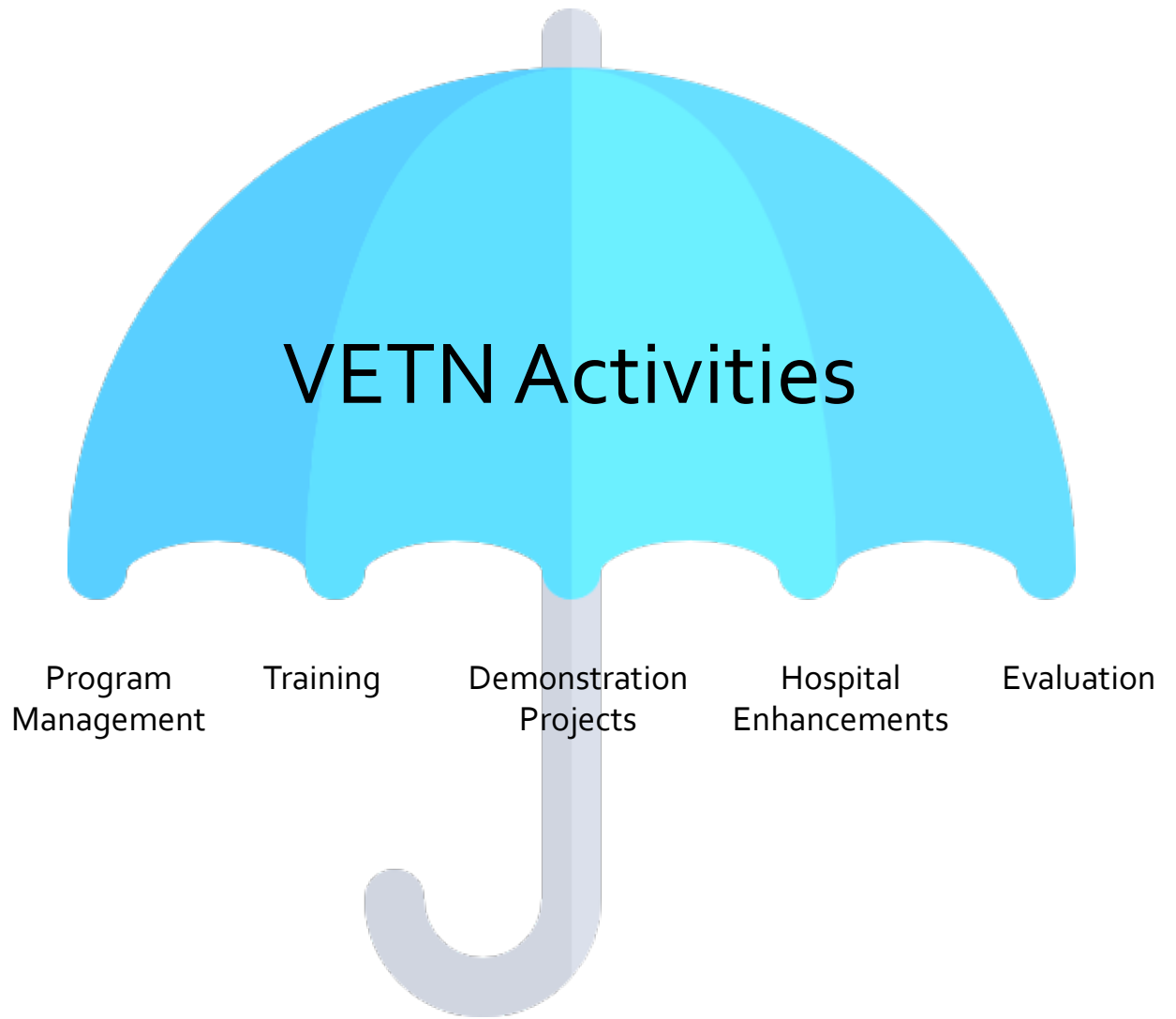
SUBMITTED BY THE DIRECTOR OF HEALTH CARE REFORM IN THE AGENCY OF HUMAN SERVICES IN CONSULTATION WITH THE HEALTH CARE WORKFORCE STRATEGIC PLAN ADVISORY GROUP



SUBMITTED TO THE GREEN MOUNTAIN CARE BOARD ON OCTOBER 15, 2021

<sup>4</sup> *Health Care Workforce Development Strategic Plan*, Submitted to the Green Mountain Care Board by the Director of Health Care Reform in the Agency of Human Services in consultation with the Health Care Workforce Strategic Plan Advisory Group, October 2021.

# Project Scope



# Program Management



- Advisory Board
- Clinical SME
- VPOHC Project Lead
- NETRC

# Training



- Web-based (statewide):
  - evidence for telehealth
  - best practices
  - billing & reimbursement
  - interpretation services
  - serving people with disabilities
- Demonstration projects:
  - establishing new systems to embed in workflow

# Best Practice Sharing

## Eligibility

Hospitals that responded to the May 2022 survey and indicated they currently offer emergency telepsychiatry service.

## Incentive

\$10,000 for sharing workflows and best practice.

## Next Steps

- Develop plan for customizing in-person training content for CAH demonstration site.
- Determine status of Gifford and NVRH.
- Invite hospitals to participate.

## Demonstration Projects



- Mid-Sized Hospital (RRMC):
  - Establish a system for child telepsychiatry from a regional specialty mental health treatment center.
- Critical Access Hospital:
  - Establish a system for telepsychiatry services in the ED.



# VETN in the News

The screenshot shows the NBC 5 website interface. At the top, there is a navigation bar with the NBC 5 logo, a menu icon, and weather information (34°). Below the navigation bar, a red banner indicates "CLOSINGS There are currently 3 active closings or delays". The main content area features a "RECOMMENDED" section with five video thumbnails and their descriptions:

- VIDEO: Family dog dies after saving 15-year-old girl from house fire
- Video: Ohio DUI suspect does backflip to try to prove sobriety
- After nearly four years, dog found in Peru, New York to be returned to family in Florida
- International Sailing Center forced to leave Malletts Bay after 35 years
- A green comet will appear in the night sky for the first time in 50,000 years

The main article is titled "Rutland Regional Medical Center and Brattleboro Retreat partner on child mental health initiative". The sub-headline reads: "Two area healthcare providers are partnering to offer better mental health services to patients." The article is updated at 9:32 AM EST Dec 27, 2022, and includes social sharing options for Facebook, Twitter, and a link icon. The reporter is identified as John Hawks. A video player is embedded in the article, showing a brick wall with the Rutland Regional Medical Center logo and name. The video player has a play button and a "FILE" label. An NBC 5 logo is visible in the bottom right corner of the video player.

The full story may be found on [NBC5's website](#).

# CAH Readiness Assessment

## Eligibility

Hospitals that responded to the May 2022 survey and indicated their interest in beginning to offer emergency telepsychiatry service.

## Incentive

\$10,000 for completing readiness assessment.

## Next Steps

- Determine status of Gifford and NVRH.
- Finalize tool.
- Invite hospitals to participate.

# Request for Information



<http://www.vermontbusinessregistry.com/>

- Assist CAH demonstration site in vetting and selecting a telepsychiatry vendor.
- Develop RFI and facilitate review process.
- Coordinate an advisory group to inform selection.
- Conduct key informant interviews for vendor selection criteria.
- Score at least five potential vendors.

# Hospital Enhancements



## Congressionally Directed Spending

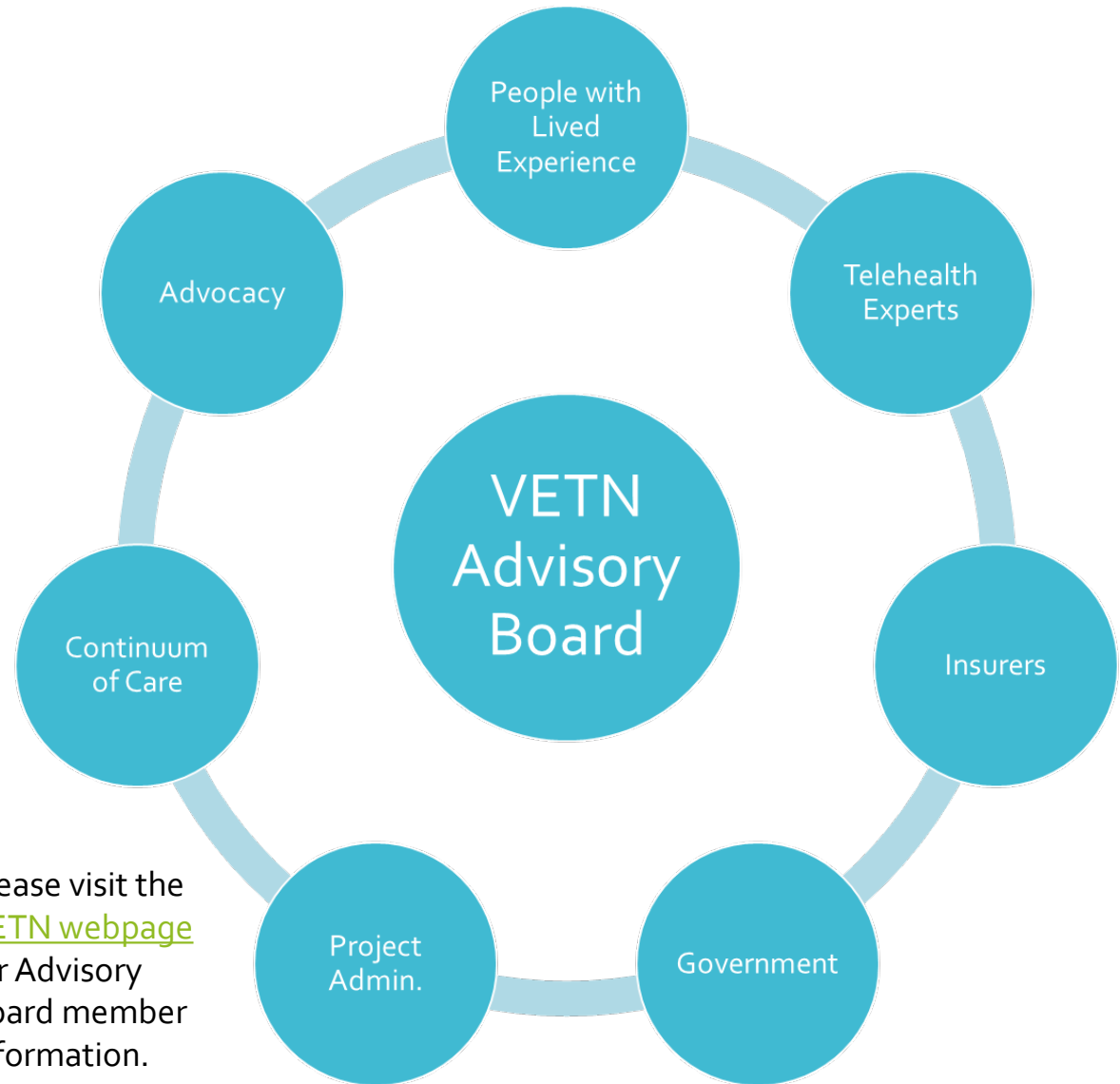
- Telehealth equipment
- Language services
- Adaptive equipment

# Evaluation



- Patient and provider satisfaction
- Programmatic impact
- Cost accounting
- Cost savings

# Advisory Board Membership



Please visit the [VETN webpage](#) for Advisory Board member information.



# Next Steps



## Advisory Board Member Role

- Establish consensus around charter and guiding documents.
- Ensure the activities connect to the vision.
- Define the scope of the network.
- Decide how to staff the network.
- Identify ways to sustain funding.
- Help resolve any barriers encountered.
- Contribute to evaluation activities.
- Champion this work. Disseminate information.
- Ensure activities are coordinated with and enhance other initiatives around the state.
- Advise VPQHC. Provide subject matter expertise.



# Timeline (1 of 2)

## DEC

- Draft charter
- Assess CAH readiness
- Collect baseline data
- Plan RRMC demonstration project

## FEB

- Request best practice
- Create web-based training
- Convene Evaluation Committee
- Identify evaluation questions

## APR

- Order equipment
- Credential CAH vendor

## JAN

- RRMC go-live
- Convene Advisory Board
- Request best practice
- Scan for training content
- Select CAH for demonstration project
- Vet vendors

## MAR

- Create web-based training
- Contract CAH vendor
- Order equipment

# Timeline (2 of 2)

## MAY

- Post web-based training content
- Collect CAH baseline data

## JUL

- CAH go-live

## SEP

- Final Evaluation Report
- Wrap-up

## JUN

- Survey Advisory Board
- Provide in-person training
- Reimburse for equipment

## AUG

- Collect evaluation data

# Feedback



# Contact

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