



VIRTUAL  
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HIV CARE & TREATMENT

# Innovative, Integrated Care: Two Unique Deliveries of Telepsychiatry Services

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# Learning Objectives

1. Define telepsychiatry and identify key components
2. Learn the effectiveness of telepsychiatry use with people living with HIV
3. Identify two distinct models for providing telepsychiatry

## VIVENT HEALTH HIV MEDICAL HOME

Vivent Health’s Medical Home Model integrates vital HIV care and treatment services with comprehensive social services to improve patient health outcomes.

Vivent Health operates our integrated care model in four states at this time: Colorado, Missouri, Texas, and Wisconsin.

**MEDICAL**

**BEHAVIORAL HEALTH**

**PHARMACY**

**DENTAL**



**LEGAL**

**CASE MANAGEMENT**

**HOUSING**

**FOOD**

# What is Telehealth?

**Telehealth is the use of technology to remotely deliver health services to patients**

- Consultations
- Health assessments
- Diagnosis
- Treatment



# Telehealth Quality of Care

Studies demonstrate that telehealth quality is equivalent to face-to face for:

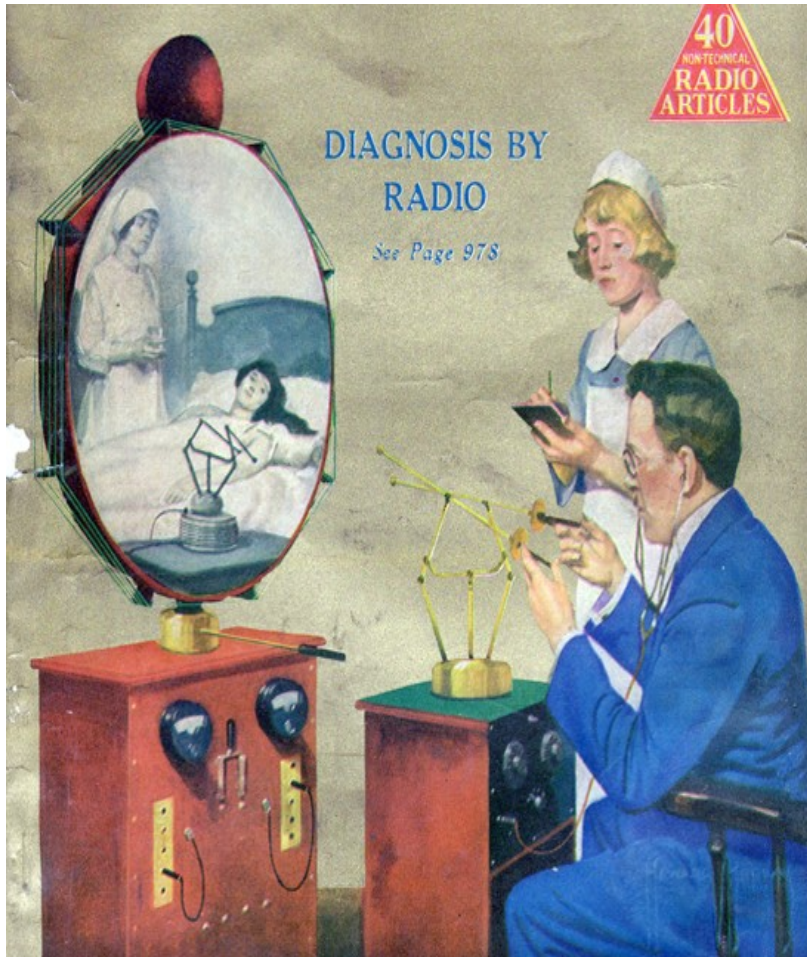
- Assessment
- Diagnoses
- Therapeutic alliance
- Treatment adherence
- Clinical outcomes



# How Did We Get Here?



# Telehealth was Predicted in 1924!



## Current Methods:

- Real-time Techniques
- Store and Forward
- Remote Monitoring

## Current Applications:

- Two-way video
- Email
- Smart phones
- Wireless tools





# Telehealth Services



# Telehealth Services at Vivent Health



Vivent Health, an organization on the cutting-edge, explored ways of expanding services and increasing access to areas of service where provider shortages have been identified.

Access to psychiatry services is a known area of provider shortage. An area of great need.

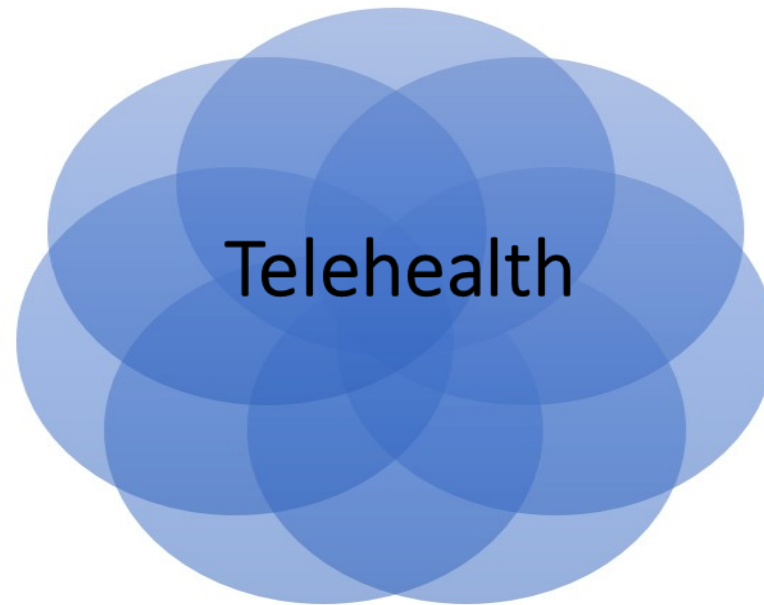
Examined ways to create more provider efficiency and greater patient access.



# General Benefits of Such an Approach



**Organization is saving time and money by reducing provider travel**



**Service Expansion**

**Patient is Saving Time and Money on Transportation**

**Increased Patient Access**

# Benefits of Telemedicine/Telehealth



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- **Increased access** to healthcare services
- Enhanced **access to specialists**
- **Improved quality** of care
- **Reduced hospitalizations/ER** visits
- **Cost-effective** method of service delivery
- Patient and provider **satisfaction**

# Telehealth Team



- Organizational Leadership
- Psychiatric Prescribers
- Patient Presenters/Escorts
  - Registered Nurses
  - Psychotherapists
  - Case Managers
- Reception Staff
- IT Support Team
- Administrative Support/Oversight

# Wisconsin Footprint



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## Psychiatry Services prior to Telehealth:

- All In Person
- Provider Travel
- Patient Travel
- Reduced or No Access to Psychiatric Services
- Cost and Time

# Wisconsin Footprint



- Telepsychiatry started in 2017
- Vivent Health operates psychiatry services in 6 locations in WI.
- Some of these locations are provider shortage areas where recruitment is difficult.
- 2 psychiatric providers (hired by Vivent Health and based in Milwaukee, WI) provide services to all 6 locations.
- Patient comes to one of the Vivent Health locations and is set up for services in a special telehealth room, equipped with telehealth equipment.



## Provider Reflection:

*“This service has been very well received by our clientele. They express their gratitude for this convenience. As we have clinics throughout WI, patients can get their needs met without having to take the long ride to our Milwaukee office. Our sites are in compliance with HIPAA standards as well as provide the feeling and reality of safety for our patients.”*

*Margaret Frittitta*

*Psychiatric Nurse Prescriber*

# Colorado Footprint



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## The Need:

- Provider's Observations of unmet psychiatric needs for patients
- Logistical limitations to on-site provision of care
- Limited access to psychiatric services in Denver
  - Colorado ranks 16<sup>th</sup> for availability of services
  - 47<sup>th</sup> for access to care in treating adults with mental illness (MHA, 2017)
  - 31.39% of mental health needs met in the state of Colorado (KFF, 2019)
    - *Mental Health America. 2017 State of Mental Health in America- Access to Care Data*
    - *Kaiser Family Foundation (2019). Mental Health Care Health Professional Shortage Areas (HPSAs).*

## Research and Planning:

- Colorado Telehealth Practice Standards pre-COVID-19
  - Doctor-Patient Relationship
  - Prescribing via Telehealth
  - Informed Consent
  - Delivery of Service
  - Modality of Communication
- Establishing protocols
- Technology
- Patient selection
- Referral process

# Relationship Development



- UCHHealth Infectious Disease Group Practice (IDGP):
  - Established in 1989
  - Operates as a Medical Home for over 1900 people living with HIV
  - Over 1300 PLHIV cared for in collaborative clinics (including Vivent)
  - Integrated mental health services providing care for 23.5% of IDGP patients (2019-2020)
- Shared providers: existing working relationship between medicine and psychiatry
- Identifying most appropriate model for integration

# Multimodal approach



## Direct Patient Care

- Shared care of patient between PCP and psychiatry
- Limited by logistics/time
- Consider complexity
- Avoid splitting/pitfalls

## Asynchronous Consult Model

- Maintains PCP-patient relationship
- Expands access despite logistical barriers
- Better for lower complexity patients

## Delivery of Services:

- Scheduling/Time
- Frequency
- Telehealth Room Set Up
- Patient Escort Role
- Provider Consultation Services
- Care Coordination



# Therapeutic Alliance

Due to high satisfaction by providers and increased access for patients, the opportunity exists for long-term provider/patient relationship, increasing therapeutic alliance and improving patient outcomes.





# Tips for Rapport



- Plan ahead
- Practice makes perfect
- Acknowledge the awkward
- Set expectations
- Professional presence
- Engagement
- Plan for failure

Lopez, A., Schwenk, S., Schneck, C., Griffin, R., Mishkind, M. (2019). Technology-based mental health treatment and the impact on the therapeutic alliance. *Current Psychiatry Reports*. 21:76. <https://doi.org/10.1007/s11920-019-1055-7>

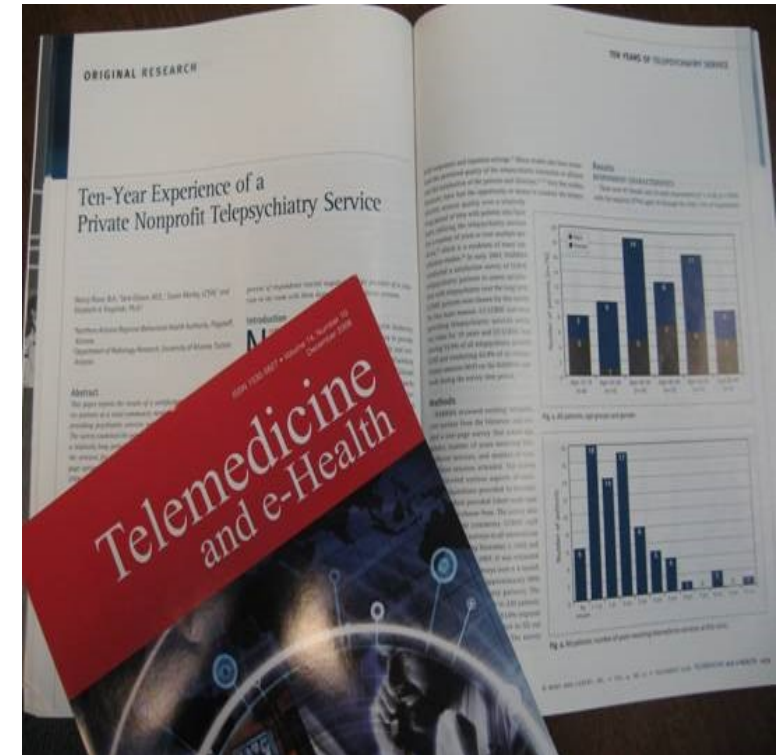
# Patient Satisfaction



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24+ patient satisfaction studies reviewed in literature;  
all overwhelmingly positive

- Client satisfaction surveys
- Family (of client) satisfaction surveys
- Staff satisfaction surveys
- Satisfaction over time

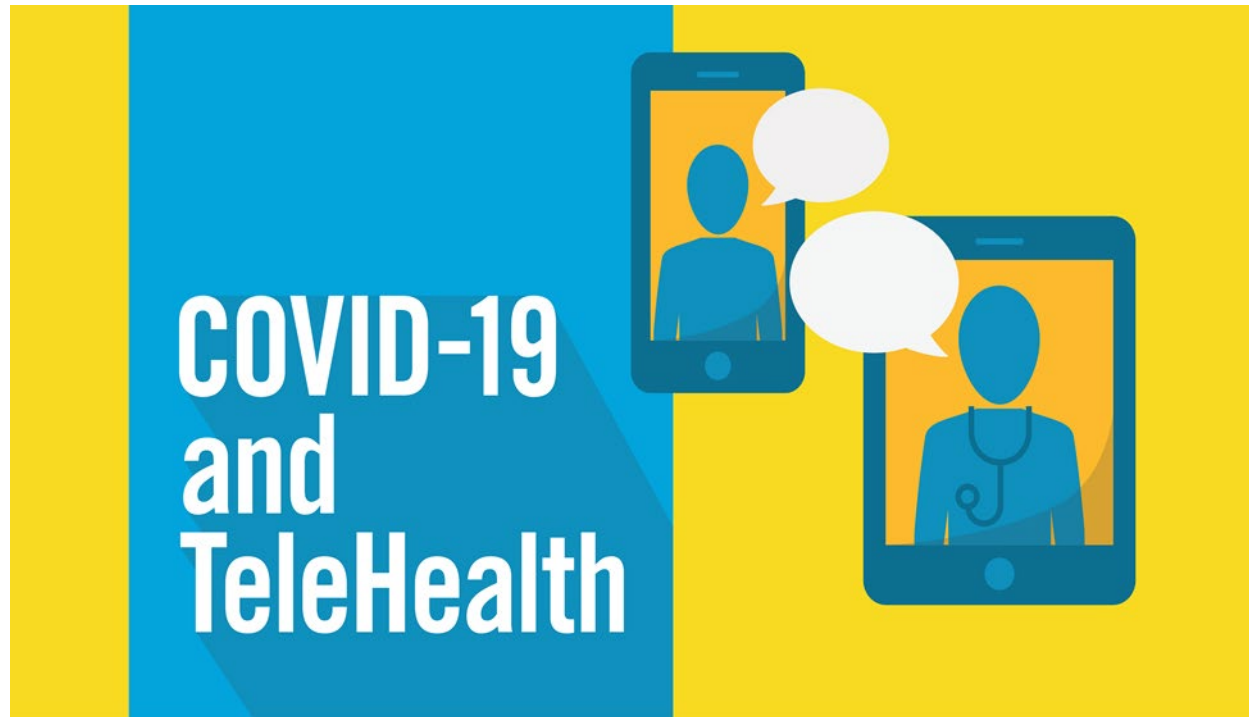


# What worked? What didn't work?

- Patient Feedback
- Provider Feedback
- Frequency Limitations
- Protocol Flow
- Identified changes



# Pivoting During COVID-19



# Pivoting During COVID-19



- Discontinued in person visits (office to office). Providers worked remotely so standard in office telehealth visits were placed on hold.
- Explored other telehealth modalities (home to office vs home to home, telephone session vs virtual session).
- Leveraged technology through our electronic health record to offer patients virtual visits (i.e., provider and patient connecting from their respective homes for video-based services).

# Pivoting During COVID-19



- Maintained HIPAA compliance and with federal legislation through the CARES Act, was able to obtain reimbursement for services.
- Services continued at the same level for existing patients.

# Pivoting During COVID-19



## Challenges:

- Informed Consent Delivery
- Patients w/o virtual access
- Hybrid Model

# Thinking About Implementing Telehealth?



- **Conduct a needs assessment prior to initiating services**
  - Program overview statement
  - Services to be delivered
  - Proposed patient population
  - Provider resources
  - Technology needs
  - Staffing needs/training
  - Quality and safety protocols
  - Business and regulatory processes
  - Space requirements
  - Sustainability



# Thinking About Implementing Telehealth?



- **Consider legal and regulatory issues**
  - Licensure and Malpractice
  - Scope of Practice
  - Prescribing
  - Informed Consent
  - Billing and Reimbursement (originating and distant sites)

# Thinking About Implementing Telehealth?



- **Develop Standard Operating Procedures**
  - Define roles and responsibilities
  - Plan to assure staff have the appropriate licensure and training
  - Implementation workflow
  - Systematic quality improvement and performance management process to ensure compliance

# Thinking About Implementing Telehealth?



- **Technological Considerations**

- Select video conferencing applications that have appropriate verification, confidentiality, and security parameters necessary- HIPAA compliant
- Adequate bandwidth and sufficient resolutions to ensure high quality image and audio
- Have a back up plan in case of equipment malfunction
- Physical location should be set up to maximize quality of image and sound transmission will ensuring privacy and confidentiality
- Train staff on use of equipment

# Thinking About Implementing Telehealth?



- **Clinical Considerations**

- Patient selection (no absolute contraindications)
- Patients have the right to decline care via telehealth service
- Have a plan for crisis management
- Plan for record keeping (forms that require patients' signature)
- Role of support staff (patient escort (presenter), medical records, patient service representatives)
- Prescription management
- Plan for Technological Interruptions

# Thinking About Implementing Telehealth?



- **Privacy and Confidentiality Considerations**
  - Must ensure that all privacy, confidentiality, HIPPA, and CFR-42 regulations govern the maintenance, release, retention, and disposition of patient records are maintained in compliance with State and Federal regulations.

# Thinking About Implementing Telehealth?



- **Privacy and Confidentiality Considerations (Cont'd)**
  - Provider room door is closed whenever a patient can be seen or heard on monitor
  - Session in progress signs on doors during clinical sessions
  - White noise machine turned on during sessions
  - Clinical video equipment password-protected
  - Clinical video equipment turned off or camera lens covered when not in use
  - All present in room must be approved by patient

# Conclusion and Summary



- The use of advanced technology to deliver healthcare at a distance has the potential to be one of the defining medical revolutions of the 21st century. With healthcare and provider shortages, the use of telehealth can be one of the answers for increasing access and, at the same time, decreasing the cost of psychiatric care delivery while maintaining high quality care.
- Vivent Health values the importance of an integrated care model and the implementation of telehealth allow us to extend services to patients who otherwise would not have access to this service to meet their care needs.



# Questions/Comments?

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