

Delivering telepsychiatric services to homebound older adults in LA county through multidisciplinary teams

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LAC DMH

(Los Angeles County Department of Mental Health)



- Largest county-operated mental health department in the United States
 - 2014 population estimate 10,116,705 (census)
- Over 88 cities
- Approximately 1,000 providers serve on average 250,000 individuals annually
- “Enriching lives through partnership designated to strengthen the community’s capacity to support recovery and resiliency is our Mission”



Diversity of LAC DMH

Demographics

52.4% white

28% non-Hispanic

48% Hispanic

13.7% Asian

0.7% African American

0.3% Native Americans

21.8% Pacific Islander

Threshold languages

- Arabic
- Armenian
- Cambodian
- Chinese
- English
- Farsi
- Korean
- Russian
- Spanish
- Tagalog
- Vietnamese



GENESIS

- **G**eriatric
 - **E**valuation
 - **N**etworks
 - **E**ncompassing
 - **S**ervices
 - **I**ntervention
 - **S**upport Programs

- Home-based program
- Older adults ages 60 years +
- Suffering from serious and persistent mental illness
- Cannot or will not participate in traditional mental health services
- Sources of referral include APS, self-referral, family members/friends, PCP, other physicians
- Outcomes of consultation
 - medication management
 - medical declaration of capacity
 - consultation-liaison work with PCP's
 - individual psychotherapy
 - linkage to community resources
- MHPA (Mental Health Services Act) Proposition 63 passed in 11/2004 to improve the delivery of mental health services and treatment across California

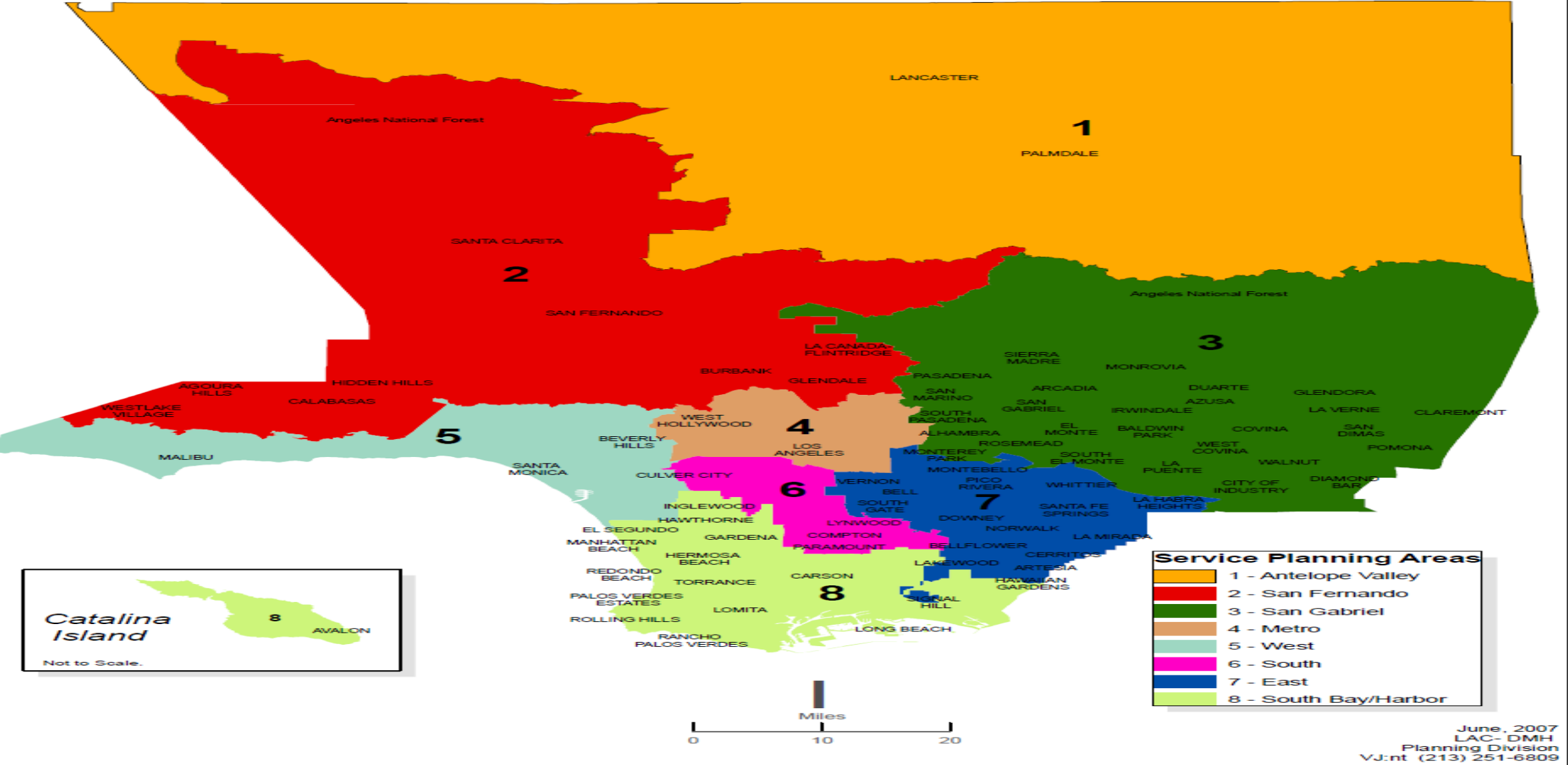
Benefits of Geri-psychiatry Home Visit

- Low no show rate
- First hand knowledge of home environment
- evaluation of polypharmacy, poor compliance, drug-drug interactions, hoarding for OD
- removes stigma of attending a psychiatrist clinic

The multidisciplinary Team

- Social Workers, social work interns
- Registered nurses
- Case managers
- Psychiatrist, psychiatric residents & geriatric psychiatry fellows
- Geriatrician, geriatric medicine fellow

Service Areas of Los Angeles County



LAC-DMH adopts telepsychiatry

- 2008, Board of Supervisors Michael Antonovich revealed a lack of psychiatrists in Service area 1
 - solution was telepsychiatry
- 2013 Telepsychiatry expanded to the GENESIS older adult program to also better serve older adults in Service area 1 & maximize the ability to provide geriatric psychiatry services across LA county
- Maximize efficiency of 1 part-time psychiatrist & 1 part-time geriatric psychiatry fellow

Definition

Telehealth:

- the use of electronic information and telecommunications technologies to support long-distance clinical health care, patient and professional health-related education, public health and health administration

History of telehealth

- **1961 Two way Television Group Therapy in University of Nebraska Psychiatric Institute and Norflock state hospital**
- 2003 VHA adopts telehealth option of providing care to veterans
- **2008 LA county Department of mental health adopts telehealth for service area 1**

Telepsychiatry Equipment

- Headquarters Base station
 - high definition 24-inch screen with camera, microphone and speaker
 - data transmission rates vary from 384Kbps-2MBps
- In field equipment
 - Cisco jabber software
 - Built in microphone and speaker to laptop
 - Air card to access internet
 - Data rate in the field 384 Kbps

Telepsychiatry consultation at GENESIS

Request made by primary GENESIS team, who indicates if telepsychiatry is appropriate



Urgency of consultation is considered



Geographic location and feasibility of providing evaluation in timely manner is considered



Test run to see if internet connection works in patient's home
Then
Patient is seen



Patient provides consent for telepsychiatry

1/7/2016 SSG Ven9

REFERRAL: Dr. Gelberd Dr. Taya GP Fellow Fellow GM Other

Presented at Case Consultation Yes No

DATE / / 2016 REFERRAL TEAM: Contact #

NAME AGE IS#

General Location:

Has PMD: Y N Has Psychiatrist: Y N

Past Med Records been requested: Y N Received: Y N Reviewed Y N

Reason for Referral Eval:
(check one) Declaration Medical Capacity
 HV Case Consult / Diagnostic
 HV Single visit HV Ongoing
 Medication (patient agrees to meds)
 Phone Consult with other MD
 Telepsych Single Visit Ongoing
 other:

Uninsured Medi-cal Medicare Part D PEI

Probably would agree to a visit with a 3rd person: Y N
Would they need introduction by referral team? Y N

LANGUAGE SPOKEN: English Spanish Other
REFERRED to GENESIS by: APS Other

DIAGNOSIS: AXIS I
 AXIS II
 AXIS III

MMSE: / 30 Recall: / 3 GDS: / 15 CLOCK: Normal Impaired MOCA: / 30

ADL/IADL Impairments/Safety

Pertinent Information & Reason for Consult:

REFERRAL: _____ Dr. Gelberd _____ Dr. Taya _____ GP Fellow _____ Fellow GM _____ Other

Presented at Case Consultation _____ Yes _____ No

DATE _____ / _____ /16 REFERRAL TEAM: _____ Contact # _____

NAME _____ AGE _____ IS# _____

General Location: _____

Has PMD: _____ Y _____ N Has Psychiatrist: _____ Y _____ N

Past Med Records been requested: _____ Y _____ N Received: _____ Y _____ N Reviewed _____ Y _____ N

Reason for Referral Eval:
(check one)

- _____ Declaration Medical Capacity
- _____ HV Case Consult / Diagnostic
- _____ HV Single visit _____ HV Ongoing
- _____ Medication (patient agrees to meds)
- _____ Phone Consult with other MD
- _____ Telepsych _____ Single Visit _____ Ongoing
- other _____

_____ Uninsured _____ Medi-cal _____ Medicare Part D _____ PEI

Probably would agree to a visit with a 3rd person: _____ Y _____ N
Would they need introduction by referral team? _____ Y _____ N

LANGUAGE SPOKEN: _____ English _____ Spanish Other _____
REFERRED to GENESIS by: _____ APS Other _____

DIAGNOSIS: AXIS I _____
AXIX II _____
AXIS III _____

MMSE: _____ /30 Recall: _____ /3 GDS: _____ /15 CLOCK: _____ Normal _____ Impaired MOCA: _____ /30

ADL/IADL Impairments/Safety _____

Pertinent Information & Reason for Consult:

Benefits of telepsychiatry

Clients	Orangization (DMH)	Providers
Better access to care	More efficiency	Diversify panel
More frequent follow up	Work force development	Flexibility in location
Less travel time	Greater productivity	Reduced burn out

Benefits of telepsychiatry services

Greater patient satisfaction

94% satisfaction for general TMH services (VHA)

88% satisfaction for Home Based TMH (VHA)

- Decrease in adverse drug events
- Improved adherence
- Reduced hospitalizations
- Reduced ER visits
- Reduced carbon foot print

Challenging examples with telepsychiatry

- Refusal to engage in tele-psychiatric services
 - Offering hybrid of telepsychiatry & in-person visits
- Visual & hearing impairments add additional barrier
 - Utilizing in-person worker can help
- Paranoid delusions about technology
 - Delay using telepsychiatry until psychosis is treated, then ability to tolerate telepsychiatry services can reflect symptomatic improvement

Limitations to telepsychiatry services

- Older adults sometimes have less familiarity with technology
- Less confidentiality with another person present during the examination
- Loses some of the contextual information from home visit
- Air card inoperable in certain areas of Los Angeles county
- Medicare does NOT reimburse for telepsychiatry if patient is located in their home

GENESIS Telepsychiatry Descriptive Statistics

5/2014-12/2015

N=85 visits	23 unique patients
Age mean (SD)	69 years (4.5)
Sex	80% female
Spanish speaking	45%
MMSE mean (SD)	25.4 (3.2)
GDS mean (SD)	9.2 (3.6)
Education	10.7 years (3.8)
Most common dx MDD	70%

Psychiatric diagnoses: Diagnosis: MDD, Bipolar, Schizophrenia, panic d/o, etoh use d/o, cocaine use d/o, tobacco use d/o, bereavement, GAD, borderline personality d/o, bulimia, PTSD

Medical diagnoses: epilepsy, TBI, osteoarthritis, anemia, hyperlipidemia, pneumonia, HTN, DM2, syphilis, subarachnoid hemorrhage, tendonitis, overactive bladder, low back pain, GERD, BPH, fibromyalgia, stress urinary incontinence, sjogrens disease, psoriasis, BRCA, obesity, hyponatremia, glaucoma, anteriorlisthesis, UGIB, thyroid cancer, hypothyroidism, vitamin B12 deficiency, Pulmonary embolism, osteoporosis, gastritis, UTI, gout, ovarian cancer, melanoma, varicose veins, RA, hypercalcemia, macular degeneration, ESRD, CVA

Positive examples with telepsychiatry

- Patient experienced improvement in mood with feelings of self-efficacy when she assisted nurse in technological problems with telepsychiatric services
- Patient prefers frequent in-person home visits, however unable to accommodate her requests, therefore compromised between every other month telepsychiatry visits alternating with every other month in person home visits
- Patient being started on antipsychotic, would benefit from close follow up, but unable to travel to her home so soon as it would disrupt other patient appointments, telepsychiatric visit enabled quick turn around time for visit

Conclusion

- Telepsychiatry has been successfully integrated into our geriatric psychiatry home-based program
- Telepsychiatry has supplemented care and improved efficiency in delivering care to homebound older adults in Los Angeles county

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Thank you for your attention!