

Telepsychiatry Program Increases Access to Care for Geriatric Patients

Ontario Shores for Mental Health Sciences

Background/Issue:

The Ontario Shores Centre for Mental Health Sciences (Ontario Shores) provides a range of psychiatric services to those living with complex mental health illnesses. The hospital focuses on providing interprofessional programs and services such as assessment, diagnosis, treatment and crisis services as well as consultation and education. Many services are tailored to meet the needs of individuals sixty-five years of age and older. There are multiple inpatient geriatric services, such as a psychiatry unit and dementia unit, as well as output services, such as Psychogeriatric Resource Consultation (PRC). The vast majority of the geriatric patients, however, find it difficult to access this care due to mobility issues, and the stress, costs and risks associated with travel.

Objective:

Increases access to care for geriatric patients in the Central East Local Health Integration Network (LHIN).

Solution:

Ontario Shores created Geriatric Psychiatry Outreach Offsite Clinics. These clinics are held monthly at Markham Stouffville Hospital in Uxbridge, Northumberland Hills Hospital in Cobourg and Lakeridge Health Hospital in Whitby. The clinics are serviced by a community nurse clinician on-site and a geriatric psychiatrist, and offer patient care through eVisits (real-time video visit using videoconferencing technology). eVisits are leveraged for initial assessments, follow-up appointments, family visits, patient health teaching, peer-to-peer case conferencing, pre-admission and peer supervision.

Benefits:

Healthcare providers and patients involved in the program identify the following benefits to this virtual approach:

- Decreased wait time to access geriatric psychiatry
- Increased access to psychiatric care for geriatric patients in the region
- Decreased patient travel
- Increased transfer of knowledge and collaboration with cross-functional teams
- Psychiatrists have greater flexibility to consult with patients from various locations; outcomes are generally better; costs associated with travel (i.e. parking) are lower
- Improved case management for psychiatrist

Key Elements of a Telemedicine Program:

Telemedicine Nurse:

The Government's *Open Ontario Plan* to provide more access to healthcare services while improving quality and accountability for patients, resulted in the recruitment of 191 full-time nursing positions focused on delivering clinical telemedicine at member sites across Ontario.

Telemedicine Site:

Telemedicine sites are equipped with OTN's videoconferencing technology and a Telemedicine Nurse and/or a Telemedicine Scheduler who manages the scheduling and coordination of an appointment.

Telemedicine Solution: eVisits

OTN's videoconferencing solution for eVisit is just one of the many virtual tools available to members of the OTNhub. eVisits can be conducted over a computer, mobile device or room-based videoconferencing system.

OTN Representative:

OTN has a field team available across the LHINs who specialize in change management and can provide support as organizations identify virtual solutions right for them, secure support from decision makers, and integrate telemedicine into their practice.

Partnerships:

OTN is one of the largest telemedicine networks in the world. This network has grown through evolving partnerships which unite and empower Ontario's healthcare community. Developing strong working relationships with those in your patients' circle of care is integral to the success of any telemedicine program. Providers using OTN's products and services can connect and collaborate on OTNhub.ca – a private and secure online community for practicing telemedicine.

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Patient Population

Patients are accepted if they are sixty-five and older with a psychiatric concern that is either treatment resistant or complex in nature presenting with one or more of the following: cognitive changes, behavioural changes, mood changes, anxiety or psychotic symptoms from home, long term care or hospital.

The clinic also accepts patients that are forty years and older with suspected dementia, and/or a new onset of cognitive impairment where the diagnosis is unclear, presentations are unusual or cognitive difficulties may co-exist with a psychiatric disorder, complex medical problems or drug interactions. The patient also must be eighteen and over who have an established neurological condition including acquired brain injury.

Participating Sites

The following clinics are serviced by a Community Nurse Clinician on-site and a Geriatric Psychiatrist from Ontario Shores via OTN.

- Markham Stouffville Hospital Clinic: serves seniors living in the community. The clinic is accessible solely to General Practitioners practicing in the Uxbridge area
- Northumberland Hills Hospital Clinic: serves inpatients of Northumberland Hills Hospital
- Lakeridge Health Whitby Hospital Clinic: serves inpatients of Lakeridge Health Whitby

How it Works:

1. Referral

Ontario Shores uses a centralized intake and referral system which is publically available on their website (www.ontarioshores.ca). Referring organizations and practitioners fax the completed form to Ontario Shores' central intake.

2. Intake

The central intake referral form has a section that provides the client the option to choose an eVisit (real-time video visit). The central intake team checks the form for completion prior to it being sent to the Geriatric and Neuropsychiatry Outpatient Intake secretary. The intake secretary pre-screens the referral and, if supplemental information is required, the nurse contacts the referring organization or practitioner for clarification. The intake nurse forwards the referral according to the respective outpatient service.

3. Initial Assessment & eVisit

For the Geriatric Mental Health Outreach Team (GMHOT), the assigned outpatient clinician conducts the clinical assessment (in person) at the Long Term Care Home with the resident and care team. The clinician then arranges the psychiatrist consult via videoconference (this is done primarily for patients in rural areas). All videoconference events are scheduled through a Telemedicine Coordinator.

4. Follow-Up

Follow-up visits are arranged using the same process.

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Resources:

Human Resources

A LHIN-funded Telemedicine Nurse is leveraged to facilitate scheduling and case management of patients between Ontario Shores geriatric psychiatrists and other allied healthcare team members (consultant site) and patients presenting at external institutions (host sites).

Technology

The program uses OTN's videoconferencing solution for eVisits.

Training/Change Management

In 2014, a regional representative from OTN provided Ontario Shores, and participating patient/clinic sites, comprehensive telemedicine training. As new employees join their teams, OTN works with sites to enable access to OTN training resources and education opportunities. OTN also offers online training on the OTNhub which can be completed independently anytime, anywhere.

Financial Investments

Ontario Shores, along with the program's participating patient sites, allocated funds from their own budgets to purchase a number of high-definition (HD) cameras, microphone, and headsets for their desktop computers to enable videoconferencing. The funding was secured after a business case and project charter were completed by the program's Clinical Manager and approved by the Administrative Director, Senior Management Team and Finance. Physicians can also bill OHIP for telemedicine services.

Physical Requirements

Ontario Shore's Geriatric Memory Clinic conference room was converted into an OTN room-based videoconferencing studio.

Implementation

1. Identify a Need

Ontario Shores' Clinical Manager identified the need to increase access to care for geriatric patients in conjunction with the Local Health Integration Network (LHIN)'s environmental reports detailing the lack of geriatric psychiatry coverage.

2. Identify a Champion

Dr. Ian Dawe, Physician in Chief at Ontario Shores, was instrumental in initiating telemedicine in early 2012. He, along with local LHIN-funded telemedicine nurses, identified telemedicine's value and encouraged its adoption throughout the region.

3. Obtain Organization-Wide Support

Telemedicine's expansion and development was a corporate goal set by the Senior Management Team in response to the LHIN's environmental reports and the telemedicine champions' enthusiasm and support. A project plan, which incorporated telemedicine, began in early 2014 and was completed by the fall.

4. Scale Program

A communications strategy was developed by the LHIN to communicate the telemedicine program to Behavioural Supports Ontario communities and encourage the purchase of videoconferencing equipment and training. OTN's regional representative frequently visited Ontario Shores to train groups of psychiatrists as well as assist them in drafting early telemedicine protocols.

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Result:

The Geriatric Psychiatry Program was awarded Team of the Year in 2013 by the Regional Geriatric Program of Toronto in October of 2013 for all the efforts made in using telemedicine to address system gaps in the community.