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Tele-Behavioral Health: Leveraging technology to bridge the gap across the Pacific

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BRIEFING OUTLINE

PURPOSE: To provide an overview on the Regional Health Command – Pacific, Tele-Behavioral Health (TBH) Hub activities as well as the challenges conducting Telehealth across the Pacific.

1. Background of TBHSS
2. TBHSS patient locations
3. Technology
4. Procedures – Provider and Patient Site
5. Highlights of contributions and impact



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Background

- AMEDD and TBH services to achieve goals
- What is Tele-Behavioral Health (TBH)?
 - BH specialties at a distance
 - Synchronous
 - Asynchronous



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- Full Spectrum Psychological Evaluation & Treatment
- Psychiatric Evaluation & Treatment
- Soldier Readiness & Reverse Soldier Readiness Processing
- Administrative Evaluations: mental status exams, command directed evaluations, temporary disability retired list evaluations
- Psycho-education
- Nurse Case Management



Simulated Patient Encounter



- Procedures
 - Provider site
 - Administrative procedures
 - Patient site
 - Point of Contact (TBH Champion!)
 - Administrative procedures
 - IT support
 - Space
 - Safety plan



- What to expect as a patient?

- Procedures
- Point of Contact
- Consents
- Technology



Terminology

- Originating Site – any patient location/clinic
- Remote Site – provider site
- Tandberg – Stand alone audio/video system to conduct tele-health sessions
- Jabber – Software system used to conduct tele-health sessions on computer

Originating site requirements

- Provide dedicated/semi-dedicated tele-health appropriate patient room
 - Enough space for patient, phone and connection to tele-health
- Clinic staff to support Tele-health encounter
 - Tele-presenter and Credentialed Provider at minimum
 - Completed Tele-health Training
 - Tele-health Competencies
 - Tele-health training video - Swankhealth
- Written Emergency Procedures – approved by originating site OIC/MTF
- On-site Credentialed BH Provider – for purposes of triage or face-to-face evaluation in case of emergent need or care

TRAINING

- Everyone working with TBH will need to complete training through Swankhealth. Two modules on conducting Tele-Behavioral Health.
- Providers and tele-presenters/techs complete a specified Competency Checklist to be completed prior to patients being scheduled at the patient site (when starting a new site) or upon new staff arriving to work with TBH.

Tele-presenters

- Face of the clinic (both TBHSS & remote site clinic)
- Also ... eyes, ears and NOSE of the clinic; a multi-disciplinary approach
 - Patient's eyes dilated? Altered gait? Body odor? Alcohol smell? Agitated?
 - Did the patient bring spouse or support person?
- Preparation & maintenance of room and equipment
 - Clean room, removal of any PHI, tissues, connection troubleshooting
- Provide patient BHDP*, patient forms & address general questions
 - Be prepared to answer questions on the intake form
 - Prep new patients or their support team on what to expect from VTC
- If connection problems arise, be prepared to reconnect patient and/or troubleshoot

CREDENTIALING and Privileging

- Specific Tele-Health privilege
- TBH Providers are credentialed first at their home MTF (TAMC)
- Interfacility Credential Transfer Brief (ICTB) is generated from provider site to each patient site MTF
 - ICTBs must be approved prior to patient care occurring

Emergency procedures

- Copy of Emergency Procedures to be sent to TBH PRIOR to beginning patient care
- Drills. If you happen to know that a drill is coming, please let your provider and patients know that their session MAY be interrupted.
- TBH Emergency Procedures for tele-health appointments are to activate the patient site EOP by way of POC
- TBH is NOT a walk-in clinic and as such, are unable to see patients with no scheduled appointment. If you would like to schedule a same-day appointment, please call TBH MSA's – appointments will be made based on availability.
- Patients with Emergent Behavioral Health needs will need to be referred to your clinic/MTF's walk-in services



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Prescribing via Tele-Health



Tools

- TBH SOPs
- TBH Trifold
- TBH Checklist
- TBH Request for Consultation
- TBH Request for Med Refill
- TBH Patient Handbook
- TBH Provider Handbook

Procedures

- Informed Consents
 - DA Form 2005 Privacy Act Statement
 - DA Form 8100 Limits of Confidentiality
 - DA Form 4700 TBH Supplemental Data
- BH Health Care Owner
- Behavioral Health Data Platform
- Risk Assessment
- Tele-Prescribing
 - CHCS I Access:
 - Via AVHE or Unix and Open VMS
 - Vitals
 - Psychoactive Medication Consent & Profile



"Tele-prescribing"

Doing Well

- Consultation Requests
- Risk Communication
- Care Coordination
 - Encrypted Email, Primary Care NCM
- Standardizing Processes
 - Consents uploaded into HAIMS
- TBH vs. Local (In Person)
- Marketing

Challenges

- ICTB and CHCS I Access
- Maintaining Utilization
 - Scheduling across time zones
 - Weekly email on open appts
 - Default unused appts for local use
- BH Health Care Owner
 - Recommended that have local therapist
- Behavioral Health Data Platform
 - Not always available
- Child BH Services
 - Unmet demand: tele-therapy, -prescribing



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Therapy via Tele-Health



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- Evidence Based Treatment
- Possibility of continuity of care
- Provide coverage when there are gaps in services
- Documentation is similar to face-to-face providers EXCEPT:
 - Indicate the location of provider and of patient
 - Utilize a “GT modifier” to indicate synchronous appointment.
- Collaboration with patient sites



- Tele-Behavioral Health Hub (BFDR)
 - Located at TAMC
- Distributed TBH
 - Providers in other MEPRS clinics that conduct some care via tele-health
 - Document GT modifier in AHLTA note
 - DMHRSi: utilizes extended code of .99
 - Example: BFDA_0052.99



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Children and Adolescents via Tele- Health



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- Specific training is needed for techs at the originating site if conducting services via tele-health
- Communicate with the originating site staff in the set-up of the tele-health room.
- There are *qualitative* differences in the experience that may make treating and diagnosing some pathology more difficult e.g., subtle ASD symptoms, play therapy with young children



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What is key for TBH services?



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- TBH Champion at originating site
- Admin support at originating site
- Space and connectivity (IT)
- Utilization of what is offered
- Communication, communication, communication



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Thank You!