Vituity
Telepsychiatry

Sumter Armstrong, Vice President of Business Development
Vituity: Company Overview

We care for over 6.4 Million Patients Annually

2,500
Physician Partners

1,400
Advanced Providers

2,000
Scribes

300+
Practice Sites
Vituity’s Practice Lines

Our Practices

- Emergency Medicine
- Acute Psychiatry
- Acute Neurology
- Hospital Medicine
- Critical Care
- Anesthesiology
- Acute Surgery
- Telehealth
- Post-Acute Care
- Outpatient Medicine
Our California Footprint in Numbers

• **1,900** Physician Partners
• **930** Advanced Practice Providers
• **1,500** Scribes
• **230** Practice Locations
• **4.1M** Patients Annually
• **1.9M** Medi-Cal Patients Annually
The ED: Front Door & Patient Safety Net

1 in 8 visits to the ED involve mental health and substance abuse disorders.

Suicide attempts treated in the ED up 414%

% of ED Visits
- Substance Abuse: 41%
- Depression: 23%
- Anxiety: 26%
- Dual Diagnosis: 10%

Trends in Emergency Department Visits Involving Mental and Substance Abuse Disorders, Audrey J. Weiss, Ph.D., Marguerite L. Barrett, M.S., Kevin C. Heslin, Ph.D., and Carol Stocks, Ph.D., R.N. 2006-2013, HCUP, Dec. 2016

Emergency Physicians Feeling the Pressure

ACEP ED Physician Poll, October 2016
Results of poll with 1,700+ ED physician respondents

Emergency Physicians who...

- 75% see patients at least once a shift who require hospitalization for psychiatric treatment
- 16.9% have a psychiatrist on call to respond to psychiatric emergencies in the ED
- 11% have no one on call to respond to psychiatric emergencies

21 percent report having patients waiting 2-5 days for in-patient beds
ED Bottlenecks and Inefficiencies

Psychiatric patients spend an average of **11.5 hours per visit** in ED; **3x longer** than other patients

Operational and Financial Impacts

- **Longer LOS** of psychiatric patients
- **Boarding** of psychiatric patients

Cost to hospitals: $2,264 per patient

Prevents 2.2 Bed Turnovers

The Impact of Psychiatric Patients Boarding in Emergency Departments, B Hicks, DM Manthey, Department of Emergency Medicine, Wake Forest University Health Sciences, Winston-Salem, NC 27157, USA, June 2012
Our Practice Leaders

Experts in the delivery of acute psychiatric services

Scott Zeller, MD
Vice President, Acute Psychiatry

Herbert Harman, MD
Regional Director, Acute Psychiatry
Vituity’s Acute Psychiatry Services

Telepsychiatry

EmPATH Unit
(Emergency Psychiatric Assessment Treatment Healing)

Psychiatric Hospitalist Staffing
Vituity’s Telepsychiatry Offering

✓ Access to **board-certified** psychiatrists

✓ **24/7 on-demand** or block-scheduled access across acute care settings, with an on-call Care Navigator to support consult logistics

✓ Physicians who perform a **full evaluation, risk assessment, diagnosis, treatment and disposition recommendation** for each patient

✓ **Care Integration** with onsite emergency medicine, hospital medicine and behavioral healthcare teams to create a seamless patient experience

✓ **Training and guidance** on appropriate telepsychiatry use-cases, medication recommendations, de-escalation techniques, and agitation management
Greatest Asset: Our Physicians

What we value
- Psychiatrists with expertise and passion for the delivery of emergency and acute psychiatry
- A designated physician team serving a set group of clients vs. one large panel

Our Philosophy
- Doing nothing for patients trapped in “psychiatric boarding” is not acceptable
- Shared decision-making and responsibility with onsite physicians is paramount

What we invest in
- Focused and thorough training, orientation, and ongoing education and engagement
- Peer review processes that meets Vituity’s expectations of high quality care
Technology

Telehealth Platforms

- **On Duty® Telehealth Platform**: designed by Vituity’s psychiatric leadership, customized for virtual psychiatry care delivery in emergency, urgent and inpatient care settings
- **InTouch**: if organizations have already made investments with InTouch technology, we are open to using their platform for the telepsychiatry visit

Telehealth Hardware

- We’re hardware agnostic – we recommend the hospital has a dedicated laptop, tablet, cart or COW for telepsychiatry

EMR Documentation

- Direct EMR documentation is evaluated on a case-by-case basis based on our client’s needs and expected consult demand
- Thorough notes from each patient encounter can be uploaded as a flat file directly into hospital’s EMR from On Duty (if our platform is utilized)
Expertise In 5150’s & County Policies

Vituity physicians have decades of experience with LPS laws practicing in EDs across CA, and this has guided our telepsychiatry services approach

Prior to Go-Live:
- County Regulations Reviewed
- Local site educates the telepsych team (hospital by-laws, LPS vs Non-LPS)
- Communication directly with county Mental Health to ensure collaboration
- Certification by County authority completed when needed
- Weekly psychiatry physician meetings: updates on regs/by-laws by counties/hospitals

After Go-Live:
- Evaluate existing 5150 holds, and can (and often do) discontinue the holds via telepsychiatry in multiple counties when appropriate
- Assist in determining necessity for a new 5150 hold, and assist onsite personnel in initiating the hold
- Consult with emergency medicine docs regarding 1799.111 mental health holds (with the goal to avoid a 5150)
Following implementation of Vituity’s telepsychiatry program, the following performance improvement was demonstrated in Year One:

- 30% reduction in observation hours
- 51% of holds lifted
- 50% decrease in TAT-A

Telepsychiatry Disposition Recommendations

- 49% Recommend discharge from ED
- 30% Recommend admission to inpatient psychiatric care
- 20% Recommend initiating treatment with observation and reassessment
- 1% Recommend admission to medical unit with psychiatric consult if needed

**Client Case Study:**

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Benefits to Hospitals and Patients

Access to 24/7 on-demand patient evaluations by emergency trained psychiatrists delivers:

- Improved clinical quality
- Reduction in boarding, allowing for efficient bed turnaround and ED throughput
- Decreased risk and improved safety for patients, families, and care teams
- Reduction in unnecessary behavioral health inpatient admissions
- Care plan collaboration with in-person providers
- Improved rates of patient acceptance by IP psych facilities because a thorough evaluation with documentation has occurred by a psychiatrist
What We Believe

We believe that all emergency patients, those needing physical or psychiatric care, deserve access to high quality services.

We believe in the importance of having access to psychiatrists with expertise and passion for emergency psychiatry.

We believe that the value of our service should not only improve care for patients, but also improve the safety of your units, and the job satisfaction of your onsite providers and care teams.
Additional Resources

Published Articles
• 3 Innovations That Improve Emergency Psychiatric Care
• On-Demand Telepsychiatry: Addressing the Shortage of Emergency Psychiatrists
• CNN Feature with Vituity's Scott Zeller MD on Compassionate Behavioral Healthcare
• Psychiatric Emergencies: What Psychiatrists Need to Know
• Transforming Behavioral Healthcare in the Emergency Department
• How EDs are Addressing the U.S. Mental Health Crisis

Video
• ZDoggMD Incident Report featuring Vituity’s Denise Brown, MD
Learn More About Vituity Telepsychiatry

Website: https://www.vituity.com/services/acute-psychiatry
Email: Sumter.Armstrong@Vituity.com

Hospital Council Of Central/Northern California:
https://www.hospitalcouncil.org/strategic-partner/vituity-telepsychiatry

Hospital Association of Southern California:
http://www.hasc.org/sponsor/vituity-telepsychiatry
Thank you!