



NORTH CAROLINA  
STATEWIDE TELEPSYCHIATRY PROGRAM

# Quarterly Progress Updates



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North Carolina Statewide Telepsychiatry Program (NC-STeP)



**East Carolina University**  
CENTER FOR TELEPSYCHIATRY

# NC-STeP Status as of October 2014

- 57 hospitals in network
  - 40 hospitals currently live
  - 17 additional hospitals scheduled to go live within next two months
    - These hospitals have equipment and have already been trained, we are just waiting on credentialing.
- Four Clinical Providers' Hubs
  - Coastal Carolina Neuropsychiatry
  - Cone Health
  - Novant
  - Mission



*October 2014 – December 2014*

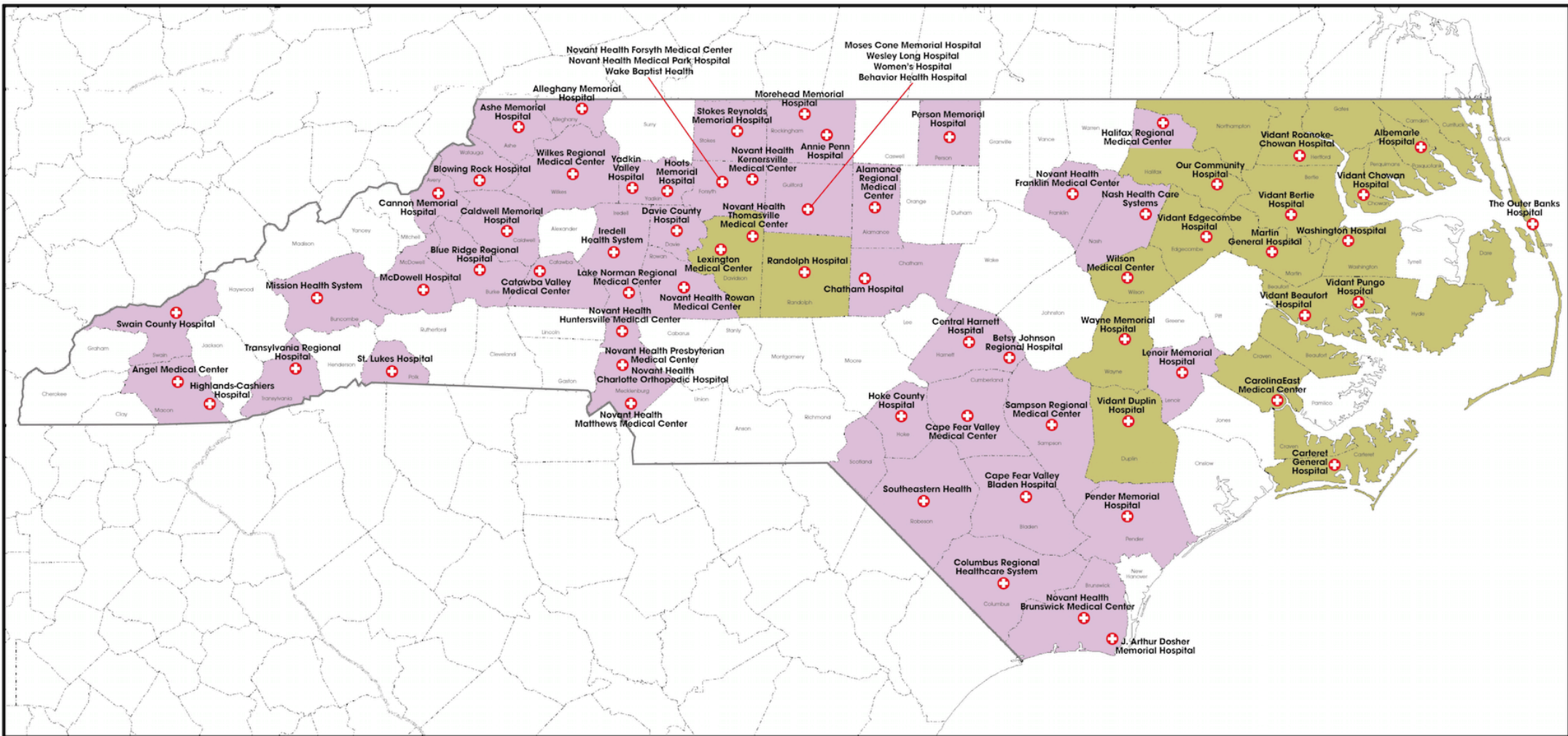
- Seven referral sites “Go Live” (total in network = 45)
- ECU submits quarterly performance report and financial statements of ECU Center for Telepsychiatry to DHHS Office of Rural Health and Community Care. DHHS Office of Rural Health and Community Care submits annual report on the operation and effectiveness of the Statewide Telepsychiatry to the Legislative Oversight Committee on Health and Human Services and the Fiscal Research Division before Nov. 1.
- Sustainability plan created


# Program Timeline Required by the Legislative Plan

## October – December 2014

Timeline	Result
Seven referral sites "Go Live" (total in network= 45).	57 hospitals in network (40 hospital and another 17 hospitals scheduled to go live within next two months
ECU submits quarterly performance report and financial statements to DHHS Office of Rural Health and Community Care.	Completed.
DHHS Office RHCC submits annual report on the operation and effectiveness of Statewide Telepsychiatry to the LOC on Health and Human Services and the Fiscal Research Division before November 1.	Completed.
Sustainability program created.	Completed.

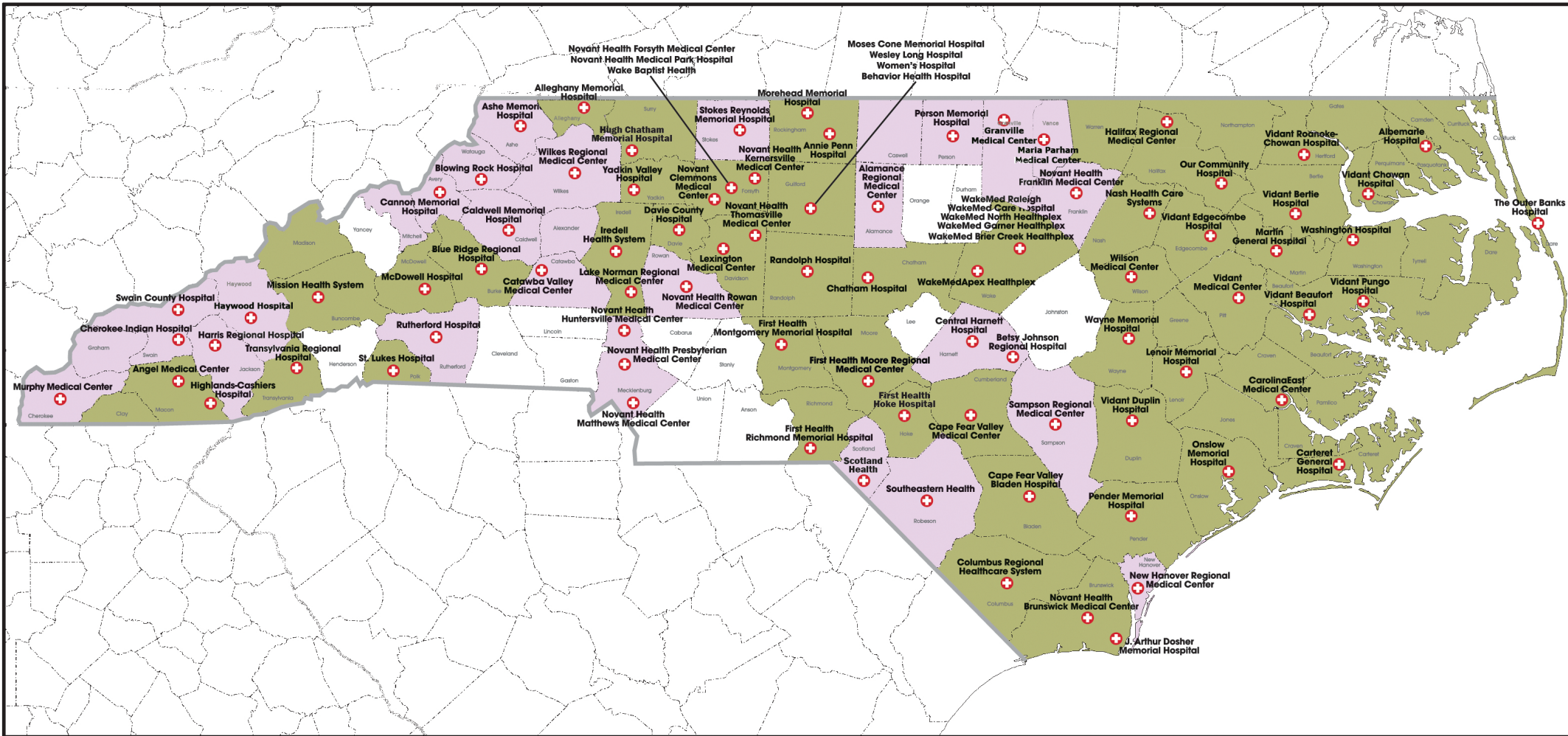
# NC-STeP Status - October 2013



-  Hospitals with NC-STeP Live
-  Hospitals with NC-STeP in the Process of Going Live



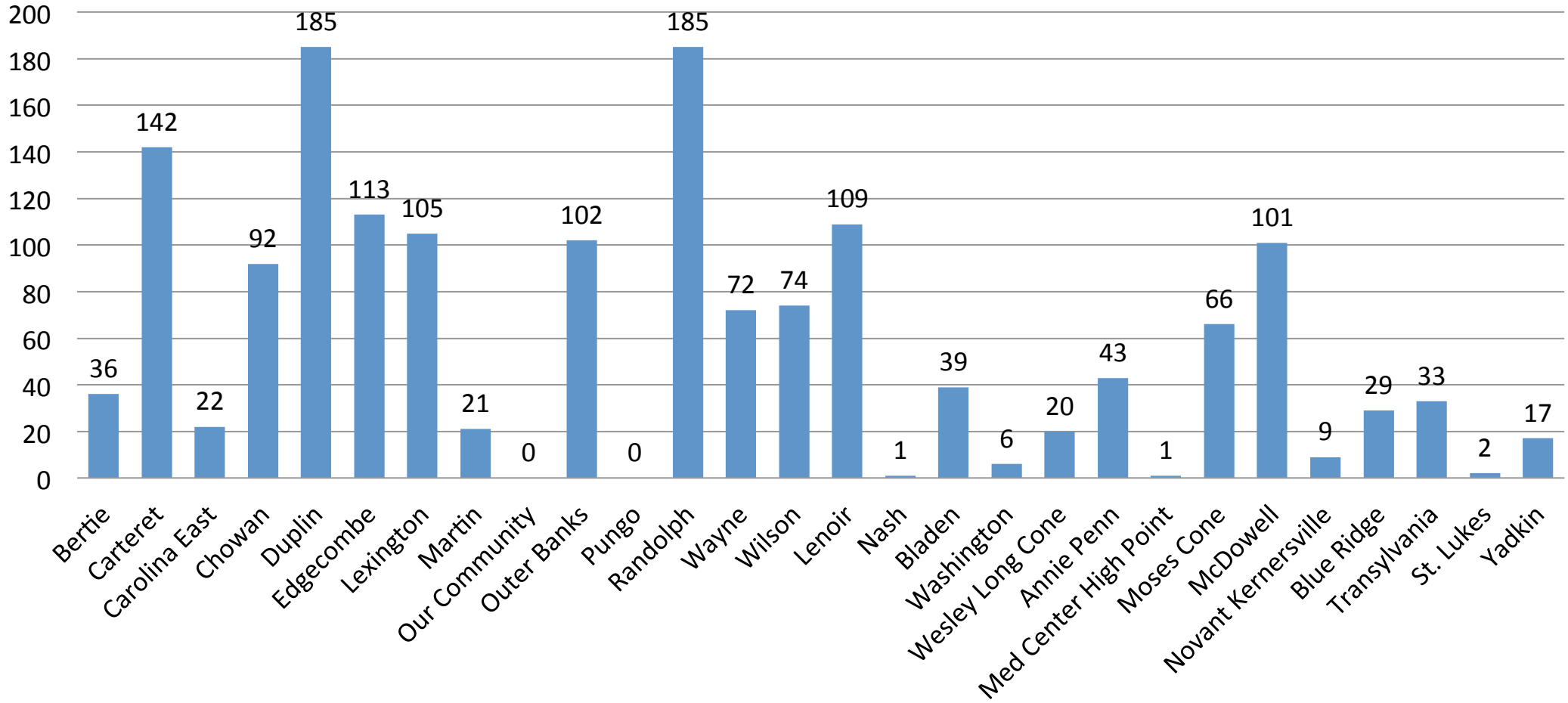
# NC-STeP Status - January 2015



- Hospitals with NC-STeP Live
- Hospitals with NC-STeP in the Process of Going Live



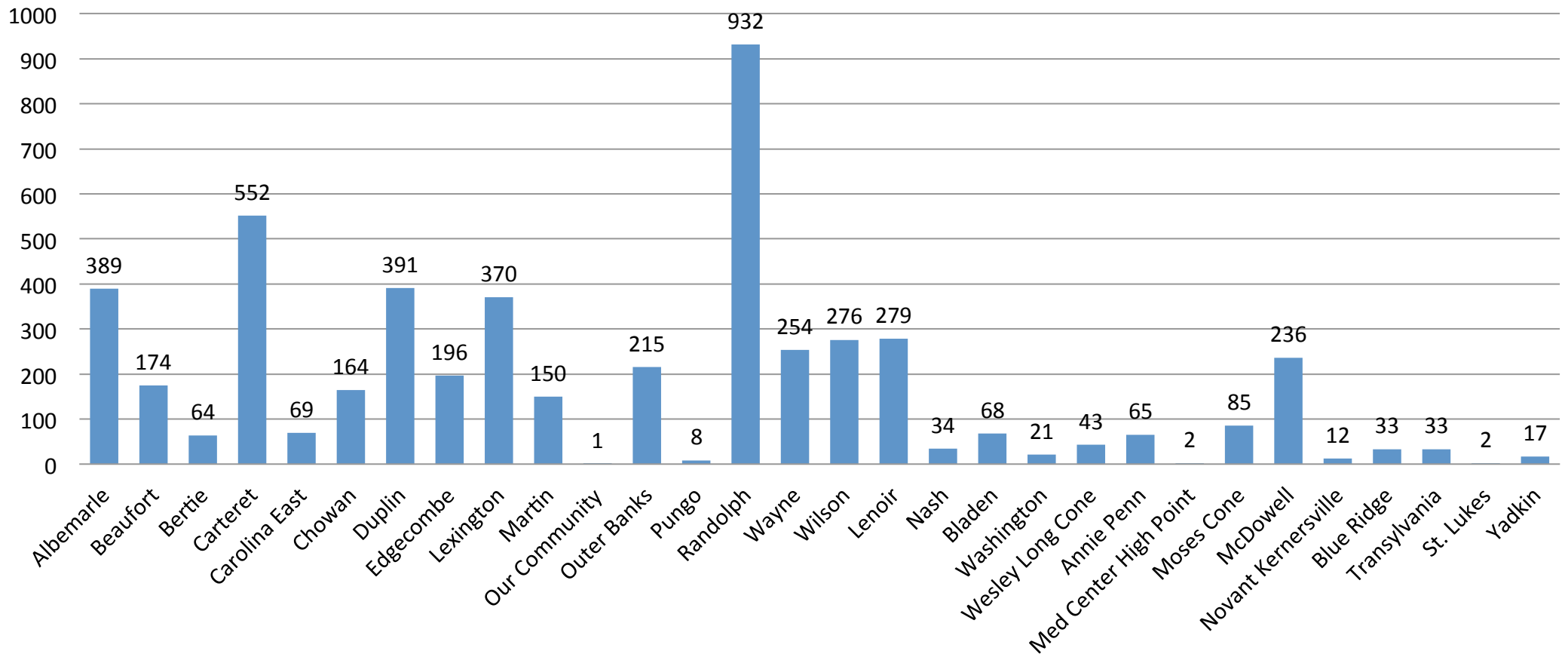
## Total Number of ED Telepsychiatry Patients by hospital - for October - December 2014



■ Number of Telepsychiatry Patients by Hospital



## Total Number of ED Telepsychiatry Patients by hospital - for January - December 2014

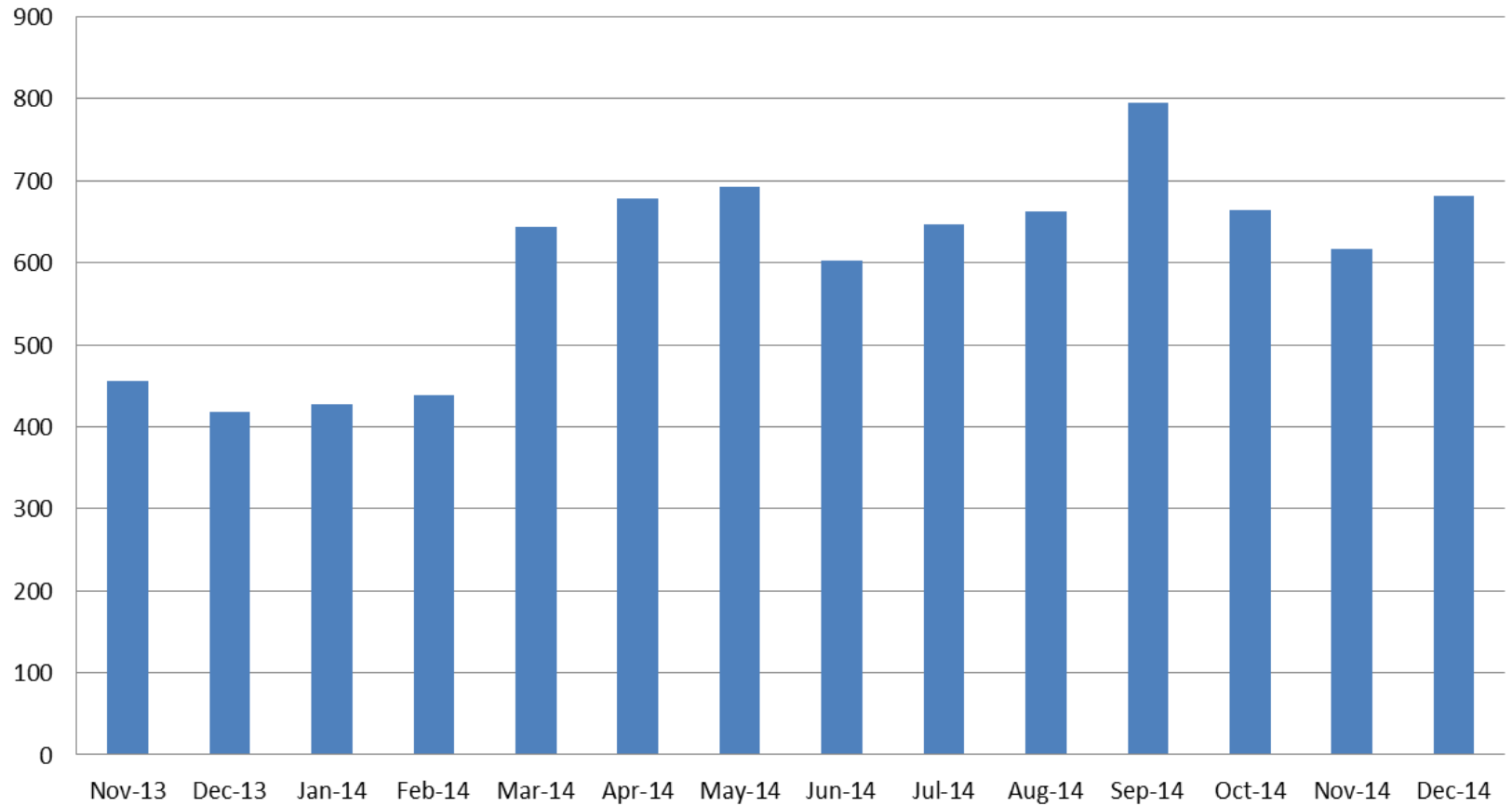


■ Number of Telepsychiatry Patients by Hospital





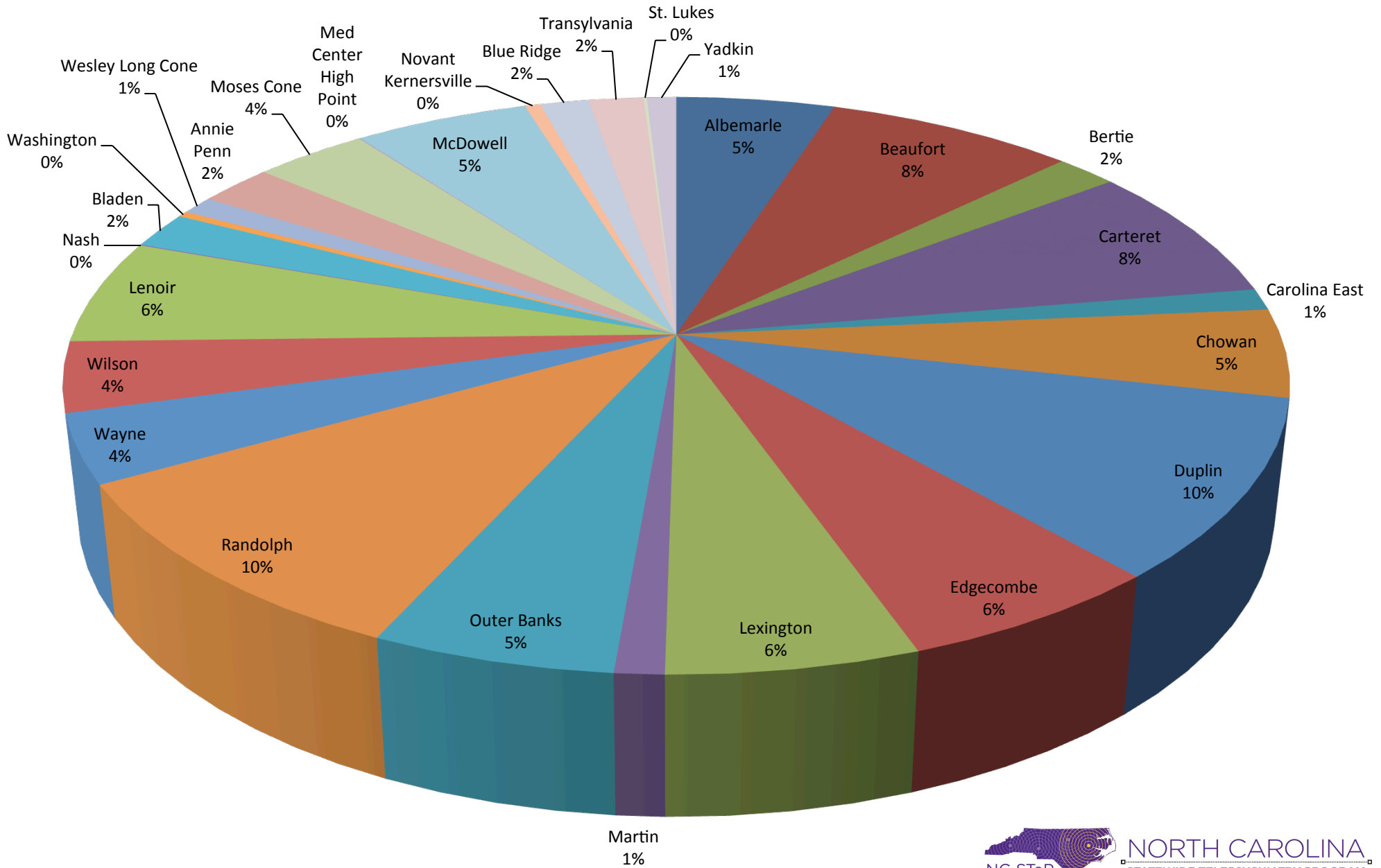
## NC STeP Number of Total Assessments Billed by Month (November 2013 - December 2014)



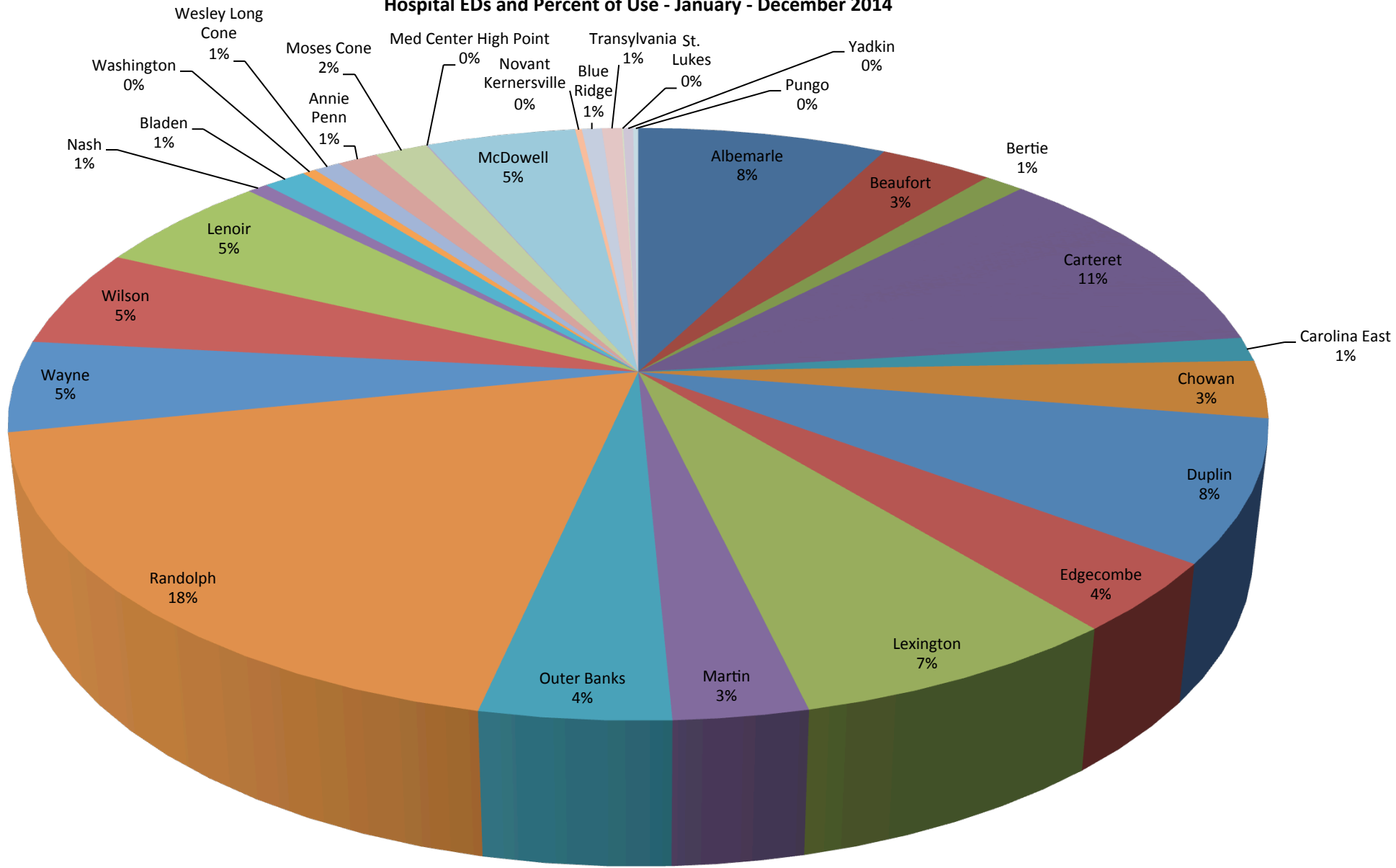
	Nov-13	Dec-13	Jan-14	Feb-14	Mar-14	Apr-14	May-14	Jun-14	Jul-14	Aug-14	Sep-14	Oct-14	Nov-14	Dec-14
■ Number of Total Assessments Billed	456	418	427	438	643	678	692	603	647	662	795	664	616	681



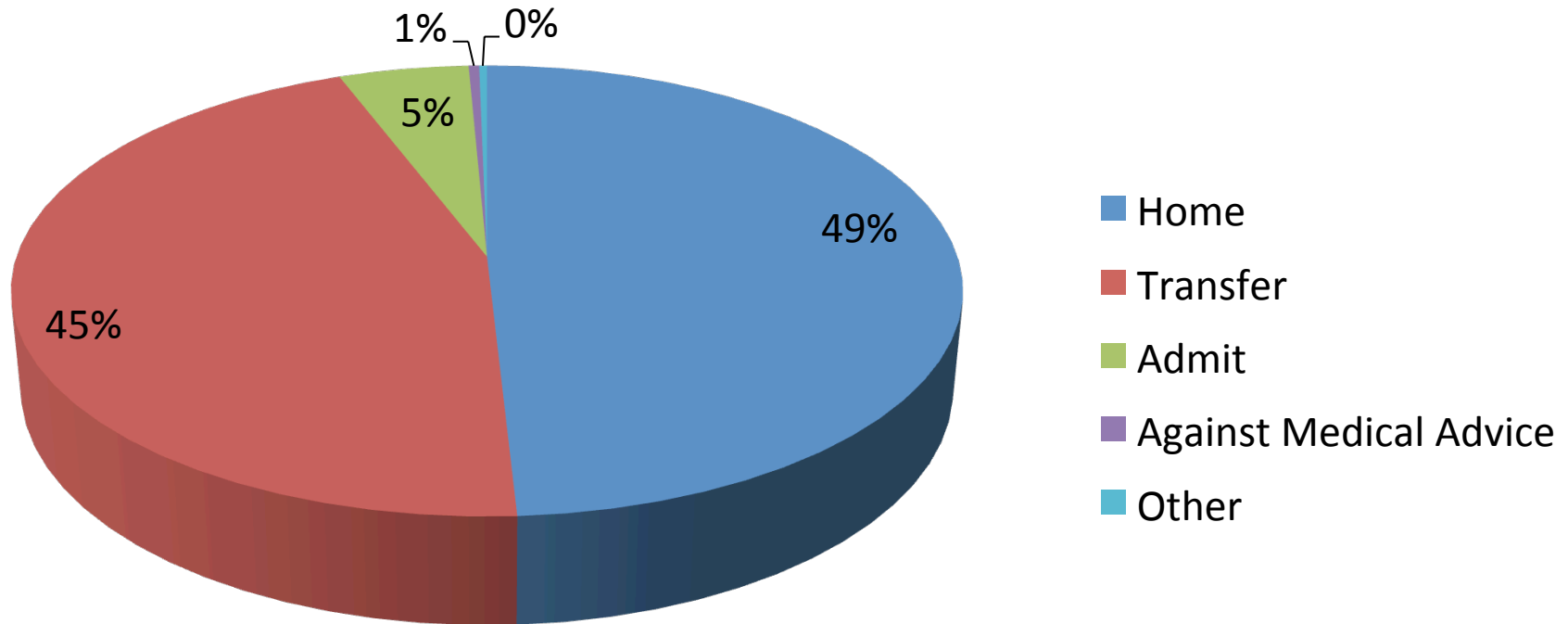
# Hospital EDs and Percent of Use - October - December 2014



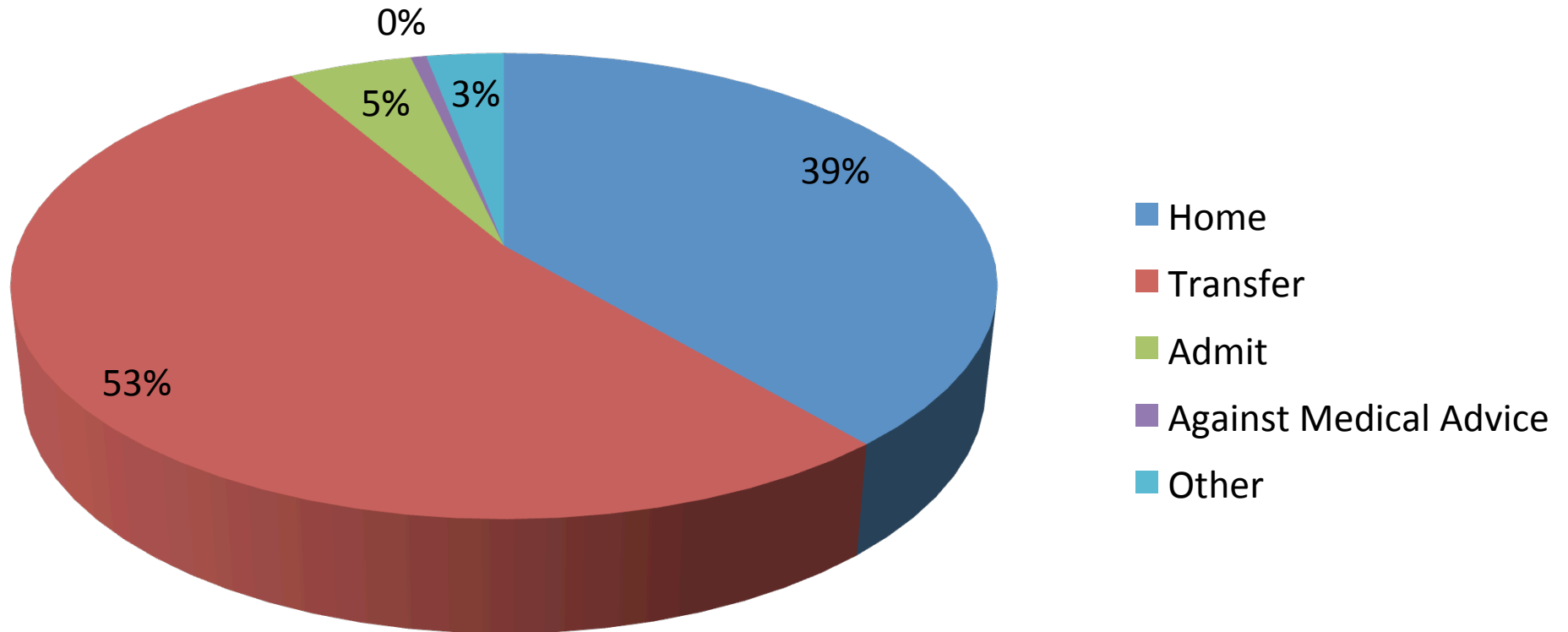
### Hospital EDs and Percent of Use - January - December 2014



## Percent of ED Patients by Discharge Disposition October - December 2014

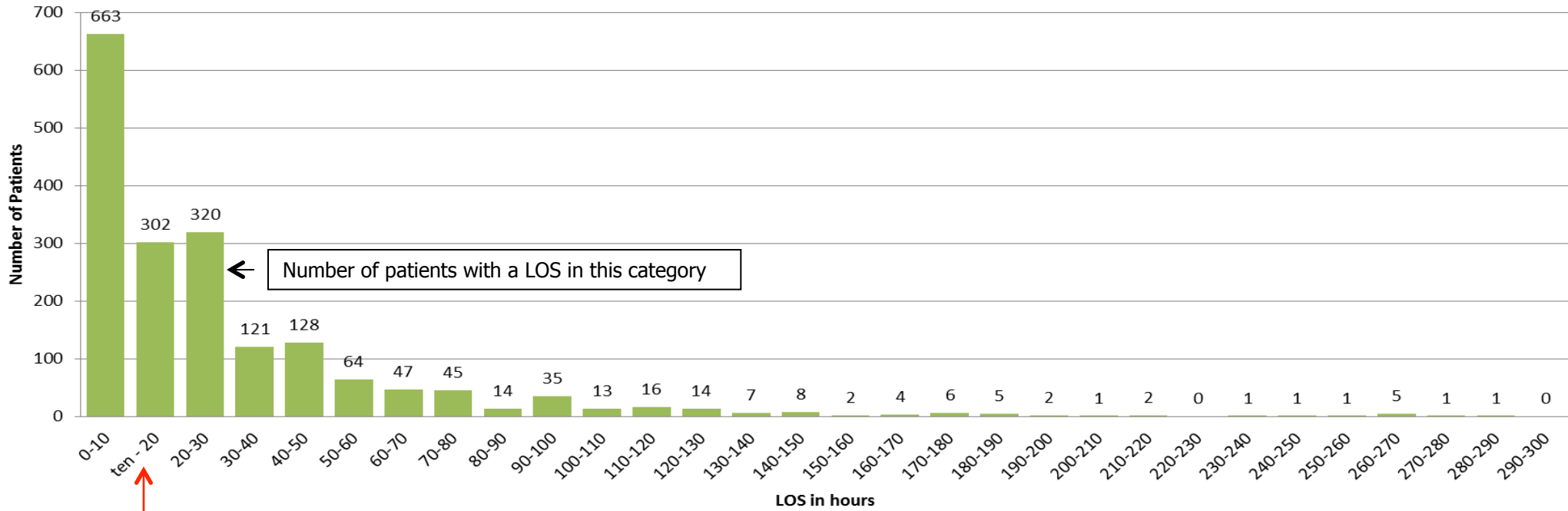


# Percent of ED Telepsychiatry Patients by Discharge Disposition January - December 2014



70% percent of patients  
Had a LOS of 30 hours or less

### NC STeP October 2014 - December 2014 Number of Patients by LOS Category (in hours)

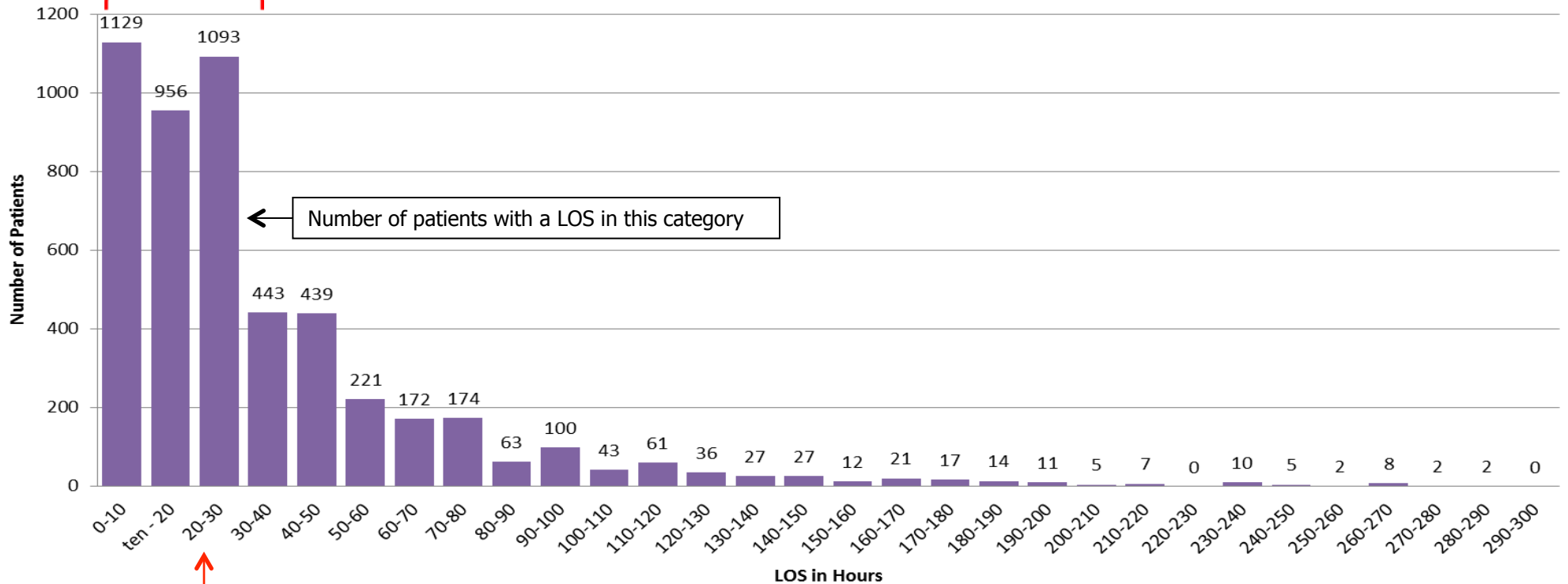


Median Length of Stay for Oct 2014 – Dec 2014 = 18.9 Hours



62% percent of patients  
Had a LOS of 30 hours or less

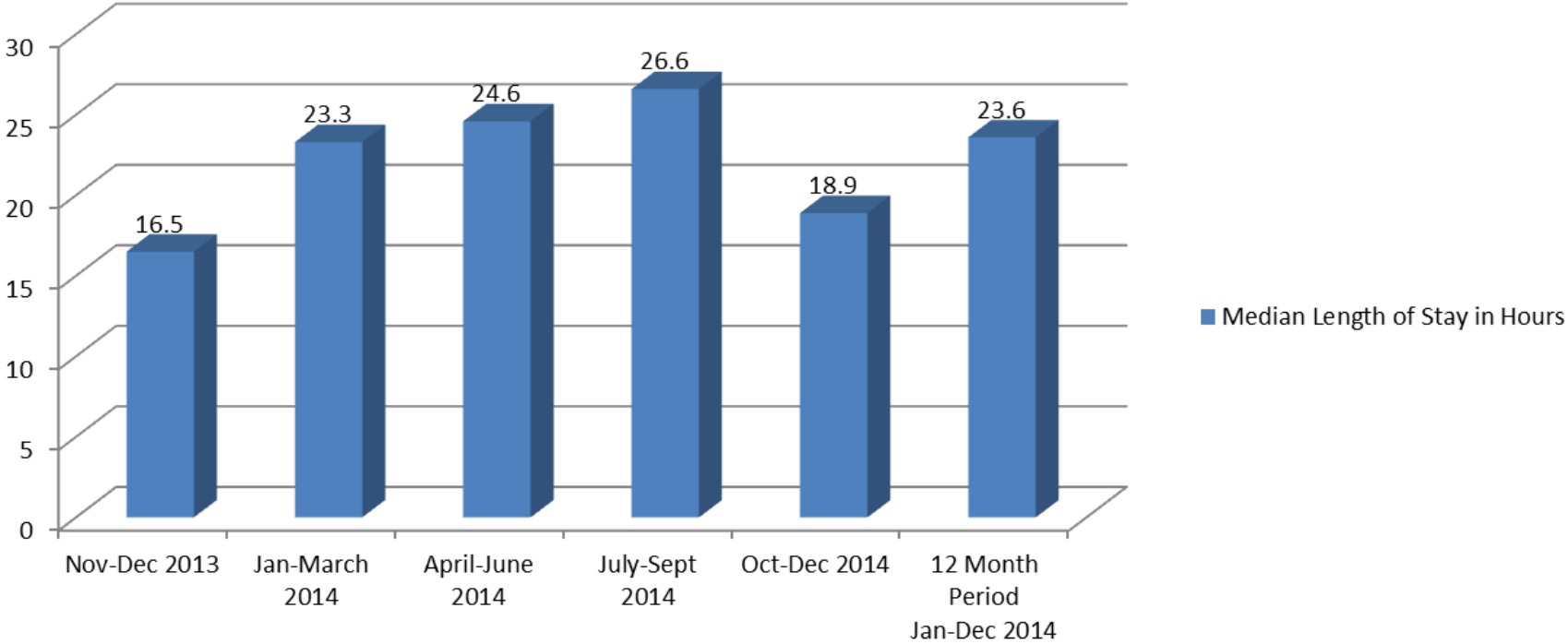
### NC STeP January - December 2014 Number of Patients by LOS Category (in hours)



Median Length of Stay for Jan 2014 - Dec 2014 = 23.6 Hours



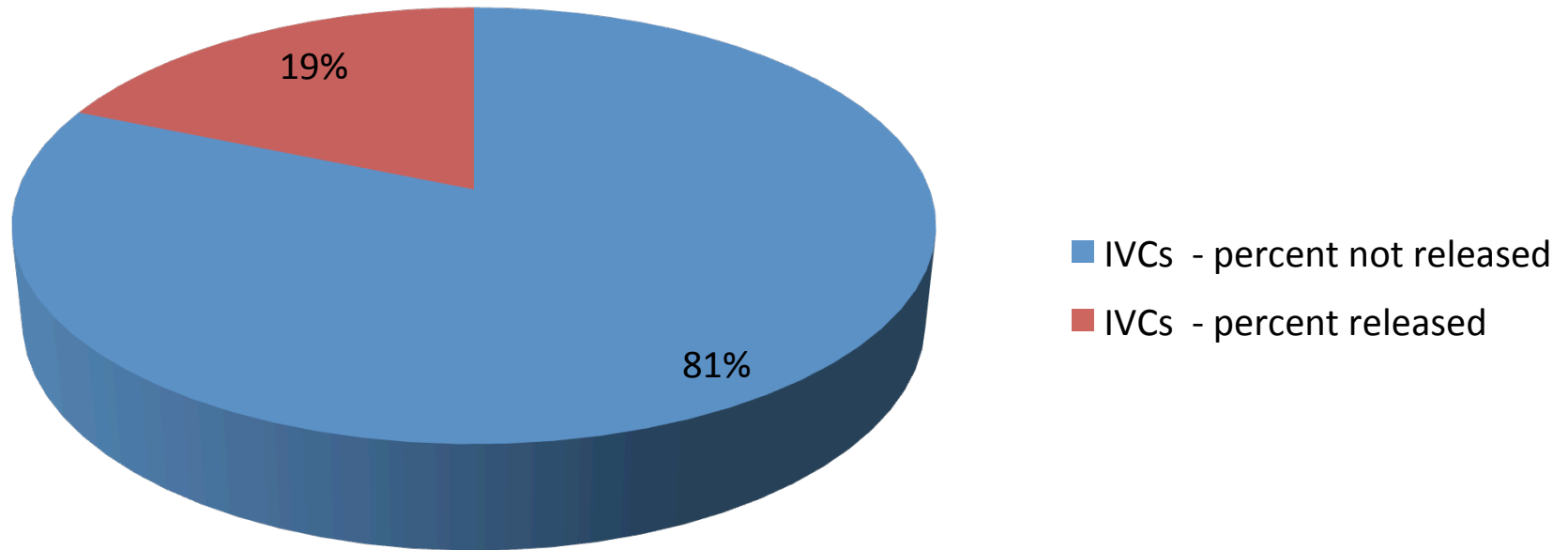
# Median Length of Stay in Hours



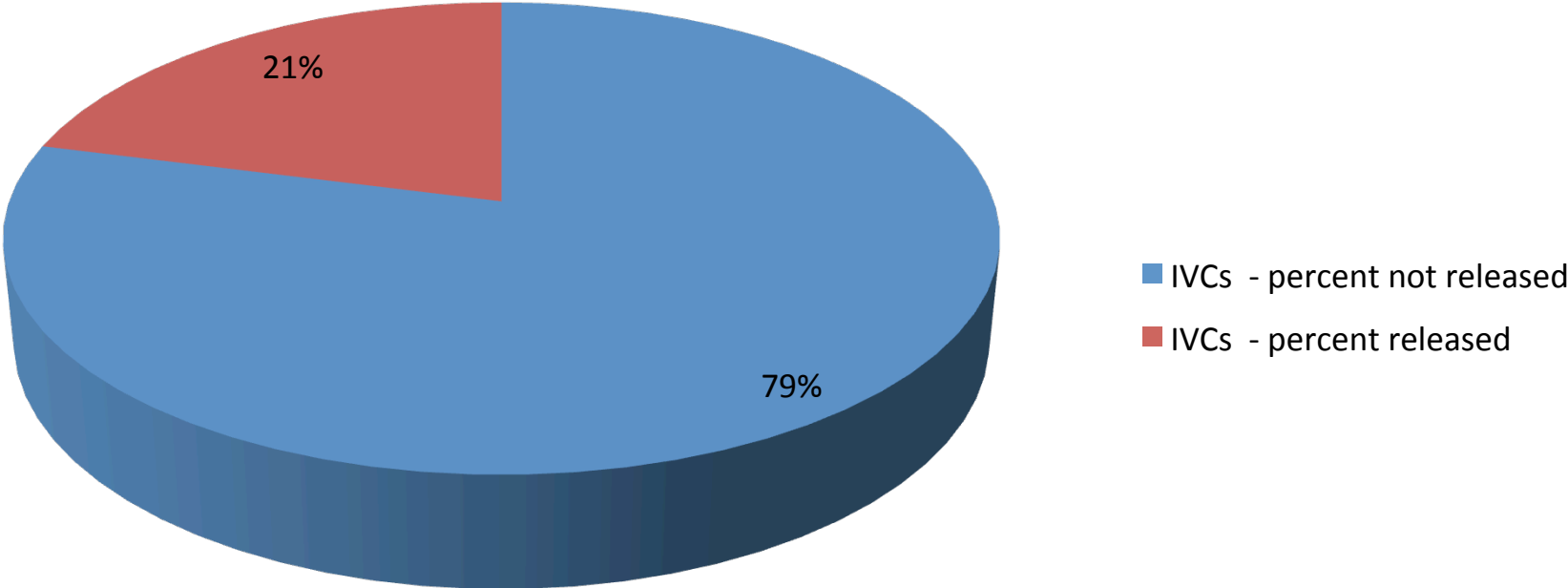


# IVCs - By Release Status

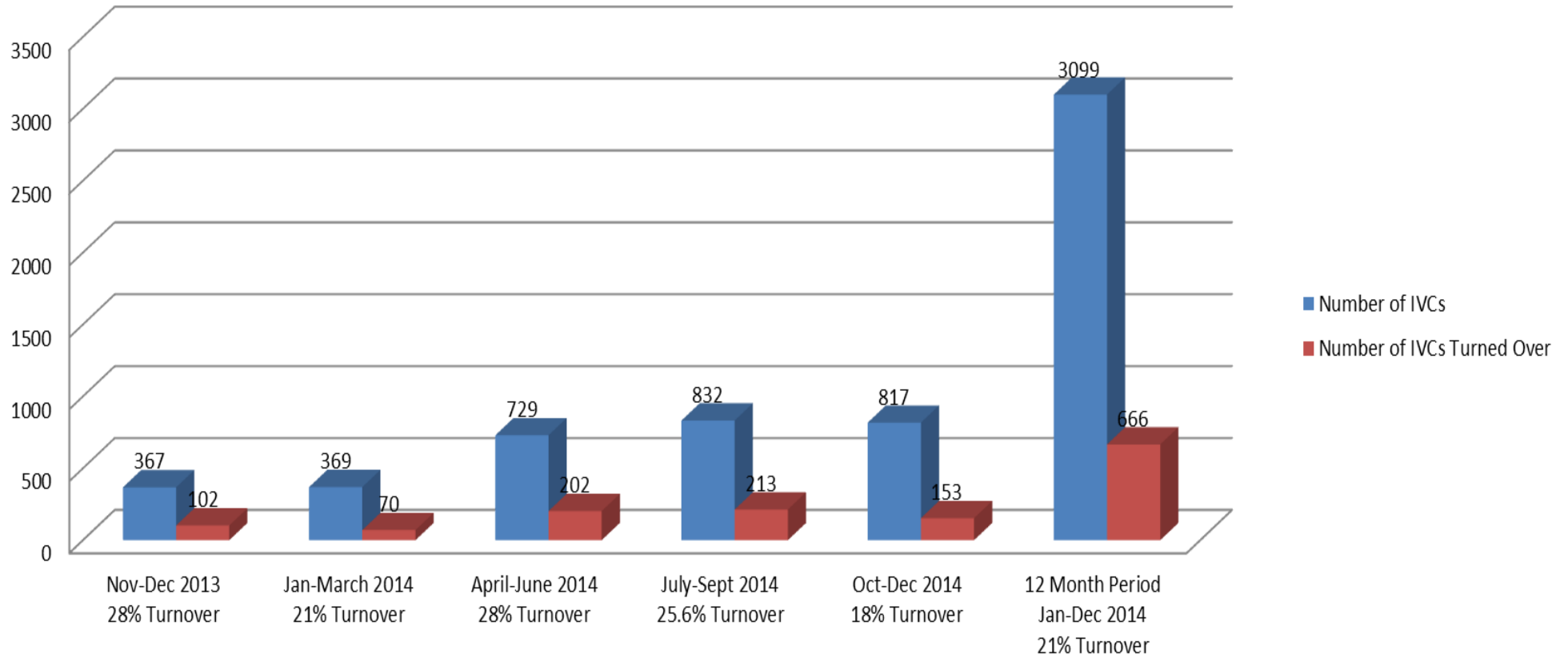
## October - December 2014



# IVCs - By Release Status January - December 2014



## NC STeP: Number of IVCs for Participating Hospitals by Quarter and for Year 2014

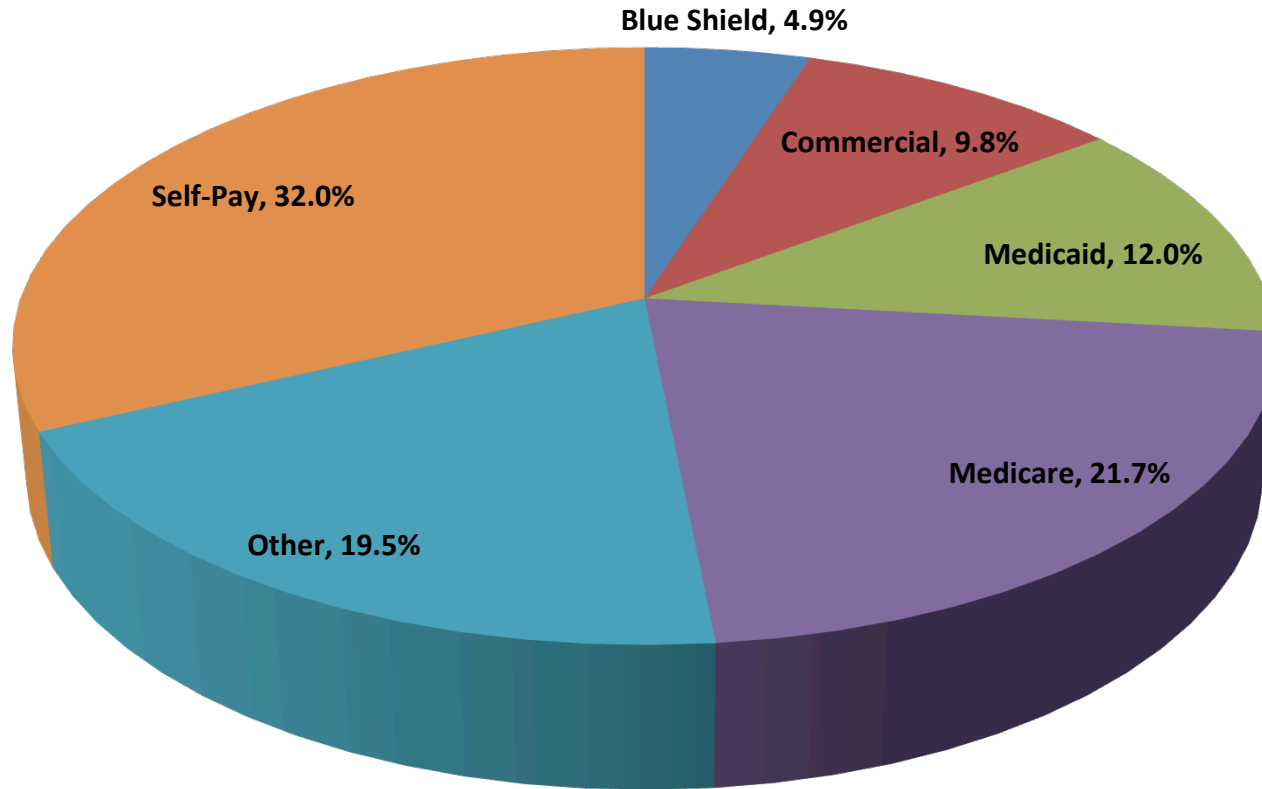


NC-STeP

# NC-STeP CHARGE MIX

## CALENDAR YEAR 2014

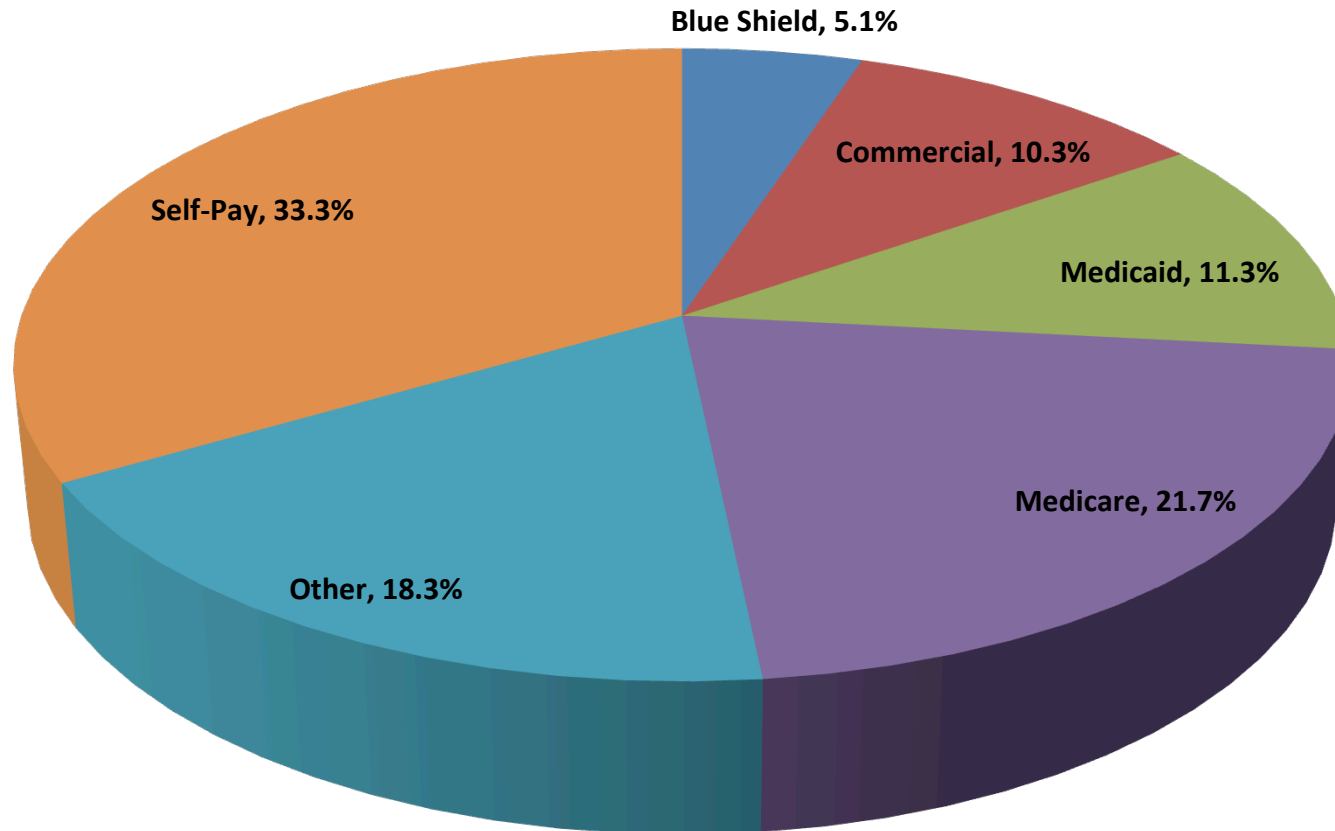
(based on initial status)



# NC-STeP CHARGE MIX

## PROJECT INCEPTION TO DATE

(based on initial status)



NC-STeP



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## **Satisfaction surveys were conducted in January 2015 with 4 groups**

- **Emergency Department Physicians**
  - **Hospital Emergency Department Staff**
  - **Hospital CEOs/COOs**
  - **Consulting Psychiatrists (in the HUB)**
- Invitations to participate were sent via electronic mail
  - Surveys were completed online via Qualtrics software
  - Each group was given a different survey (with different questions) based on their role in the telepsychiatry program

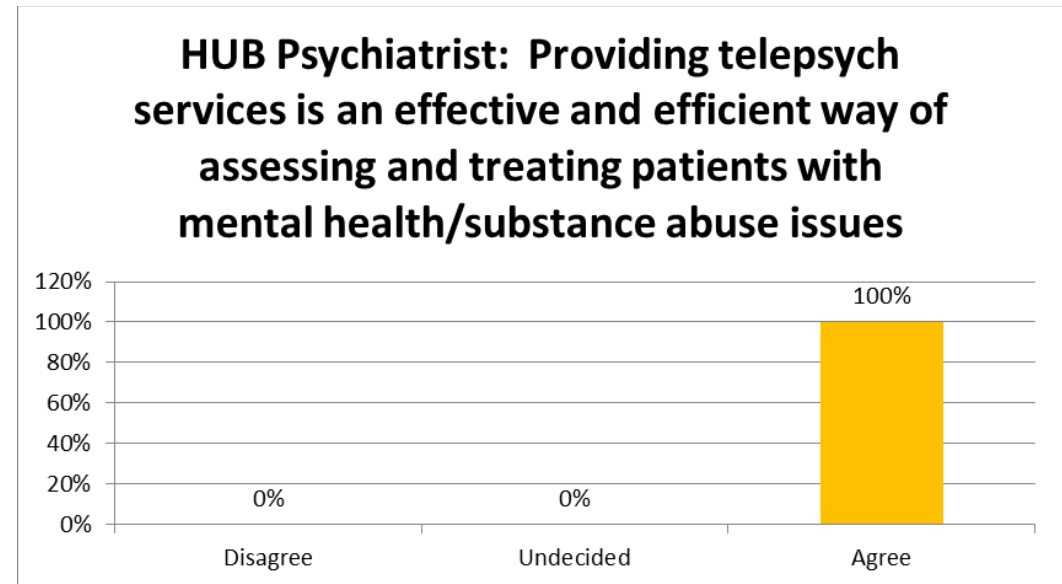
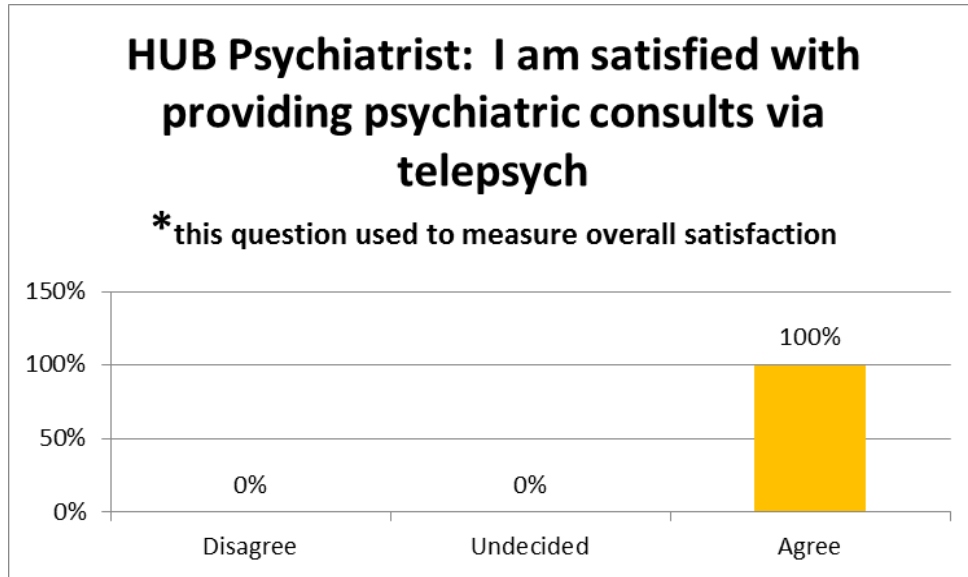
## **The following number of individuals from each group responded**

- Emergency Department Physicians (12 responded)
- Hospital Emergency Department Staff (15 responded)
- Hospital CEOs/COOs (14 responded)
- Consulting Psychiatrists (in the HUB) (7 responded)

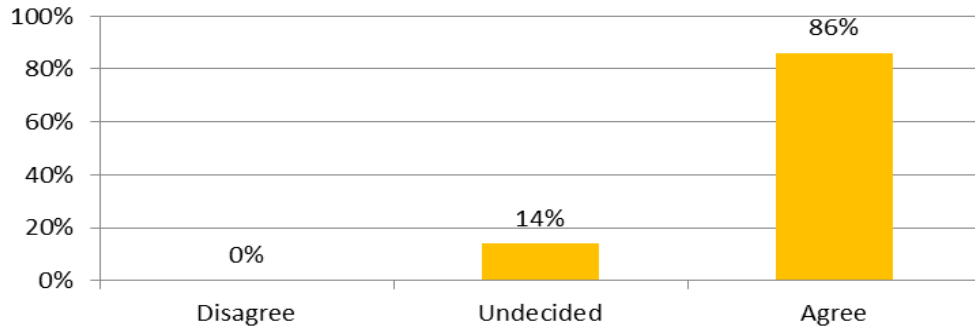
**For each group, one summary question is selected for an overall “satisfaction” rate.**



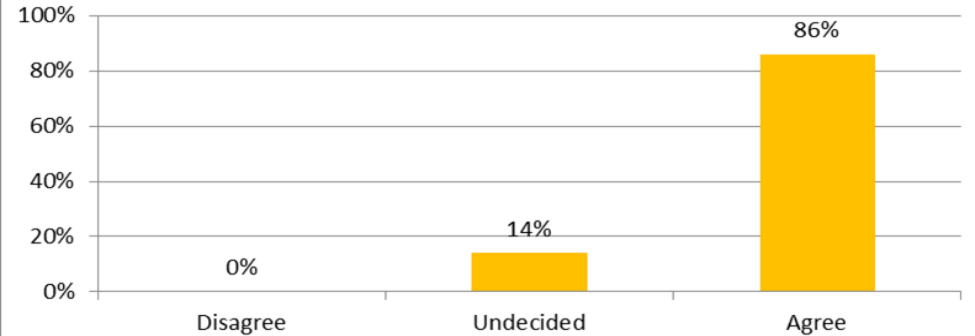
# Consulting Psychiatrists (in the HUB) reported high levels of satisfaction with the program



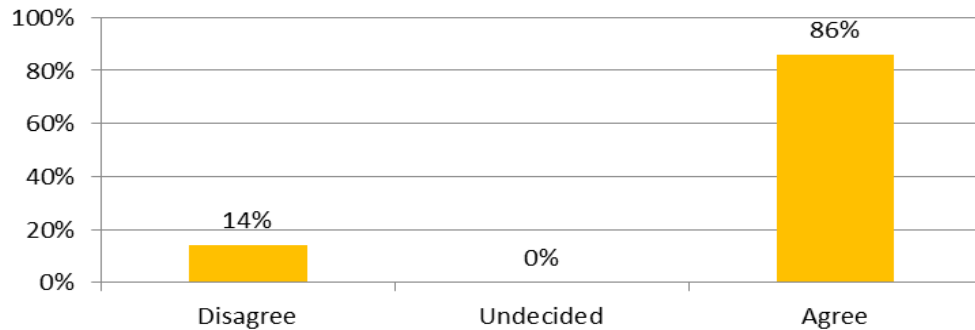
### HUB Psychiatrist: I am satisfied with the ability to provide disposition recommendations via telepsychiatry



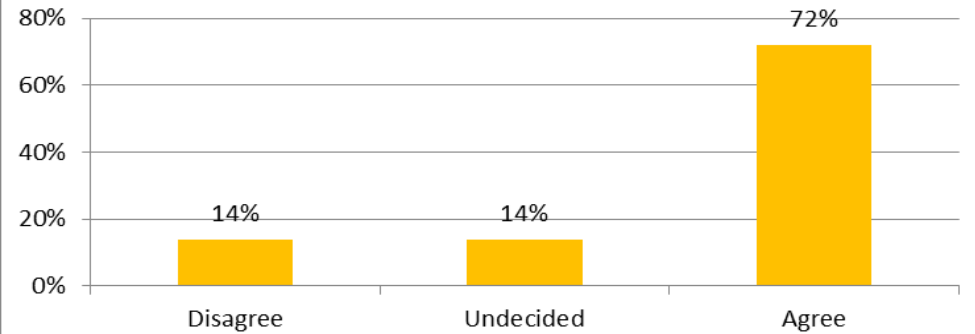
### HUB Psychiatrist: I believe quality of psychiatric care provided via telepsych is comparable to face-to-face psychiatry



### HUB Psychiatrist: Telepsychiatry equipment is easy to use and safely arranged



### HUB Psychiatrist: Telepsych equipment is reliable and seldom down

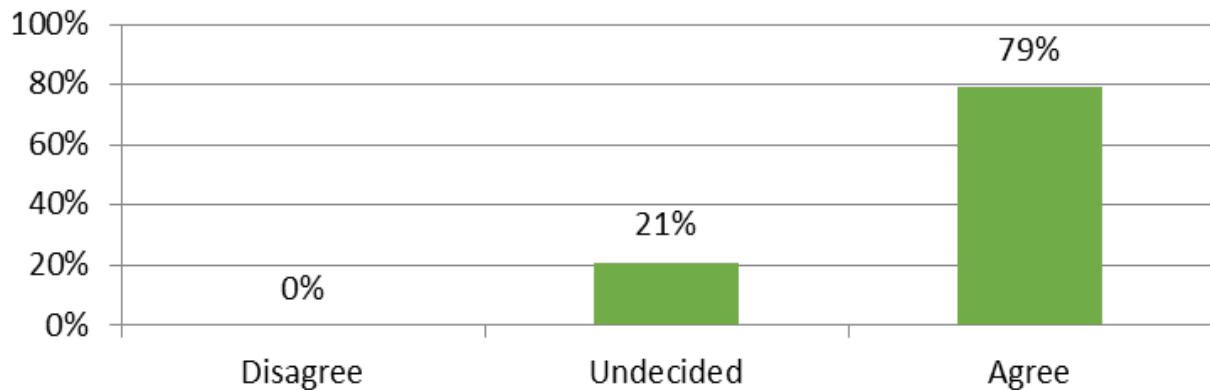




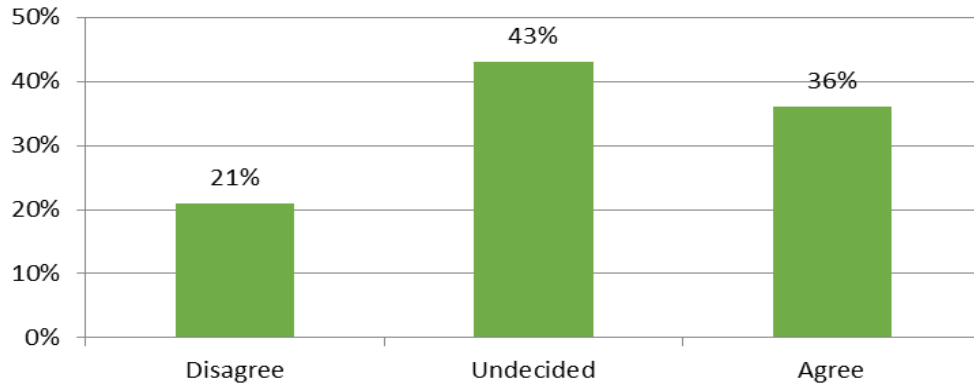
# Hospital CEOs/COOs report that quality of care in the ED has improved. They would recommend this program to others, and pursue additional uses of this technology

## Hospital CEO: The overall quality of care for psychiatric patients utilizing the ED has improved

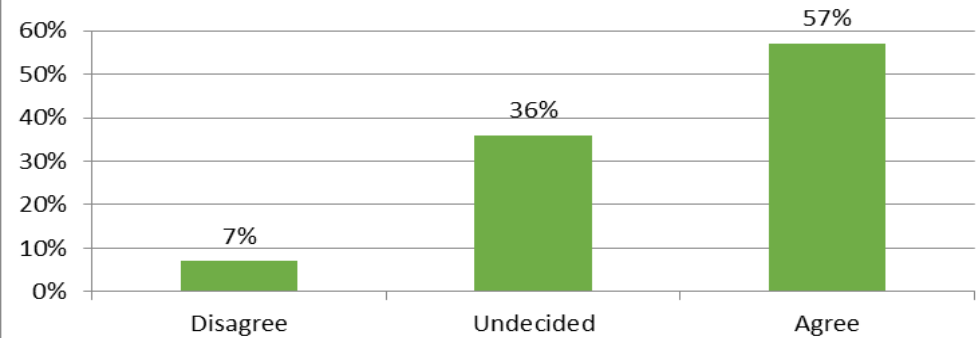
\*This question used to measure overall satisfaction



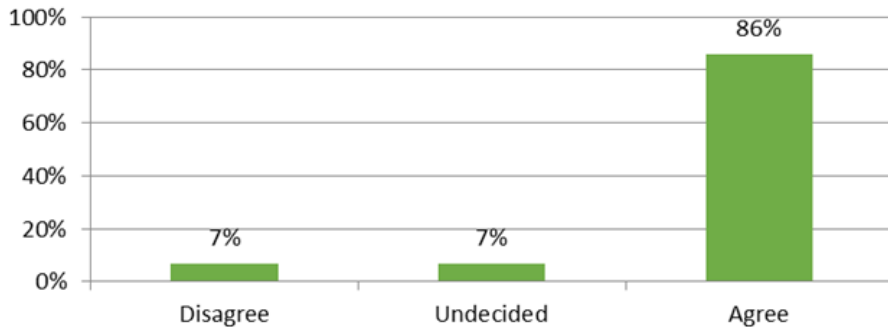
### Hospital CEO: Overall emergency department costs have been reduced



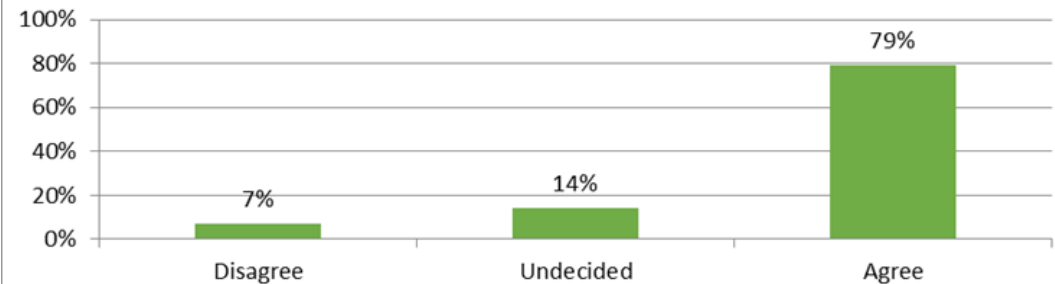
### Hospital CEO: Our hospital's use of telepsych consultants has been cost effective



### Hospital CEO: I would recommend this telepsych program to other hospitals

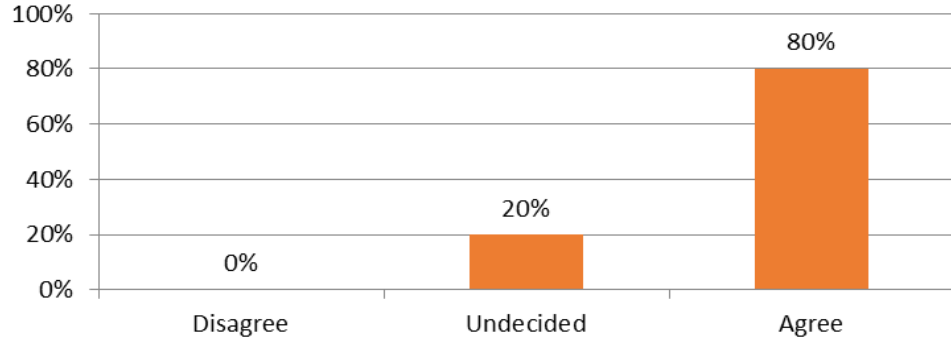


### Hospital CEO: I would pursue additional uses of this technology for other medical specialty areas (such as neurology, cardiology, and dermatology)

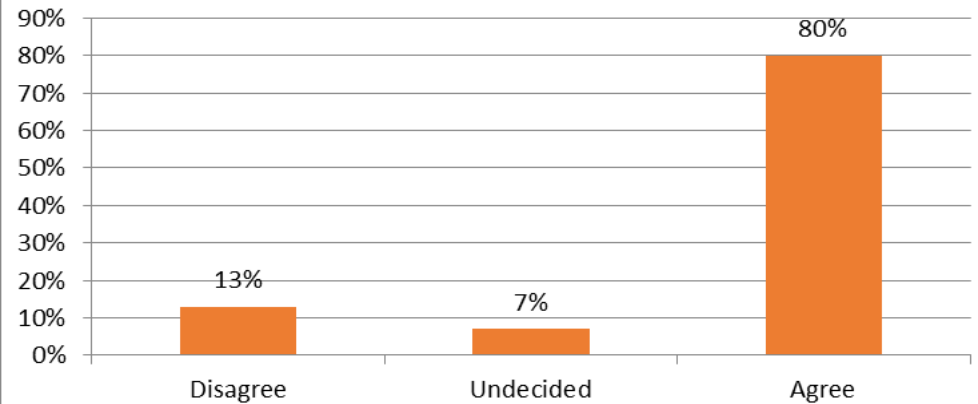


### ED Staff: Telepsych consults have improved patient care in our ED

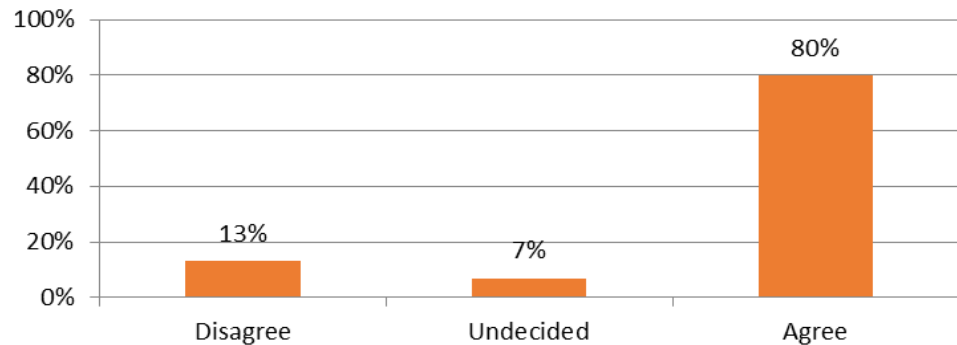
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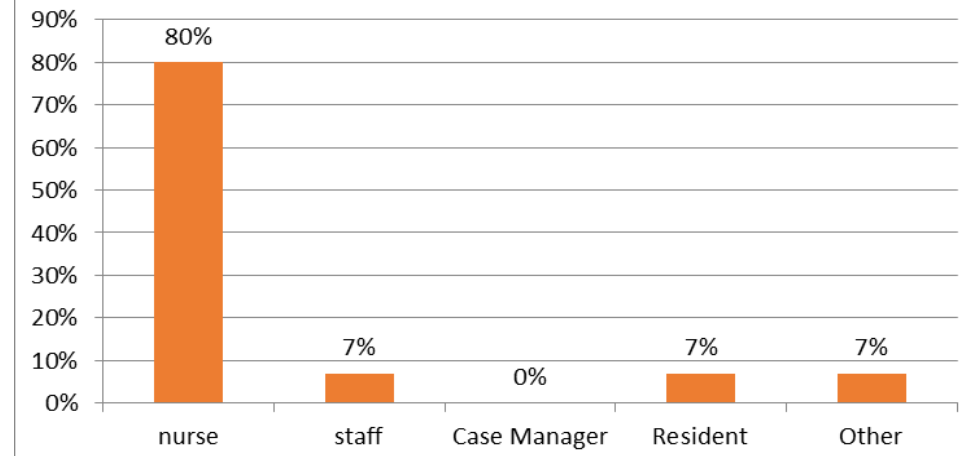
### ED Staff: Telepsych Equipment is easy to use



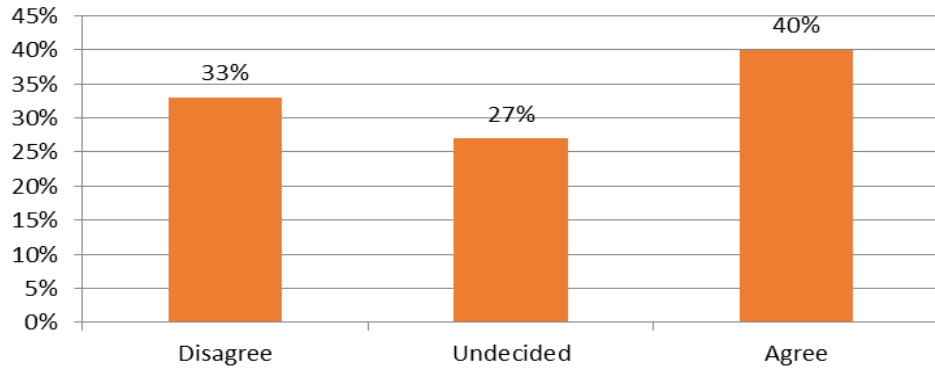
### ED Staff: I received adequate training and instruction preparing me to use the system



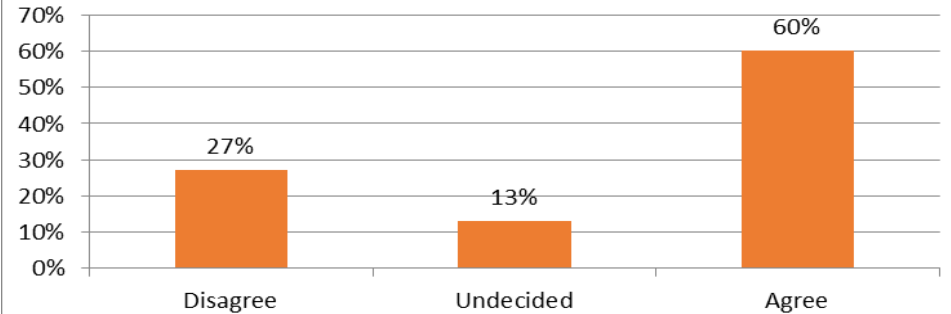
### ED Staff: Who responded



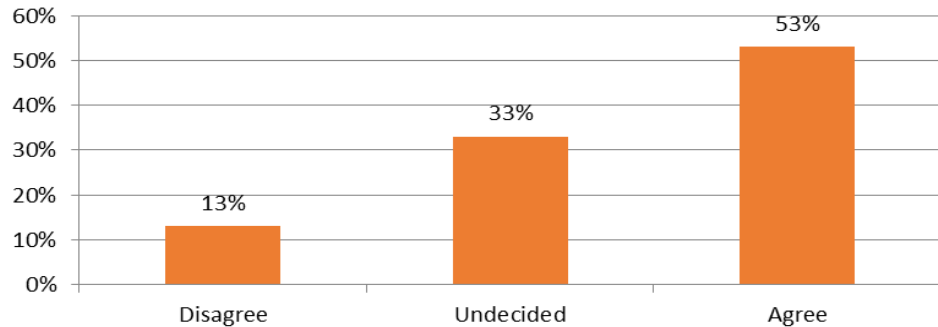
### ED Staff: The system rarely goes down



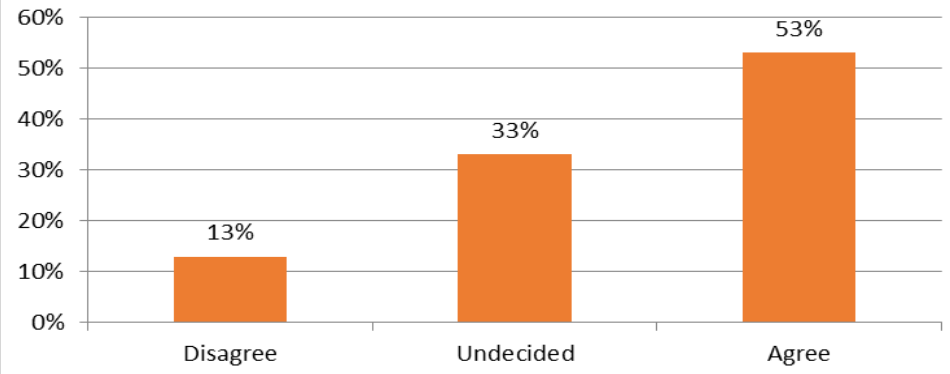
### ED Staff: The system works well, without static, delays in transmission, or limits of picture or audio



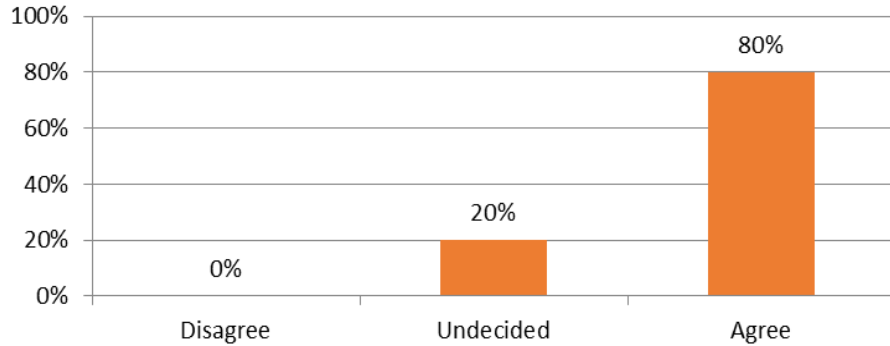
### ED Staff: I can do simple troubleshooting when the system does not work



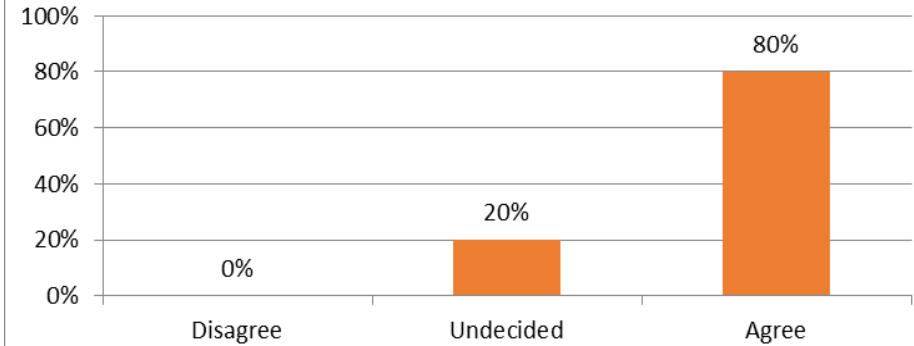
### ED Staff: The fax system of requesting the consultation is easy to use



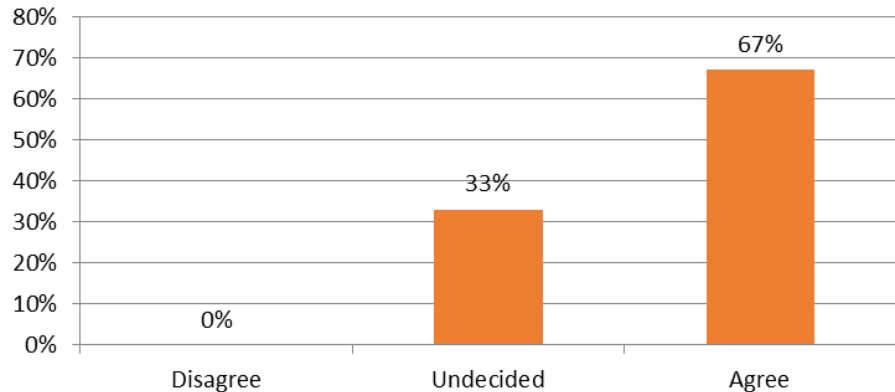
### ED Staff: Patients appear comfortable using the system to talk with the doctor



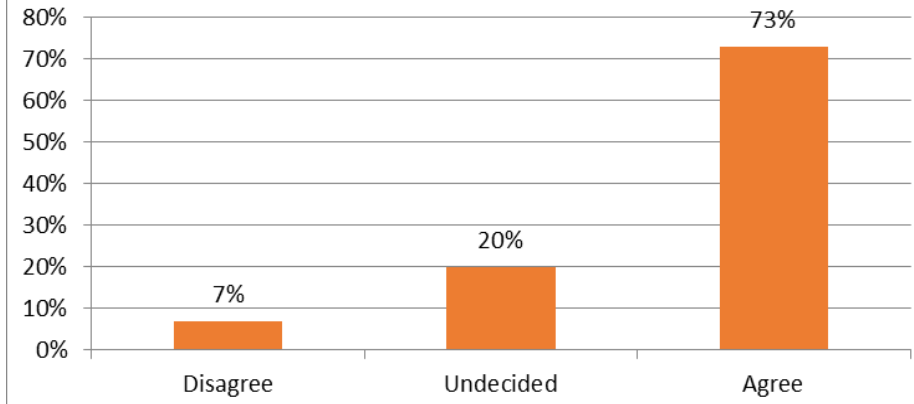
### ED Staff: Patients are generally cooperative during the telepsych consult



### ED Staff: I was comfortable being present during the telepsych consult

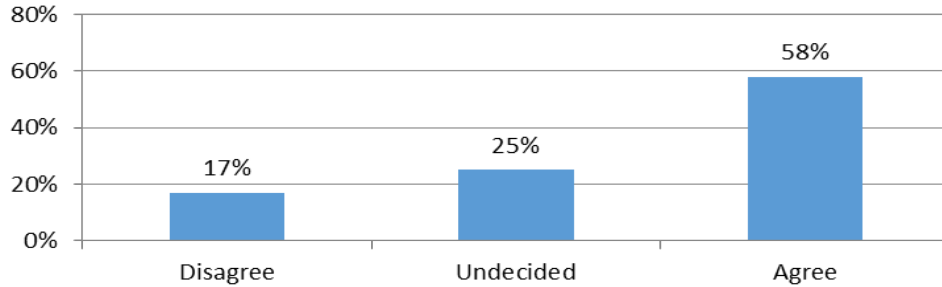


### ED Staff: Arrangement of equipment, patient, and/or staff is safe

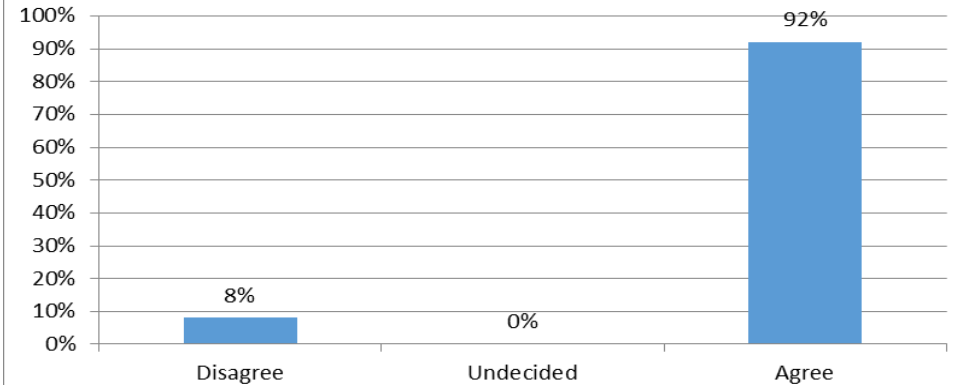


### ED DOC: Telepsych consults have improved the quality of care for mental health/substance abuse patients in the ED

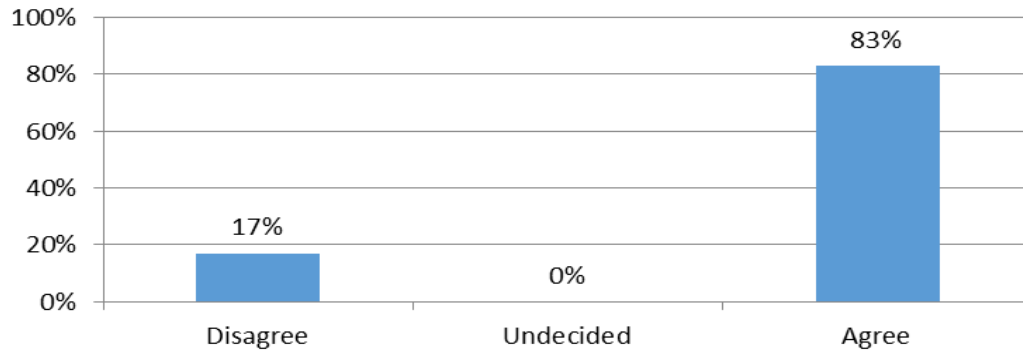
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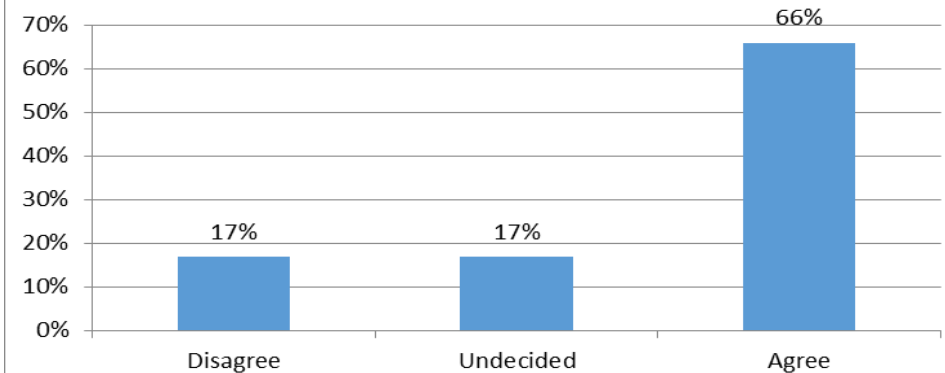
### ED DOC: Telepsychiatry consults are easy to obtain



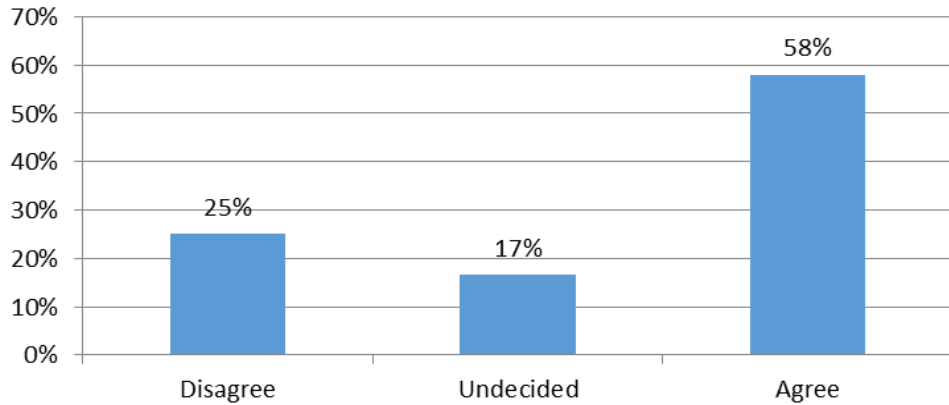
### ED DOC: Telepsychiatry equipment is easy to use and safely arranged



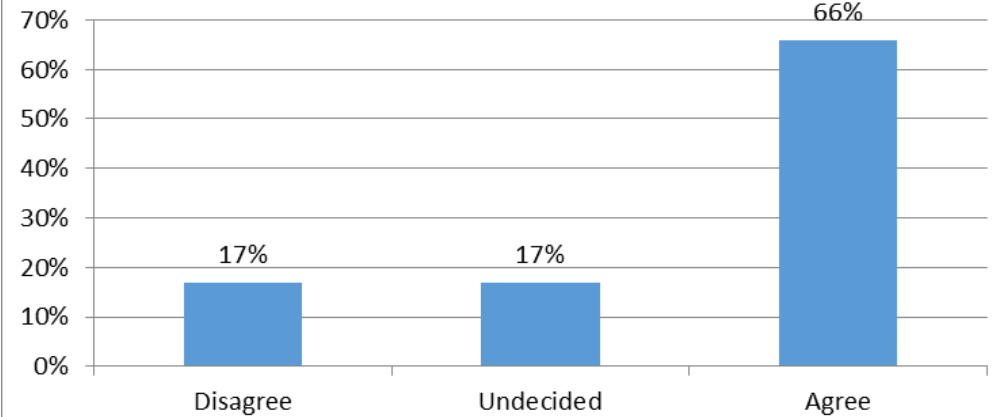
### ED DOC: Equipment is reliable and seldom down



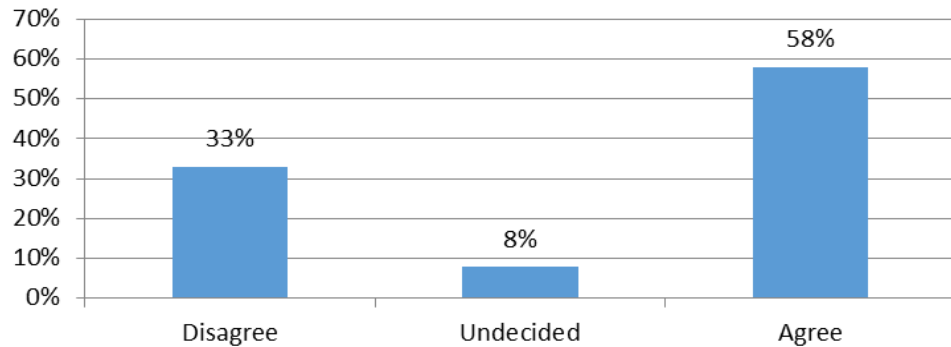
### ED DOC: Consultants respond quickly to telepsychiatry requests



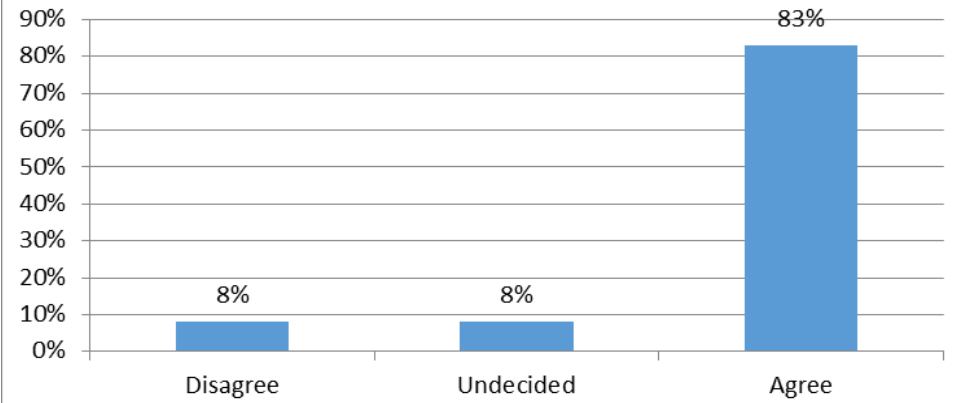
### ED DOC: Evaluations are complete and thorough



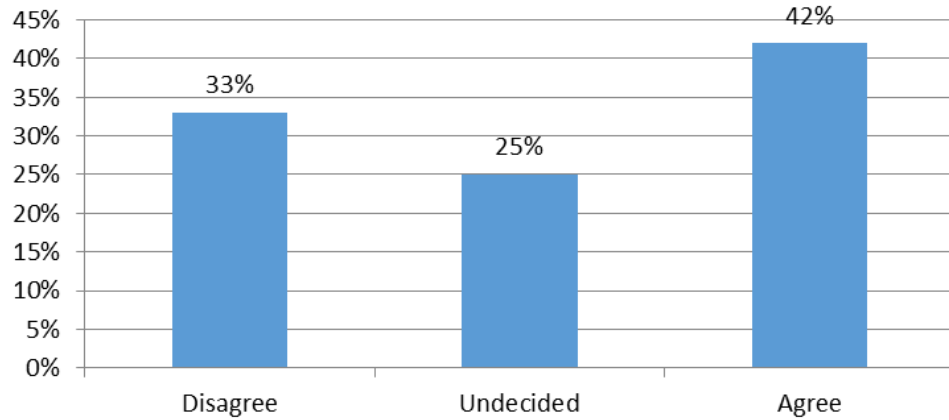
### ED DOC: Telepsych consult disposition recommendations are helpful



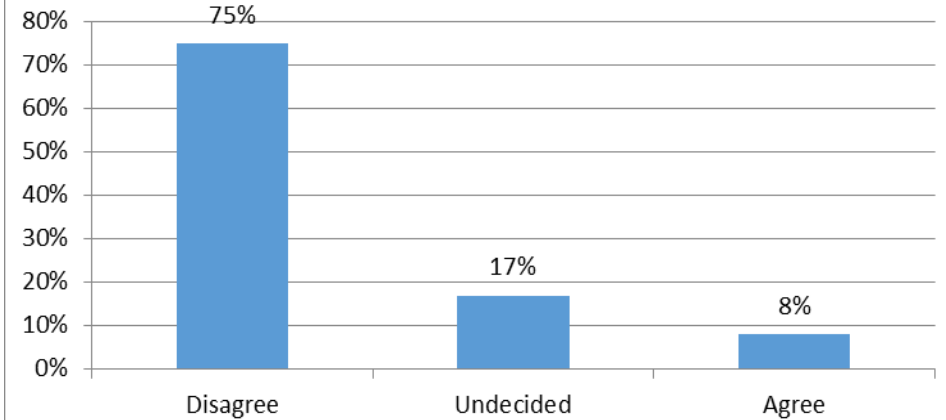
### ED DOC: Telepsych documentation is straightforward



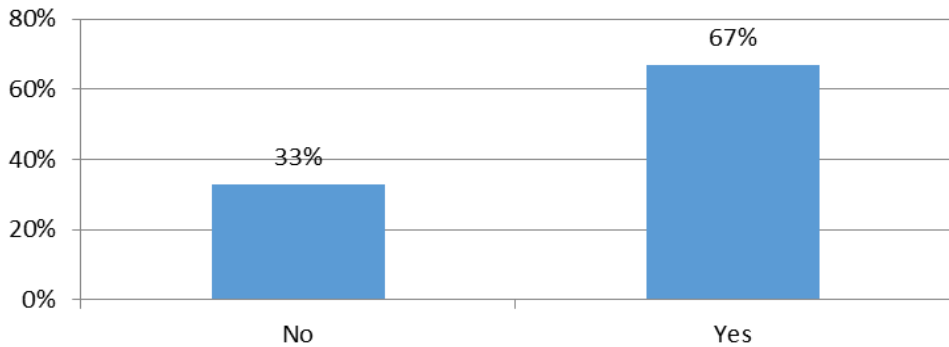
### ED DOC: Telepsych consults have improved workflow in the ED



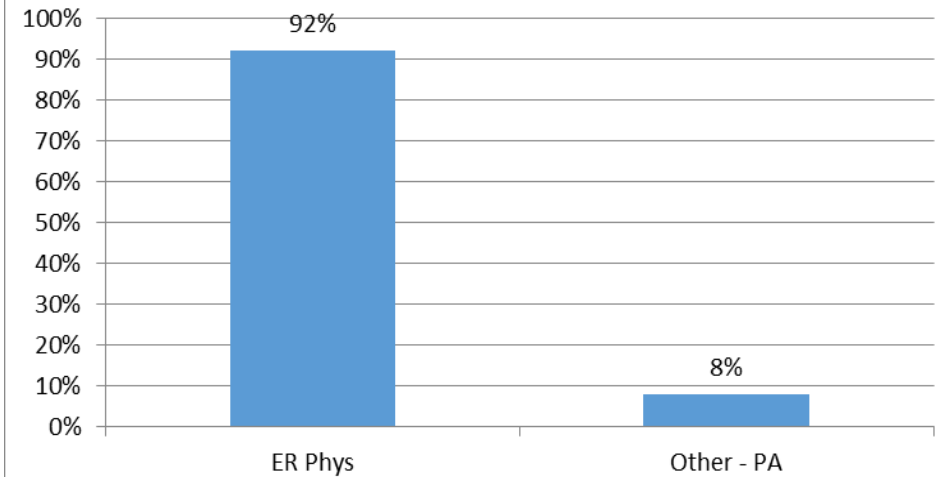
### ED DOC: As a result of telepsych I am more aware of community resources



### ED DOC: I have worked with telemedicine in some capacity before



### ED DOC: Who responded





# Program Outcomes Summary

- NC-STeP is either ahead of schedule or on time with all of the legislatively defined timelines.
- 57 hospitals in network
  - 40 hospitals currently live
  - 17 additional hospitals scheduled to go live within next two months
    - These hospitals have equipment and have already been trained, we are just waiting on credentialing.



# Program Outcomes Summary

- 1961 total Telepsychiatry Assessments were conducted under the program during this three month period (including both initial and follow-up assessments).
- The Median Length of Stay for all ED patients who received telepsychiatry services was 18.9 hours. Average Length of Stay was 30.3 hours.



# Program Outcomes Summary

- The Average Length of Stay for ED patients who received telepsychiatry services and were ultimately discharged to home was 22.8 hours. For patients who were transferred to another facility, it was 36.6 hours.
- 817 ED patients who received telepsychiatry services had an IVC in place during their ED stay. 153 of those patients did not have an IVC in place when they were discharged, or 18%.
- Of the ED patients who received telepsychiatry services, 48% were discharged to home. 44% were discharged to another facility.

