Telemedicine in Mental Health

GlobalMed
Transforming Healthcare Globally™
The healthcare professional conducting a mental health visit may be hundreds of miles away from the patient, but just as effective, thanks to proven technology.

**Mental Health Treatment Challenges**

From the beginning, talk therapy has been, and continues to be, the traditional method of diagnosing and treating psychological disorders. Unfortunately, the United States doesn’t have enough mental healthcare professionals to listen and analyze. According to the Henry J. Kaiser Family Foundation, only about 51% of the need is currently being met.

The shortage is becoming more acute as health professionals are encouraging people to seek treatment, and many more people now have health insurance due to the Affordable Care Act. A September 2014 assessment showed that 96.5 million Americans live in areas where there are not enough mental health providers to meet the need.

The Health Resources Services Administration (HRSA) says “mental disorders encompassing a broad range of conditions that include mood, anxiety and other disorders are extremely common in the United States.” In fact, the best estimates are that 50% of mental illness cases go undiagnosed or unaddressed, often because of the stigma attached to undergoing treatment.

**Telemental Health Solutions**

Technology’s involvement in mental health dates back more than a hundred years. The Psycograph phrenology machine was patented in 1905. Its developers claimed that the machine could analyze the shape of a patient’s head and provide personality characteristics. Although flawed science, it represents one of medicine’s first attempts to use technology in the mental health treatment.

More recently, psychiatrists and psychologists have employed live, real-time video and audio in what is called “telemental health” (TMH), making clinical care, monitoring and consultations...
available virtually anywhere there is connectivity to the Internet. TMH encompasses telepsychiatry, telepsychology and telebehavioral health. The 2013 Review, titled “The Effectiveness of Telemental Health,” found that it was effective for diagnosis and assessment across many populations and for disorders in many settings and “appears to be comparable to in-person care”\(^4\) The only previous such study considered telemental health effective in providing access, improving basic outcomes and being well-accepted.\(^5\)

The American Telemedicine Association first adopted “Practice Guidelines for Videoconferencing-Based Telemental Health”\(^6\) in October 2009. But the ATA was only following in the footsteps of the Veterans Administration which began its program earlier in the decade.

**Veteran’s Administration National Telemental Health Center**

Today, there are some 22 million Veterans. Millions of service members – both men and women - have been deployed in combat zones. According to the National Center for Telehealth & Technology\(^7\), as many as 25% of those placed in hazardous locations screen positive for mental health concerns, and an estimated ten percent have received a Traumatic Brain Injury. The VA has designated\(^8\) both as the “signature wounds of Operation Enduring Freedom/Operation Iraqi Freedom/Operation New Dawn.” As part of the Department of Defense Appropriations for FY 2009, the Department and the VA were directed by Congress to establish and use a web-based Clinical Mental Health Services Program as a way to deliver mental health services to veterans, service members and their families who live in rural areas.

Despite criticism that focuses on long waits, the VA has become a true leader in telehealth with the largest and most sophisticated program in the U.S. It has trained more than 4,000 mental Health providers in evidence-based psychotherapies for Post Traumatic Stress Disorder (PTSD) and other mental health conditions\(^9\), and has provided hundreds of thousands of consults. It has improved patient-facing and clinician-facing e-health systems by expanding the development and use of telemedicine at its 150 medical centers and 800 Community-based Outpatient Clinics (CBOCs). It is relying increasingly on telemental health to serve its beneficiaries because nearly half of the Veterans of Iraq and Afghanistan live in remote locations, such as tribal reservations and rural areas. In the past, a Veteran patient had to travel a great distance to a large city, or clinicians based in the medical centers drove thousands of miles to visit patients in rural communities.


Mark Ward, PhD, directs the Oregon Rural Mental Health Team at the Portland VA Center and says they are saving veterans time and money with proven telemedicine technology. “In 2012-2013, the team saved the state’s veterans enrolled in the program 1,088,148 miles of driving and the associated costs in gasoline.” Ward added that his team of six psychologists and 19 other full-time employees had a case load of 940 active cases in 2014.

The VA’s National Telemental Health Center provides Veterans with access to national experts in eight programs. These programs include: Bipolar Disorder, Behavioral Pain, Schizophrenia, Non-Epileptic Seizures and Insomnia treatment. Veterans access these remote experts through a referral from their local VA healthcare provider to the Center. They in turn contact the Veteran at a VA site close to the Veteran’s home with secure, videoconferencing technology.

Consistent with the VA’s mission to provide the right care in the right place at the right time is the

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extensive telehealth infrastructure that has been created in the past ten years “that not only meets the needs of our patients, but also the needs of providers, builds capacity and improves access”\textsuperscript{11}.

**Application of GlobalMed Solutions**

The VA began modeling its telemedicine program’s infrastructure on GlobalMed® solutions in the spring of 2009 when Veterans Integrated Service Network (VISN) 19 – known as the Rocky Mountain Network - first took delivery of five TotalExam™ examination cameras, followed by the first order of i8500™Mobile Telemedicine Stations. The telemedicine stations were placed in CBOCs in Colorado and Utah. In 2010, the VA made GlobalMed a major part of the largest rollout of telemedicine equipment in history. Since that time, GlobalMed has deployed equipment in some 2,000 VA locations.

Using an encrypted videoconferencing, telemedicine stations function well at the patient end for telemental health visits, but they are also utilized for consults with as many as 44 other specialties. Should there be a need for specialty care, clinic personnel can utilize the primary care medical devices that are integrated into the station and provide the information directly to the remote clinician. Recently, the VA began retrofitting the i8500 stations with audiology equipment so remote audiologists could test Veterans’ hearing and tune their hearing aids.

GlobalMed’s newer ClinicalAccess™ Station in its basic configuration with one monitor works well as a platform for telemental health in a clinic setting. The monitor and the tabletop can be raised or lowered independently to accommodate Veterans. GlobalMed’s EasyShare® is an encrypted videoconferencing codec that is not station specific, so a mental health provider can see patients at multiple locations while maintaining HIPAA compliance.

There is strong evidence that clinical assessments are just as reliable when done via telemedicine, and both patients and providers report high levels of satisfaction with remote consultations. A study published in the Maine Rural Health Research Center’s Research & Policy Brief says that “telemental health can address issues related to the location and distribution of specialty mental health providers and reduce patient and/or provider travel barriers.”\textsuperscript{12} The size and scope of the VA deployment shows how scalable GlobalMed solutions can be. And, it demonstrates the savings in time and money telemedicine can accrue by bringing telemental health to the patients in their home communities.

