Introduction to Telemental Health
This online introduction is intended to provide a general overview of telemental health (TMH).

- By the end of this introduction, participants will be familiar with:
  - Telemental Health Definitions
  - Telemental Health History & Benefits
  - Telemental Health Clinical and Non-Clinical Applications
  - T2 Resources and Contact Information
DEFINITIONS OF TELEHEALTH AND TELEMENTAL HEALTH
Telehealth

• Ensures that clinical care, medical education and monitoring, and provider consultations are available anytime, anywhere.

• It is often used interchangeably with telemedicine
Telemental Health

• TMH is a subset of telehealth that uses technology to provide mental health services from a distance.
• TMH includes terms such as telepsychology, telepsychiatry, and telebehavioral health.
Modes of TMH Care Delivery

- Delivery is typically broken down into 2 categories:
  - **Synchronous** – encompasses live, real-time interactive two-way communication (i.e. telephone or video teleconferencing technology).
  - **Asynchronous** – is the transmission of medical information that is not real time such as transmitting x-rays to a distant site to review at a later time.
Modes of TMH Care Delivery

• The focus of this introduction will be on the use of VTC technology to provide synchronous communication to connect mental health providers with patients at multiple locations.

• VTC receives the bulk of the attention but TMH also includes:
  – Store and forward, email, or other asynchronous communications
  – Plain Old Telephone Systems (POTS)
  – Home monitoring
  – Mobile phone
  – Future and other Innovative devices
HISTORY & BENEFITS OF TELEMENTAL HEALTH
Brief History of Telehealth

• The term *telemedicine* originated in the 1950’s when the first documented telemedicine consultation took place.

• Initial programs were generally pilots that were not fiscally sustainable.

• Technical and program revolutions have led to growth in sustainability and scientific evidence supporting TMH including recent guidelines and policy such as:

  – TRICARE Policy Manual 6010.54-M, August 1, 2002 (revised summer 2009), Chapter 7, Section 22.1, Telemental Health (TMH)/Telemedicine

  – American Telemedicine Association Practice Guidelines for Videoconferencing-Based Telemental Health (October 2009)

  – American Telemedicine Association Evidence-Based Practice for Telemental Health (July 2009)
Telehealth Benefits

• TMH can provide the following benefits:
  – Brings care to the patient
  – Increases access to care
  – Reduces travel time and costs
  – Improves satisfaction with the health care system
  – Reduces delays in care
  – Enables continuity of care
  – Re-conceptualizes the delivery of care
  – Reduces stigma
A Case for Telemental Health

- Over 2 million Service Members (SMs) have been deployed to combat zones.

- At times almost half of deployed are Activated Reserve Component (RC).

- An Estimated 87 million Americans live in Mental Health Provider Shortage Areas (HPSAs).

- HPSAs are heavily populated by RC.

- Up to 25% of SMs screen positive for Mental Health concerns and close to 200,000 SMs have received a Traumatic Brain Injury.

- Suicide rates across the Department of Defense have increased.

- Network referrals increased 241% from 2002 to 2009.
Congress expressed an interest in the provision of appropriate and accessible counseling of Service members and their families who live in rural locations.

- H.R. 2638 Department of Defense (DoD) Appropriations for Fiscal Year (FY) 2009 (p. 405) "...the Department is directed to establish and use a web-based Clinical Mental Health Services Program as a way to deliver critical clinical mental health services to service members and their families in rural areas."

- Demonstrates Nation’s commitment to providing for those who have sacrificed, regardless of location.

- Helps relieve burden from private sector health care systems and maintains connection to DoD.

- Utilizes health care delivery systems shown to be safe, effective, and desired.
TELEMENTAL HEALTH WORKS
Research Supports TMH

• Telemental health care delivered through interactive VTC has developed an empirical base supporting its use.

• Research studies indicate that telemental health is equivalent to face to face care in various settings and a useful alternative.
Evidence-Based Practice for Telemental Health

The American Telemedicine Associations (ATA) Telemental Health Special Interest Group has published two main guideline documents for the advancement of Telemental Health.

- **Evidence-Based Practice for Telemental Health (2009)**
  - Serves as consensus best practice reference based on the existing clinical empirical literature in VTC and Telemental Health.
  - Describes evidence for evaluations, ongoing mental health care, and use with special populations (incarcerated, children, elderly, military).

- **ATA’s Practice Guidelines for Videoconferencing-Based Telemental Health (2009)**
  - Describes clinical and non-clinical applications.
  - Discusses standard operating procedures.
  - Contains specific practice recommendations.
TELEMENTAL HEALTH
CLINICAL APPLICATIONS
TMH Clinical Applications

- TMH is used in a wide range of settings such as:
  - Outpatient Clinics
  - Hospitals
  - Correctional Facilities
  - Private Practitioner Offices
  - Schools
  - Nursing Homes
  - Military Treatment Facilities (MTFs)
Clinical Care

The clinical uses of TMH are as wide-ranging as those used in face-to-face care, and may include:

– Clinical interviews for mental status, initial evaluation, diagnostic formulation, and forensic evaluation.

– Various treatment modalities, such as individual therapy, group therapy, family therapy, marital therapy, medication management, and psycho-education.

– Psychological and neuropsychological testing.

– Soldier readiness processing (SRP) evaluations.

– Medical evaluation boards (MEBs).
Consultation and Case Management

- TMH encounters allow for provider to provider consultation.

- Mental health care often requires a multidisciplinary team approach to be most effective.

- TMH enables multidisciplinary teams to provide holistic care using the patient centered medical home concept – a team approach to establish consistent, long-term relationships between patients and a provider team.

- TMH allows each discipline to communicate in real time when at different physical locations.
Non-Clinical TMH Applications

- In addition to using TMH for delivery of clinical care, non-clinical applications allow mental health care providers to accomplish a variety of tasks without having to physically travel.

- Clinical Supervision
  - TMH allows supervisory clinicians to provide oversight of students at remote locations.
  - Using TMH in clinical supervision enables the supervision of multiple residents/interns at multiple locations.
Non-Clinical TMH Applications

• Administration: VTC provides for an effective means of allowing two-way audio-visual communication while eliminating the time, costs, and lost patient care time associated with traveling. Routine administrative meetings can be conducted with staff at multiple locations allowing for seamless communication between health care centers.
Non-Clinical TMH Applications

• Distance Education
• VTC allows providers a range of educational opportunities that is often easier to access than through traditional methods. VTC allows providers to:
  – Learn new practices and techniques in their respective fields.
  – Obtain additional professional training through mentoring with providers at different locations.
  – Complete required clinical continuing education credits.
  – Provide patient education.
Conclusion

• Proven Benefits:

  – Telemental health has established itself as an efficient and beneficial mode of mental health care delivery.

  – Its use and integration into ongoing operations continues to grow rapidly, both in the DoD and other governmental agencies, and in the private sector.

  – It is now considered an accepted form of health care delivery that can provide a range of benefits to patients and their families, providers, organizations, and society as a whole.