

Quality and Productivity Commission
30th Annual Productivity and Quality Awards Program
“Heritage of Excellence”

2016 APPLICATION

Title of Project (Limited to 50 characters, including spaces, using Arial 12 point font):

NAME OF PROJECT: DELIVERING MENTAL HEALTH SERVICES WITHOUT WALLS

DATE OF IMPLEMENTATION/ADOPTION: DECEMBER 2012
 (Must have been implemented at least one year - on or before July 1, 2015)


PROJECT STATUS: Ongoing One-time only

HAS YOUR DEPARTMENT PREVIOUSLY SUBMITTED THIS PROJECT? Yes No

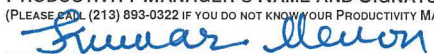
EXECUTIVE SUMMARY: *Describe the project in 15 lines or less using Arial 12 point font. State clearly and concisely what difference the project has made.*

1 Delivering mental health services to clients residing in remote geographical areas or
 2 who are elderly and homebound as a result of physical disabilities can prove difficult.
 3 Limited availability of psychiatrists at the Department of Mental Health (DMH) clinics in
 4 High Desert and Santa Clarita Valley meant clients residing in those areas had to travel
 5 60 miles or more round-trip to the closest alternate mental health facility. With DMH’s
 6 innovative urban telepsychiatry program, mental health clients and psychiatrists can
 7 now connect over these distances and mobility challenged patients can get services in
 8 the comfort of their own home. This represents a shift away from delivering services
 9 within the walls of mental health clinics. During the 2015 calendar year, approximately
 10 1000 unique clients obtained multiple services through this program. It has resulted in
 11 an estimated reduction of 64,000 driving miles, which translates to an annual reduction
 12 of 34 tons of greenhouse gas emissions. Mobility challenged elderly clients can be seen
 13 more efficiently and frequently by geriatric telepsychiatrists, resulting in improved quality
 14 of care. The urban telepsychiatry program is an innovative use of technology with
 15 substantial benefits that are consistent with the County’s Strategic Plan.

BENEFITS TO THE COUNTY

(1) ACTUAL/ESTIMATED ANNUAL COST AVOIDANCE	(2) ACTUAL/ESTIMATED ANNUAL COST SAVINGS	(3) ACTUAL/ESTIMATED ANNUAL REVENUE	(1) + (2) + (3) = TOTAL ANNUAL ACTUAL/ESTIMATED BENEFIT	SERVICE ENHANCEMENT PROJECT
\$	\$	\$	\$	

ANNUAL = 12 MONTHS ONLY

SUBMITTING DEPARTMENT NAME AND COMPLETE ADDRESS Los Angeles County Department of Mental Health 550 S. Vermont Avenue, Los Angeles, CA 90020	TELEPHONE NUMBER (213) 738-4258
PROGRAM MANAGER’S NAME Ricardo Mendoza, M.D.	TELEPHONE NUMBER (310) 781-3426 EMAIL rmendoza@dmh.lacounty.gov
PRODUCTIVITY MANAGER’S NAME AND SIGNATURE (PLEASE CALL (213) 893-0322 IF YOU DO NOT KNOW YOUR PRODUCTIVITY MANAGER’S NAME)  _____ Kumar Menon, MSPA	DATE 7/6/2016 TELEPHONE NUMBER (213) 738-4258 EMAIL kmenon@dmh.lacounty.gov
DEPARTMENT HEAD’S NAME AND SIGNATURE SIGNATURE ON FILE _____ Robin Kay, Ph.D.	DATE 7/11/2016 TELEPHONE NUMBER (213) 738-4108

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1st FACT SHEET – LIMITED TO 3 PAGES ONLY: Describe the **Challenge, Solution, and Benefits** of the project. State clearly and concisely what difference the project has made. Use Arial 12 point font

PROBLEM:

Los Angeles County (LAC) covers approximately 4800 contiguous mi.² and even includes Catalina Island which is 30 miles away by ocean ferry. LAC is home to an estimated 1.3 million people over the age of 65, many of whom are mobility challenged. LAC is also home to six out of the seven most congested freeways in America. This congestion accounts for an estimated 31 million hours of delay which annually translates to over \$1 trillion in lost wages and 11 million gallons of wasted fuel. In this challenging environment, the Department of Mental Health (DMH) must somehow find a way to deliver mental health services to those suffering with severe emotional problems.

The Antelope Valley, or High Desert, lies in the outermost northeastern area of LAC. Two large DMH clinics are located in the cities of Lancaster and Palmdale, as is the county's primary drug and alcohol treatment center, the Acton Antelope Valley Rehabilitation Center. For a variety of reasons, physicians have perennially found the High Desert a geographically undesirable area to live and work. As a result, DMH has struggled to recruit and retain qualified psychiatrists to serve High Desert residents. Similar problems have plagued the DMH clinic in Santa Clarita Valley as well as the town of Avalon on Catalina Island.

To highlight the problem, between May 2014 and April 2016 the High Desert clinics were only able to recruit one new permanent psychiatrist. Although 16 temporary psychiatrists, or locum tenens (LTs), were recruited to work in the area during that time period, this was entirely offset by the fact that 19 LTs terminated their employment in those clinics during the same stretch of time. Their average length of stay in the area was slightly less than six months. This constant coming and going of temporary psychiatrists strongly suggests discontinuous and fragmented mental health care.

In addition, DMH has also had to contend with logistical problems in providing services to other LAC populations. Catalina Island residents must travel by ferry to the mainland for mental health services, incurring at least \$72 for a round-trip ferry ride. This is inefficient and time-consuming and places an inordinate burden on island residents. DMH's GENESIS program was developed to provide services to older adults with disabling physical conditions rendering them unable to make clinic appointments. Prior to 2014, the program's one half-time geriatric psychiatrist needed

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to navigate LAC’s congested freeways in an effort to provide home visits to mobility-challenged elderly patients across the County. The time spent commuting severely limited the number of patients that could be seen utilizing this home visit model.

SOLUTION:

The urban telepsychiatry program represents DMH’s solution to the profound resource gaps encountered in its directly operated clinics, to ease accessibility to remote locations and to enhance the efficiency of the GENESIS program. This solution leverages the power of technology and the Internet to connect a mental health client and a mental health professional though they are separated by distance from each other. The basis of this program, namely the use of video teleconferencing in delivering health services, has been shown to be effective across a wide age range and a broad diagnostic spectrum with high patient satisfaction. After a successful pilot at its Lancaster clinic, DMH established a permanent TeleHub in late December 2012. Located in the South Bay next to an academic medical center and close to the beach, the TeleHub offered a work location for telepsychiatrists in a highly sought-after area to both live and work. Four TeleHub psychiatrists actively serve clients in the High Desert and Santa Clarita Valley.

The GENESIS program fully embraced the solution and launched telepsychiatry services in 2014 to increase efficiency. Approximately 30 staff are now equipped with laptop computers that have high quality HD cameras and wireless air cards to capture cell tower signal strength. Staff members travel to the homes of the mobility challenged elderly while the geriatric psychiatrist is stationary. Staff then establish a wireless communication with the geriatric psychiatrist utilizing the lightweight laptop.

BENEFITS:

Improved Access to Care: Approximately 1000 unique clients were seen utilizing the videoconferencing format during the 2015 calendar year. The vast majority of these clients reside in the High Desert and Santa Clarita clinics – approximately 725. Client satisfaction is extremely high likely because the only other option available is no care. Almost 50 of these clients have been receiving services since 2008. One of the TeleHub psychiatrists is Spanish-speaking and over 70 of her clients speak only Spanish. The urban telepsychiatry program has enhanced access to culturally competent care in these impoverished service areas and in doing so diminished risk. It represents an innovative use of technology to solve an urban service delivery problem. This is consistent with LAC’s Strategic Plan, Goal 1, Strategic Initiatives 2 and 4.

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LINKAGE TO THE COUNTY STRATEGIC PLAN (DETAIL IS REQUIRED FOR COUNTY DEPARTMENTS): Use Arial 12 point font

Improved Quality of Care: During the 2015 calendar year, 23 GENESIS clients began receiving telepsychiatry services. This number has grown to 34 in the last five months. It is estimated that the program has doubled the frequency of the follow-up visits these clients have with the geriatric psychiatrist. Freed up from having to navigate Los Angeles traffic, the geriatric psychiatrist is able to see these clients more often and therefore provide better quality of care. Results from the GENESIS program efforts are also in keeping with LAC's Strategic Plan, Goal 1, Strategic Initiatives 2 and 4.

Reduced Environmental Impact: If clients living in Santa Clara, Lancaster, Palmdale and surrounding areas are unable to obtain timely services for lack of on-site psychiatrists, they have to seek services at the Olive View Urgent Care Center (UCC), which is the closest alternate mental health facility. For many, the trip to the UCC could represent a round-trip of 60 miles or more. This not only places an enormous burden on clients and their families, but also on our ecosystem because of the associated carbon emissions. Based on demographic and service records of the High Desert clients who received telepsychiatry services in 2015 calendar year, it is estimated that on aggregate 64,101 driving miles were avoided as a result of the urban telepsychiatry program. This equates to an estimated avoidance of 34 tons of greenhouse CO2 gases (average car with average mpg). This number reflects the data from the High Desert clinics alone. Additional reductions were likely realized from the efforts of the GENESIS program. These benefits represent environmentally sustainable practices and are consistent with the LAC Strategic Plan, Goal 2, Strategic Initiative 5.

In summary, the DMH urban telepsychiatry program represents an innovative use of video teleconferencing technologies in a large metropolitan area. The telepsychiatry program has enhanced access to mental health care, improved linguistically matched care, and increased satisfaction among clients in the High Desert and the Santa Clarita Valley, as well as increased the frequency in the monitoring of our mobility challenged elderly. Workflow efficiencies have been realized and the programs are eco-friendly producing a significant reduction in greenhouse gas emissions on an annual basis.

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COST AVOIDANCE, COST SAVINGS, AND REVENUE GENERATED (ESTIMATED BENEFITS TO THE COUNTY): If you are claiming cost benefits, include a calculation on this page. You must include an explanation of the County cost savings, cost avoidance or new revenue that matches the numbers in the box. Remember to keep your supporting documentation. Use Arial 12 point font

Cost Avoidance: Costs that are eliminated or not incurred as a result of program outcomes.

Cost Savings: A reduction or lessening of expenditures as a result of program outcomes.

Revenue: Increases in existing revenue streams or new revenue sources to the County as a result of program outcomes.

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\$	\$	\$	\$	<input checked="" type="checkbox"/>

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