



telepsychiatry services and thereby improve timely access to psychiatry services and maximize efficient use of existing DCHS psychiatric resources; and

- 2) Authorize the City Manager to execute all necessary documents that may be required.

**BACKGROUND:** On January 16, 2015, DCHS staff was notified of the re-issuance of a Request for Applications involving a funding opportunity from the Virginia Department of Behavioral Health and Developmental Services for Community Services Boards to purchase equipment and pay for annual service fees in order to implement telepsychiatry services. Because telepsychiatry has traditionally been utilized in rural settings, Northern Virginia jurisdictions initially did not intend to apply for these funds. However, at a regional meeting on January 23, 2015, Alexandria and its four Northern Virginia counterparts re-evaluated the opportunity and each decided to apply. Applications for this funding were due February 4, 2015. Because of the late notification of the funding availability, this item could not be docketed for Council consideration prior to the application submission date. The Department did receive permission from the City Manager's Office to submit the funding application pending formal City Council approval.

Telepsychiatry (or telemedicine) is the practice of using video-conferencing technology in the evaluation and treatment of adults and children referred for clinical evaluations, diagnosis, treatment, triaging and monitoring, including the prescription of medication by a psychiatrist. Telepsychiatry allows the practitioner to connect and interact with a patient even if the parties are not geographically close and can make it easier for psychiatrists to treat patients by eliminating the need for either party to travel. Telepsychiatry has traditionally been utilized in rural areas where there is limited access to psychiatrists due to geographic distance and lack of available providers. Increasingly telepsychiatry is being adopted in urban areas with a number of benefits including: improved ability to respond to clients in crisis; improved access to services; reduced waitlists; and increased flexibility in scheduling, making it more convenient for providers and clients.

This funding proposal requires no matching funds and there is no requirement for an ongoing funding commitment. The funding proposal does not increase the number of budgeted FTEs. The proposal includes the one time purchase of video-conferencing technology equipment in FY 2015 as well as funding for annual service fees in FY 2015 (part year) and FY 2016. Existing DCHS staff will be responsible for implementing the telepsychiatry services. The Virginia General Assembly has appropriated funds for the proposed purpose through FY 2016. DCHS expects that the availability of telepsychiatry will improve recruitment and retention of psychiatrists, improve efficiency of psychiatric service delivery and improve access to services for target populations.

**DISCUSSION:** Alexandria currently has 4.5 FTEs budgeted psychiatrists to serve all adult, geriatric, child and adolescent clients. DCHS has historically had significant problems in keeping the unit fully staffed. Problems in recruitment and retention of qualified psychiatrists result in lengthy waitlists, limitations on client choice of provider, and constraints in crisis response capacity. There are currently over 53 clients on the waiting list for psychiatric services due to ongoing staff psychiatrist vacancies. While the funding proposal does not add to the total number of budgeted psychiatry hours, the Department believes that telepsychiatry will allow flexibility of scheduling and the elimination of travel time, which will address problems with recruitment and retention by attracting more psychiatrists and expanding the potential pool of providers who might be outside of the immediate geographic area.

In addition to enhancing DCHS's overall ability to attract and retain staff psychiatrists, implementation of telepsychiatry will target unmet client needs in five specific areas: 1) Services to clients who, due to their health and or mental health conditions, have difficulty accessing office-based care; 2) Services to clients in the Coordinated Specialty Care grant program where psychiatric services will be delivered by community-based

providers; 3) Services to insured children and adolescents who have limited local availability of psychiatric providers; 4) Services to clients in the Alexandria Detention Center; and 5) Services for clients at other program sites through more efficient use of existing psychiatric hours.

**FISCAL IMPACT:** This funding proposal requests from the state:

- 1) \$21,240 in FY 15 for the purchase of laptop computers, cameras and microphones in addition to a web-based telepsychiatry platform and wireless internet connection fees.
- 2) \$13,440 in FY 16 for ongoing monthly fees for wireless internet connections and access to the web-based telepsychiatry platform.

The funding proposal requires no matching funds and there is no requirement for an ongoing funding commitment. If awarded these funds, DCHS will evaluate the outcomes of implementing telepsychiatry. Once any awarded funds are expended and if funding is not renewed, DCHS will determine if the outcomes warrant continuation of telepsychiatry services and whether or not to reallocate budgeted funds to continue operation of telepsychiatry.

**ATTACHMENT:** None

**STAFF:**

Debra Collins, Deputy City Manager

Kate Garvey, Director, Department of Community and Human Services

Carol Layer, Director, Center for Adult Services, DCHS