

Using TeleHealth to Improve Geriatric Depression Treatment in Home Health Care

Suzanne Brown, BSN, RN

Telehealth Program Manager,
Visiting Nurse Services Of Westchester, Westchester, NY

Patricia F. Donehower, MSN, RN

Vice President for Clinical Services,
Visiting Nurse Association of Chittenden and Grand Isle Counties, VT

Elizabeth Ellsworth, BA

Director of Program Development,
United Home Care Services, Inc., Miami FL

Thomas Sheeran, PhD, ME

Assistant Professor, Brown Medical School, RI
Adjunct Assistant Professor, Weill Cornell Medical College, NY

1

Learning Objectives

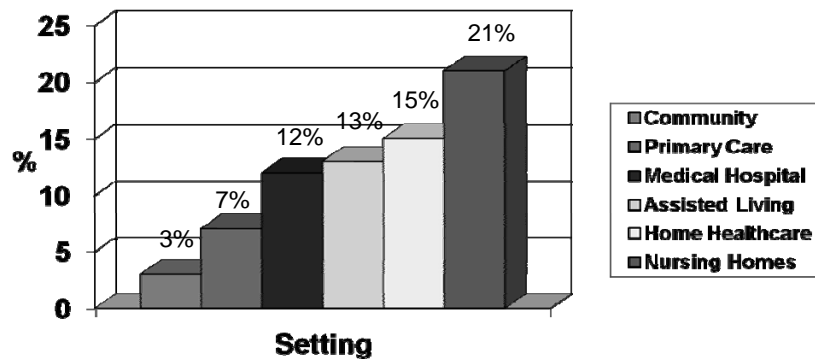
At the end of the presentation, you should be able to:

- Describe why Depression Care Management is important
- Understand how Telehealth can be used as an innovative approach to providing Depression Care Management in the home
- Describe a Telehealth Depression Care Pilot Study, understanding benefits and challenges

2

Depression in Older Adults

Prevalence in Home Health



Bruce, et al. (2002)
Unutzer, et al. (1996)

3

Depression in Older Adults

Impact on Prognosis & Outcomes

- Adverse Events and Disease Outcomes
 - Fall, Injury, Hospitalization
 - Cancer
 - MI

- Increased Mortality Rates
 - Cancer
 - MI
 - Suicide

4

Depression in Older Adults

Depression Screening on OASIS-C

(M1730) **Depression Screening:** Has the patient been screened for depression, using a standardized depression screening tool?

- 0 - No
- 1 - Yes, patient was screened using the PHQ-2® scale. (Instructions for this two-question tool: Ask patient: "Over the last two weeks, how often have you been bothered by any of the following problems?")

PHQ-2®	Not at all 0 - 1 day	Several days 2 - 6 days	More than half of the days 7 - 11 days	Nearly every day 12 - 14 days	N/A Unable to respond
a) Little interest or pleasure in doing things	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> na
b) Feeling down, depressed, or hopeless?	<input type="checkbox"/> 0	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> na

- 2 - Yes, with a different standardized assessment-and the patient meets criteria for further evaluation for depression.
- 3 - Yes, patient was screened with a different standardized assessment-and the patient does not meet criteria for further evaluation for depression.

*Copyright© Pfizer Inc. All rights reserved. Reproduced with permission.

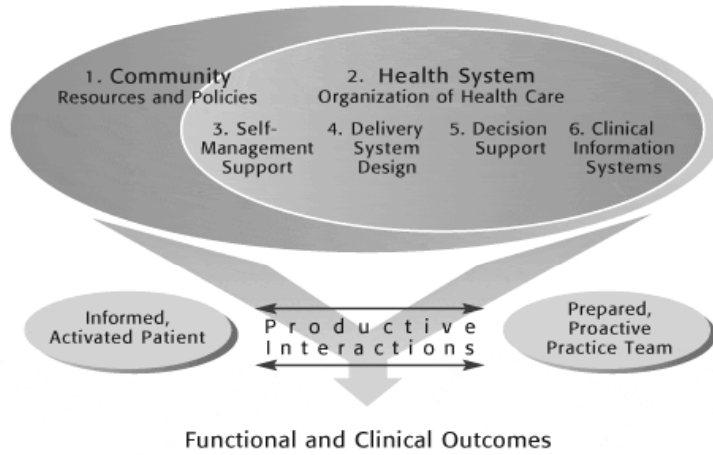
Depression in Older Adults

Shortage of Resources Currently Available

- **Current Workforce:**
 - 2,400 Geriatric Psychiatrists
 - 200-700 Geriatric Psychologists
 - 500 Psychiatric Nurses
- **Estimated Current Need:**
 - 5,000 + of each specialty

Depression in Older Adults

Chronic Care Model for Disease Management



7

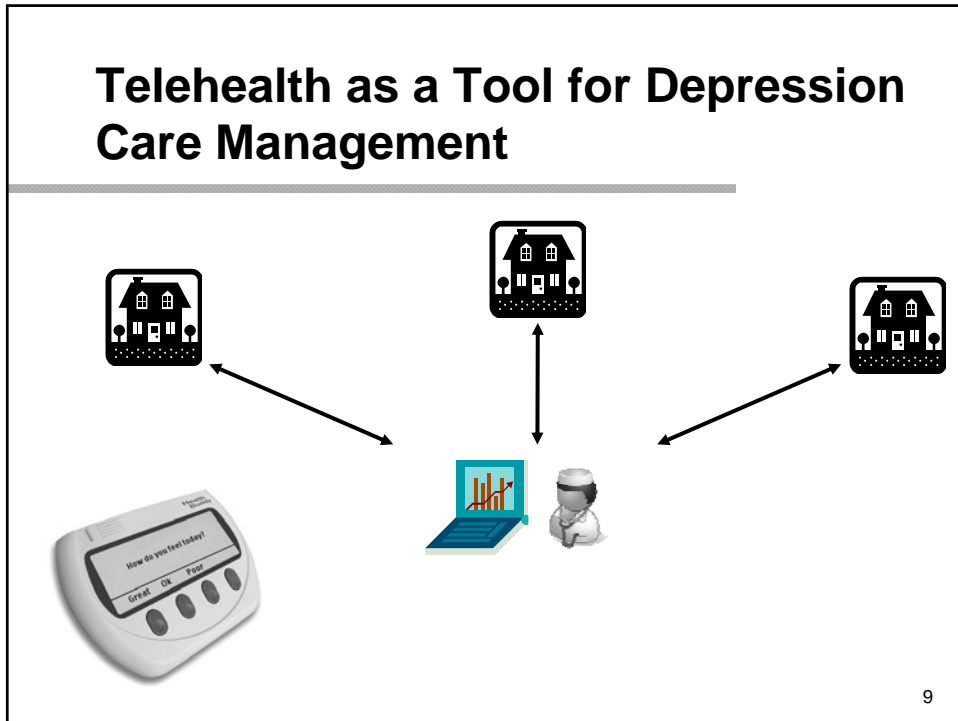
Depression in Older Adults

Chronic Care Model for Depression Care Management

Task	How
1. Symptom assessment and tracking.	- Depression monitored during routine office visits.
2. Treatment monitoring (dose, adherence, side effects).	- Patient interview during routine office visits.
3. Patient education and activation.	- Education material and activation during office visits.
4. Consultation with mental health specialist and/or PCP	- On-site consultation. Phone and fax consults with MH professional off-site.
* <i>Depression Care Manager is a trained nurse, social worker or other office professional.</i>	

8

Telehealth as a Tool for Depression Care Management



9

Telehealth as a Tool for Depression Care Management

Task	How
1. Symptom assessment and tracking.	-Screen administered via monitor. -Assessment via telephone.
2. Treatment monitoring (dose, adherence, side effects).	-Telemonitor items. -Interview via telephone.
3. Patient education and activation.	-Basic education via telemonitor. -Education/goal setting during calls.
4. Consultation with mental health specialist and/or PCP	- Phone and fax communication with PCP and/or MH professionals.
* Telehealth nurse is provided training and support as the Depression Care Manager.	

10

Telehealth as a Tool for Depression Care Management

The Telemonitor Questions

- **Organized Around:**
 - ASSESS
 - Key symptoms
 - Treatment adherence and Side Effects
 - EDUCATE
 - Depression as an illness
 - Treatment (medication and behavioral)

11

Telehealth as a Tool for Depression Care Management

The Monitor is Only Part of the Protocol

- Training and booster sessions
- Supervision
- Ongoing support
- Mental health resources (agency & community)
- Suicide risk assessment and procedures
- Referral procedures
- Care coordination procedures (patient, telehealth nurse, visiting nurse, PCP, mental health professional)

12

Telehealth as a tool for Depression Management

Tele-psychiatry Consult



13

Telehealth Depression Management Pilot Study

Study Design Locations



14

Telehealth Depression Management Pilot Study

Study Design

- Feasibility Pilot
- No Control Group or Randomization
- Patient Eligibility

15

Telehealth Depression Management Pilot Study

Project Objective

- Intent
- Hypothesis
- Desired Outcomes

16

Telehealth Depression Management Pilot Study Results

Project Data	VNSW	VNA	UHCS	
	Westchester, NY	Colchester, VT	Miami, FL	
	Goal	30	30	15
Number of Referred (with Patient Consent)	27	37	21	85
Number WHO Declined Participation	7	22	3	32
Number Admitted	20	15	16	51
Number Discharged	20	10	16	46
Number Admitted but Unable to Complete the Project	0	5	0	5
Number Participating in Web Cam Interview with a Psychiatrist	1	5	n/a	6
Number not Eligible after consent (i.e., did not score high enough)			2	2

VNSW - 100% referred to the TeleHealth program consented, 26% declined, 74% admitted to study, 100% completed/discharged
0% unable to complete, 4% agreed to a webcam interview

VNA - 60% of total referrals did not participate, 60% declined, 40% admitted to study, 66% completed/discharged,
33% unable to complete, 50% agreed to webcam interview

UHCS- 23.8% of total referrals did not participate, 14% declined, 76% admitted to study, 100% completed/discharged,
no web cam available

17

Telehealth Depression Management Pilot Study Patient Characteristics

Characteristic	N	%
Gender		
Female	30	62
Male	18	41
Race/Ethnicity		
White	39	81
African American	6	13
Native American	2	4
Hispanic	13	27
Other	1	2
Primary Language		
English	35	73
Spanish	13	27
Marital Status		
Married	14	29
Widowed	22	46
Separated/Divorced	10	21
Never Married	2	4

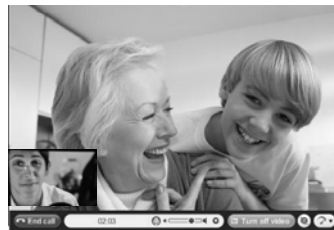
18

Telehealth Depression Management Pilot Study Patient Characteristics & Depression Status

Characteristic	n	%	Mn (SD)
Education			
Less than HS	19	40	
HS Graduate/Some College	19	40	
College Graduate	10	21	
Living Circumstances			
Alone	23	48	
With Spouse/Partner	16	33	
With Others	9	19	
Age (yrs): range=66-98			76.2 (7.7)
Cognitive Status (MMSE Score)			26.8 (2.6)
Depression Status			
Endorsed Depressed Mood and/or Anhedonia	29	60	
DSM-IV Major Depression	19	40	
HDRS for Full Sample (n=48; HDRS score range = 1-32)			15 (8.1)
HDRS for Depressed (SCID) Sample (n=19; HDRS range=14-32)			21.4 (5.1)
Pre and Post HDRS Scores Among Depressed (SCID) Sample (n=16):			
<ul style="list-style-type: none"> Pre HDRS=20.9 ± 5.0; Post HDRS=14.3 ± 10.2 [F(1,15)=12.1, p=.003] 			

19

Telehealth as a tool for Depression Management Tele-psychiatry Consult?



20

Telehealth Depression Management Pilot Study

Outcomes

- Satisfied or Very Satisfied: 83%
- Comfort with Equipment: 84%
- Few Technical Problems: 72%
- It Improved Depression Care: 58%
- Would be Willing to Use Again: 82%
- Felt Confidentiality Maintained: 94%

21

Telehealth Depression Management Pilot Study

Challenges

- Recruitment of participating agencies
- Project timeline – intended and actual
- Recruitment of subjects
- Identification of eligible candidates
- Involvement/training of agency staff
- Technology issues
- Subject responses

22

Telehealth Depression Management Pilot Study

Patient Satisfaction & Comments

Patient Responses to Depression TeleCare Protocol and Telemonitor

"I got comfortable using it the first or second time."

"At the beginning it helped me very much because I was very depressed. As time went on and I started feeling better, I needed it less."

"It was easier to be more honest about my feelings with the monitor."

"It was easier to discuss things with the nurse after I used the monitor."

23

Recommendations for Future Study

- Update consent forms.
- Role of project lead.
- Process improvement:
 - Buy-in.
 - Care plans for the telehealth nurse.
 - Case conferences (telehealth, visiting nurses, other professionals)

24

Summary

- Depression care management is important
- Telehealth holds great promise for increasing access to high quality depression care
 - Treatment compliance/outcomes
 - Adverse events (falls/hospitalization)
 - Reduced suffering, improved QOL
- Home Health agencies can play a vital role

25

Question and Answers

26