

Abstract

Introduction

Methods

Results 1

Results 2

Conclusion

Please use the headings above to navigate through the different sections of the poster



Fred J. Pasquarella, M.A.
Director, Research & Evaluation

Abstract

Background: The COVID-19 pandemic has led to increased adoption of Telemental Health (TMH) services. Understanding the decision-making process behind TMH service delivery is vital for navigating the evolving mental healthcare landscape. Research indicates that no specific client subgroup would be harmed by TMH services, allowing providers to make decisions about service modality. However, best practices involve a comprehensive assessment of client suitability, considering factors like preferences, technological literacy, and clinical risk. This study was part of an internal program evaluation at a large community mental health (CMH) organization in Southern California and its aim was to inform organizational leadership on the sustainability of TMH services post-pandemic. Specifically, this study examined provider perceptions and decision-making processes, with a focus on alignment with emerging best practices.

Methods: The research involved collaboration with organizational stakeholders to develop a survey for direct service providers to evaluate their current practices, preferences, and perceptions of TMH (video and telephone-based). The survey assessed several factors influencing service delivery modality (TMH, field-based, and clinic-based), including client and provider preferences, perceptions of TMH effectiveness, barriers and facilitators, technology access, and risk considerations. The survey was administered online to mental health and substance use therapists, counselors, and clinical supervisors (N = 155) between April and June 2023. It had a response rate of 52% (n = 81).

Results: Providers reported considerable variability in client's and personal preference for TMH, but both preferred a hybrid between TMH and in-person. When determining service delivery mode, providers prioritized client-related factors, with 90% of them ranking factors such as client accessibility and preference as top considerations. Additionally, 80% of providers received support for service mode decision-making from their clinical supervisors. While 95% of providers believed video-based TMH could address client needs appropriately, confidence in phone-based TMH was lower at 42%. Phone-based was seen as the least effective across modalities and service types, except collateral sessions. In-person sessions were perceived as the most effective, especially for crisis intervention. Video-based sessions were thought to be effective across many types of service, especially for individual therapy for adults and teens but not for individual therapy for children.

Implications: The study highlights several key implications for CMH organizations. First, it underscores the importance of prioritizing client needs and considerations over personal preferences when determining the mode of service delivery, whether in-person or through TMH. This client-centered approach is crucial for ensuring effective and accessible mental health care. Second, the study reveals positive attitudes among providers towards TMH, with many believing it can enhance access to care and appropriately address client needs, particularly through video-based platforms. Such positive perceptions are vital for maintaining confidence in TMH and its continued use, which may lead to better client outcomes. Lastly, the study offers insights into the perceived effectiveness of different services and modalities. Overall, the results may be used to develop best practices around decision making and structure of services under a hybrid model of care.

Abstract

Introduction

Methods

Results 1

Results 2

Conclusion

Please use the headings above to navigate through the different sections of the poster

Introduction

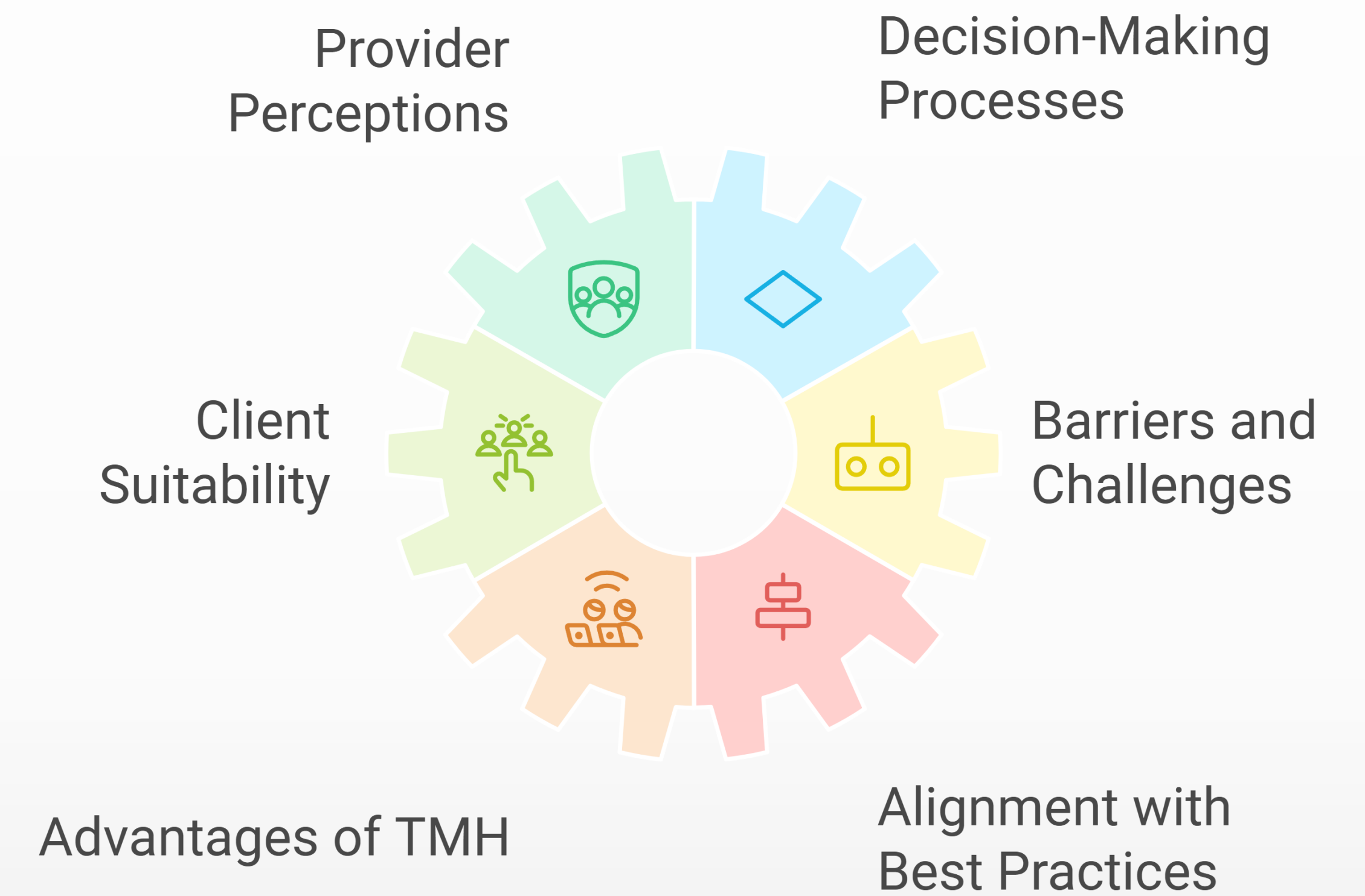
The COVID-19 pandemic has fundamentally changed the way mental health services are delivered. With the rapid transition to remote services, including Telemental Health (TMH), healthcare providers were forced to adapt to new technologies and service delivery modalities. Initially, there were several challenges associated with adopting remote services, such as technological limitations, reimbursement issues, and clinician reluctance. However, as the pandemic continued, TMH proved to be a viable solution, improving access to care for many clients.

Research has shown that TMH can be as effective as in-person services in many cases, with advantages for clients who face barriers such as transportation or scheduling conflicts. Despite these advantages, there are still concerns about its applicability for certain client populations, including those with high-risk behaviors or severe symptoms. As TMH becomes an integral part of mental health care, understanding the decision-making process behind selecting service delivery modes (i.e., TMH vs. in-person services) is critical for ensuring high-quality care.

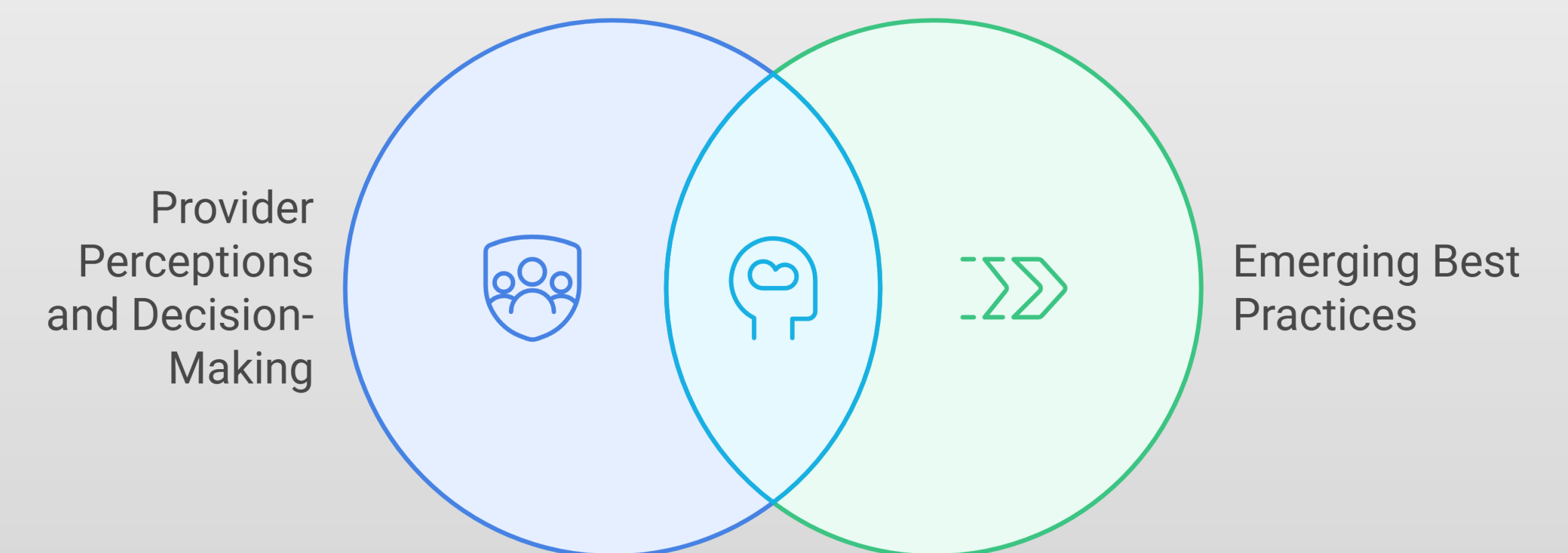
This study explored provider perceptions and decision-making regarding TMH at a large community mental health organization in Southern California, focusing on how providers assess client suitability for TMH and align their practices with emerging best practices. The findings aim to inform organizational leadership on the sustainability of TMH services post-pandemic. The research sought to answer these questions:

1. Which client and agency factors do providers consider when determining service delivery modality (TMH vs. in-person)?
2. What are providers' preferences and perceptions regarding the effectiveness of TMH, particularly web-based video and phone-based modalities, compared to in-person services?
3. To what extent do these factors align with emerging best practices and guidelines for TMH?

Understanding Telemental Health Adoption



Aligning Provider Practices with Best Practices



Abstract

Introduction

Methods

Results 1

Results 2

Conclusion

Please use the headings above to navigate through the different sections of the poster

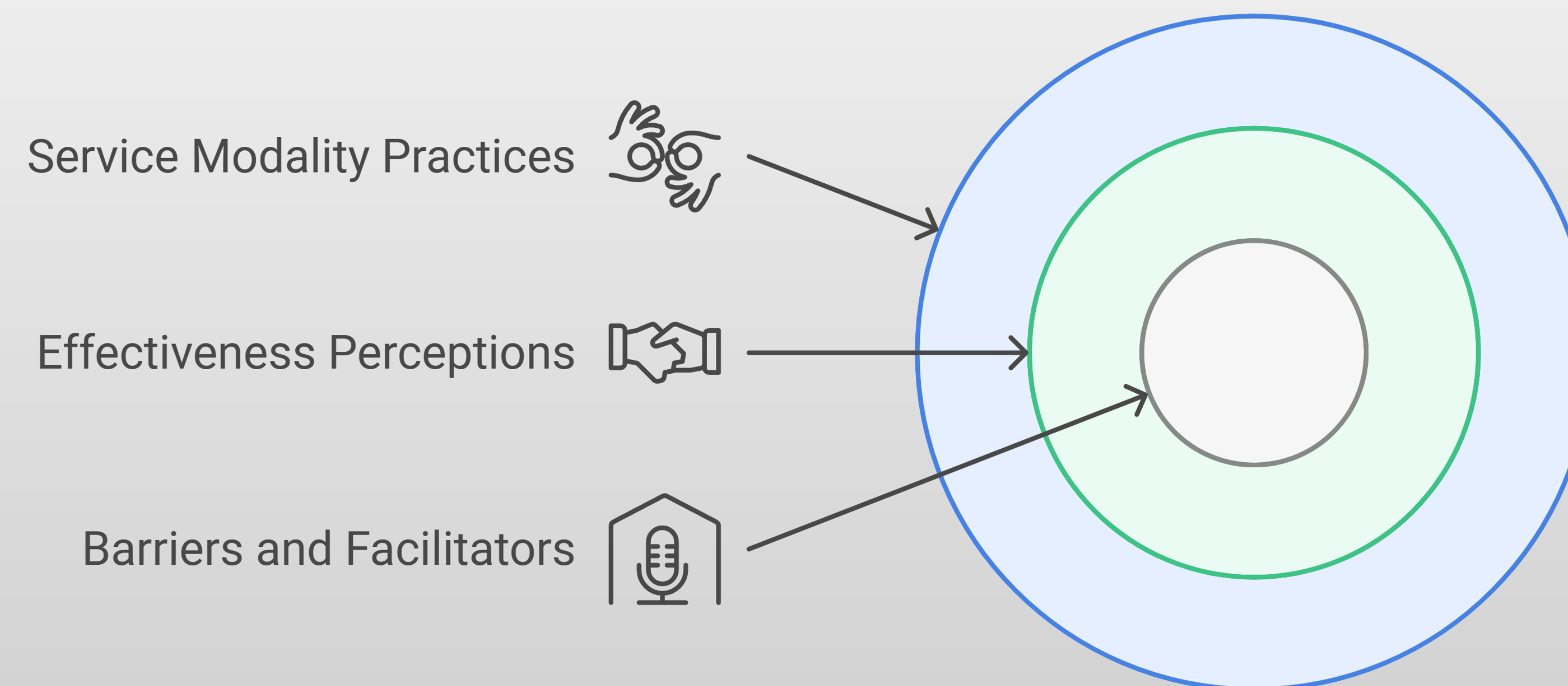
Methods

The research was conducted as part of an internal program evaluation at a community mental health (CMH) organization. A survey was developed in collaboration with organizational stakeholders to assess current provider practices, preferences, and perceptions related to TMH. The survey gathered data on several key factors that influence decisions about service delivery modality, including client and provider preferences, perceptions of TMH effectiveness, barriers and facilitators, access to technology, and client risk factors.

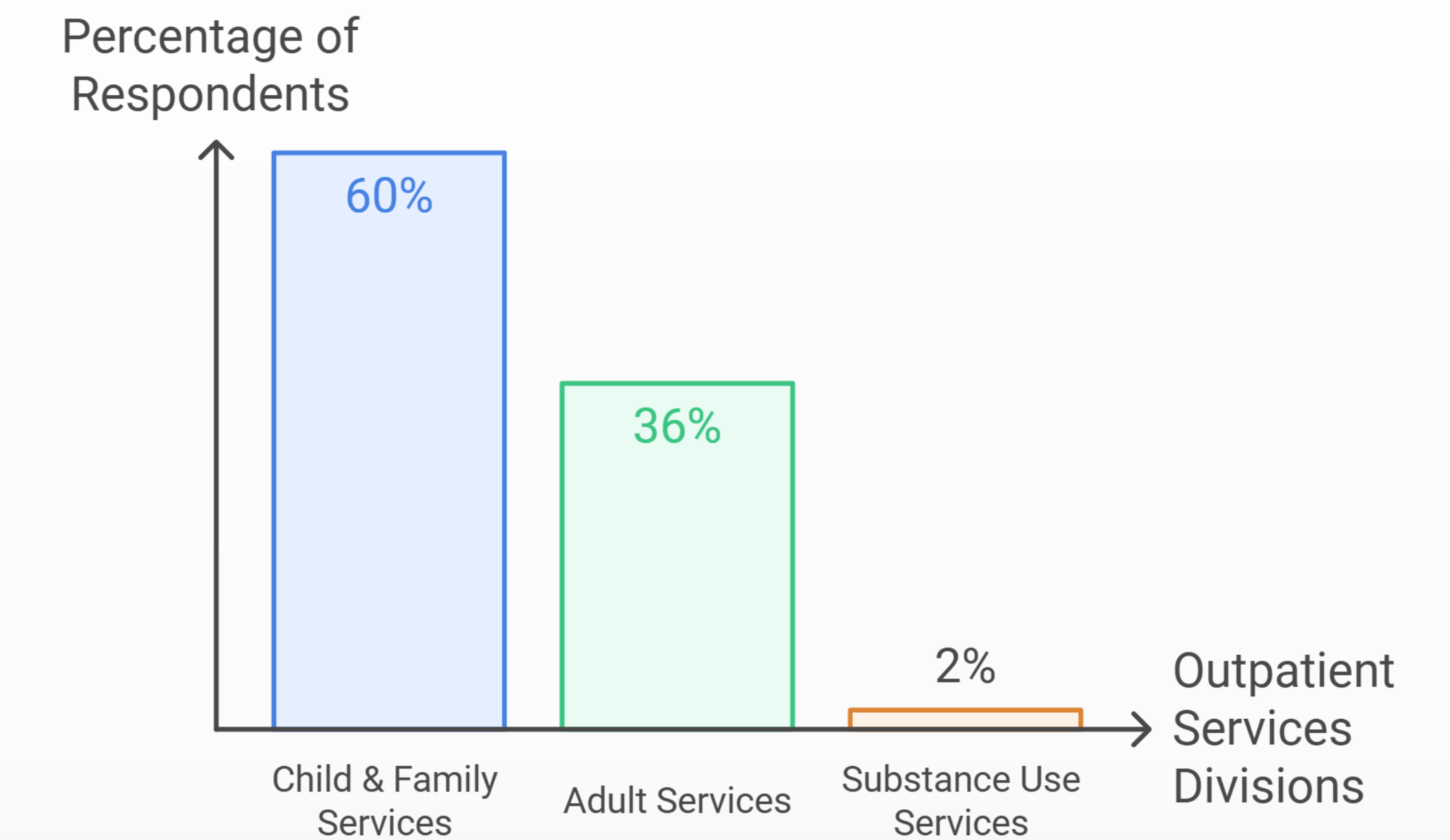
The survey was distributed online to 155 mental health and substance use therapists, care coordinators, specialists, and clinical supervisors between **April and June 2023**. Of the 155 recipients, **81 providers responded**, resulting in a response rate of 52%.

The survey focused on three core areas:

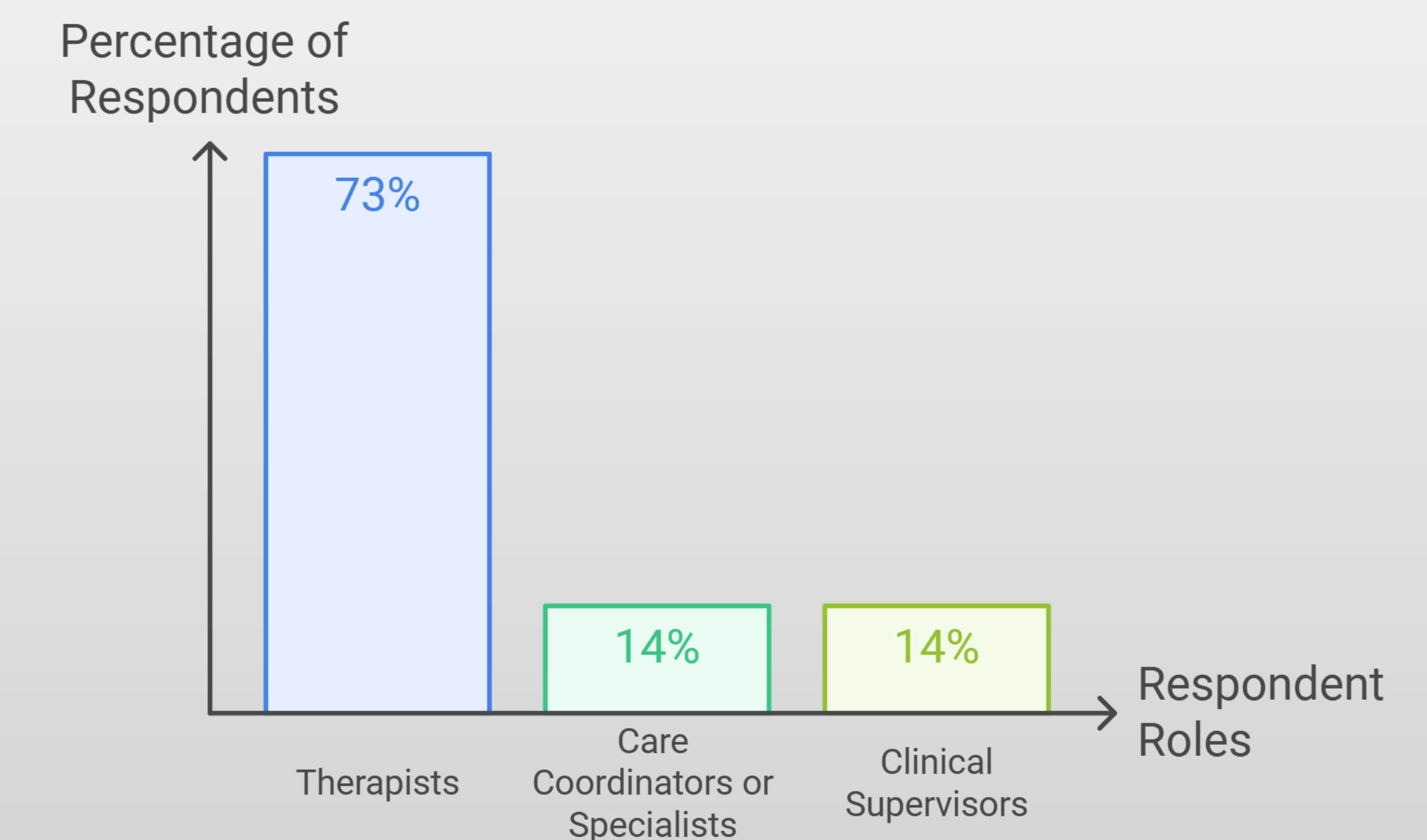
1. Provider practices in determining service modality (e.g., TMH vs. in-person).
2. Provider perceptions of the effectiveness of different service modalities.
3. Barriers and facilitators of TMH service delivery.



Distribution of Respondents by Outpatient Service Division (N = 81)



Distribution of Respondent Roles (N = 81)

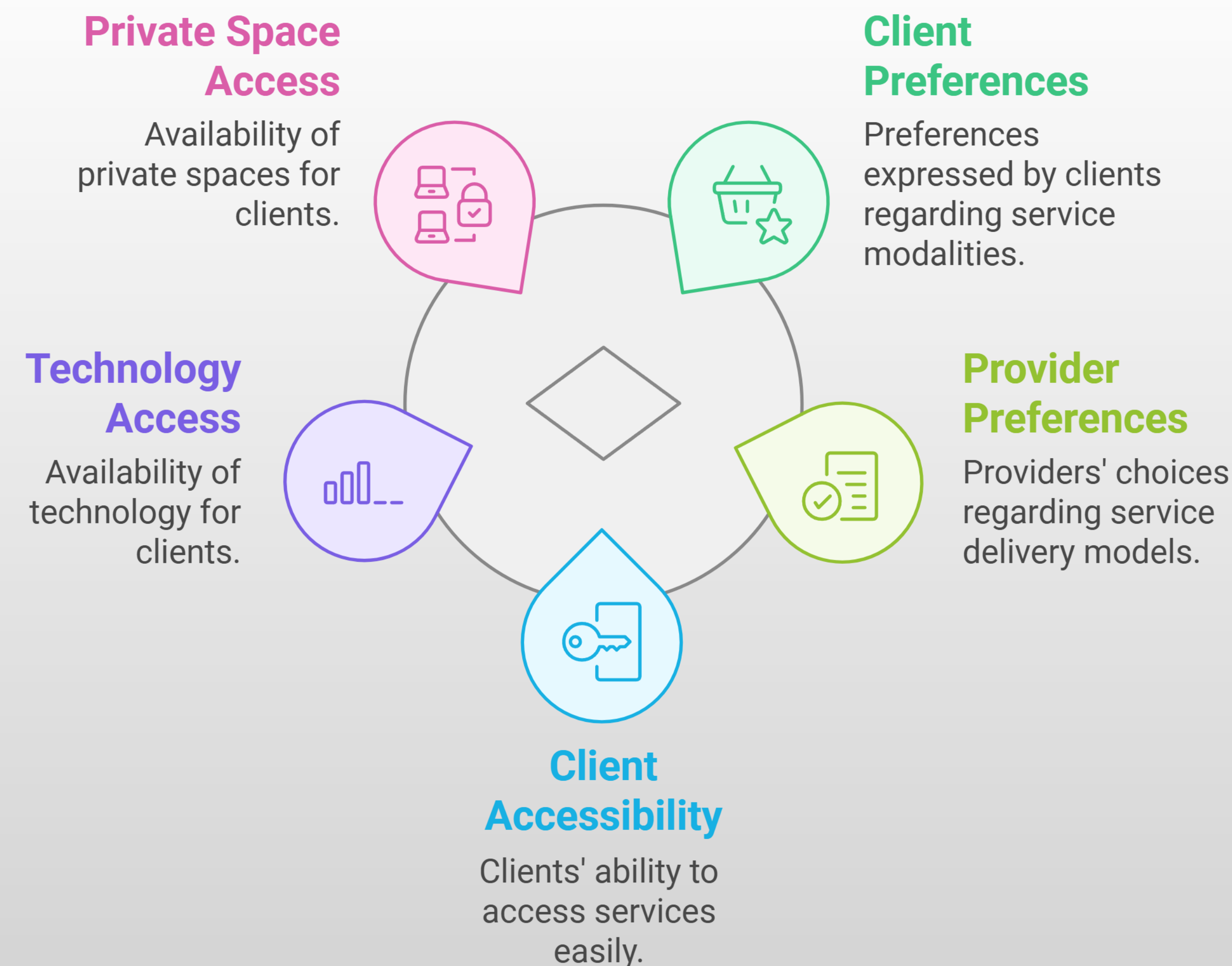


Results

How Decisions are Made Regarding Service Delivery Mode

In terms of decision-making, providers ranked client-related factors as the most important when determining service modality. Specifically, client accessibility (90%), client access to technology (90%), client access to private space (90%), and client preferences (90%) were prioritized. In contrast, only 2% of providers ranked personal preference as the most important factor when deciding on the service delivery mode.

Factors Influencing Telemental Health Decisions



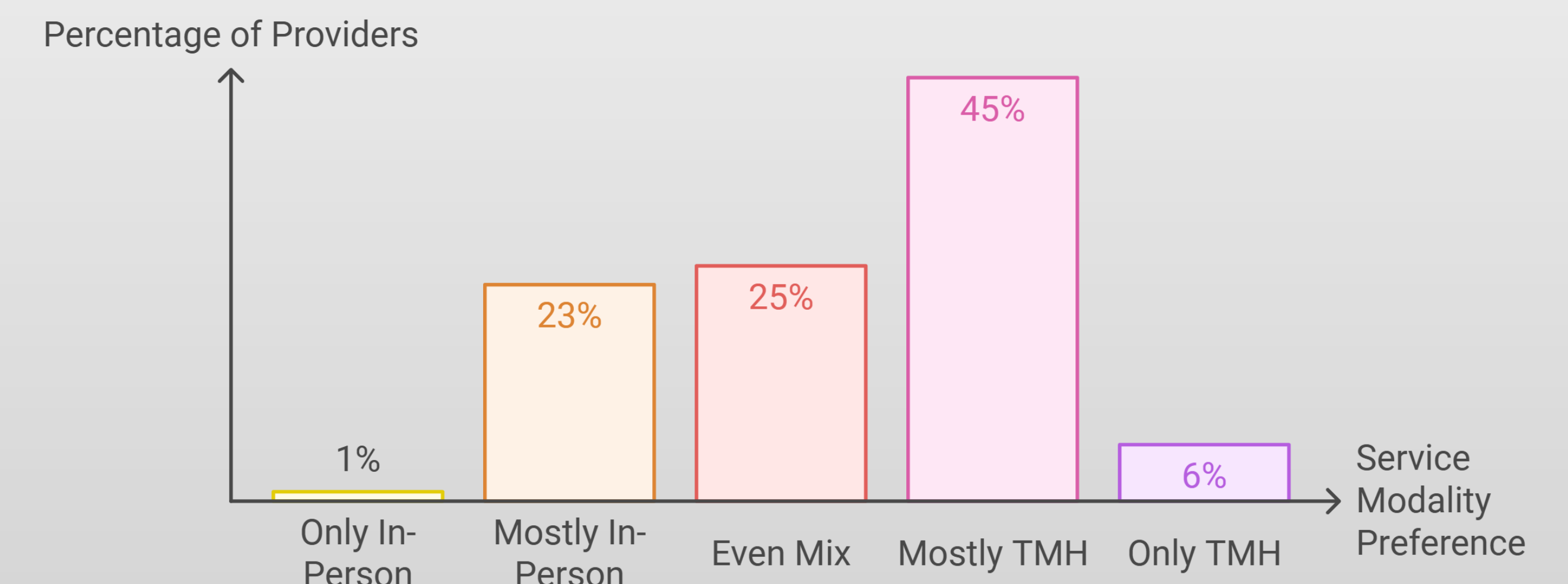
Preferences for Service Delivery Mode (TMH vs. In-Person)

The results showed variability in both client and provider preferences for TMH. Many providers stated their clients had mixed preferences, with 51% of reporting that most or all their clients preferred TMH over in-person. In contrast, only 24% of providers indicated that most or all their clients preferred in-person services.

When it came to provider preferences, the majority (41%) preferred a hybrid model of service delivery, combining both TMH and in-person services. Only 7% preferred mostly in-person services, and 1% preferred exclusively in-person sessions.

The results indicate that while many clients preferred TMH over in-person services, most providers favored a hybrid model, highlighting the importance of flexibility in service delivery to meet diverse client needs.

Providers' Preferences for Service Modalities (N = 81)



Results

Perceptions of TMH Effectiveness

The survey also explored provider perceptions regarding the effectiveness of TMH in addressing client needs. Providers reported that TMH generally increased accessibility to care for clients, with 73% agreeing with this statement. However, only 53% believed that TMH was suitable for high-risk clients, indicating a concern regarding the efficacy of remote services for clients with more complex or urgent needs.

An overwhelming 95% of respondents believed that video-based TMH could adequately address client needs. However, confidence in phone-based TMH was lower, with only 42% of providers expressing confidence in its ability to meet client needs.

While providers considered in-person services effective for all clinical services, web-based video was seen as a viable alternative, particularly for treatment planning, case management, and discharge services, where it was regarded as the more effective option. However, interventions like psychological testing and individual therapy for young children were strongly preferred in-person over any TMH modality. Phone-based services were generally viewed as the least effective for most service types, especially for individual therapy with children and group or family therapy. However, telephone services were considered a viable option for collateral sessions.

Comparison with Best Practices

The organization's TMH guidelines aligned with best practices, emphasizing client safety, technology access, and clinical factors such as acuity. However, the guidelines were limited, focusing mainly on practical issues like safety and technology access, without addressing ethical and legal challenges, particularly for high-risk clients.

Provider Perceptions of Effectiveness by Intervention and Modality

	In Person	Telephone	Video
Intake Assessment	73%	20%	86%
Collateral Sessions	70%	81%	82%
Psych Testing	77%	15%	35%
Treatment Planning	76%	56%	94%
Case Management	78%	72%	91%
Family Therapy or Counseling	84%	11%	73%
Group Therapy	79%	6%	79%
Crisis Intervention	94%	55%	67%
Individual Therapy with Young Children	89%	4%	32%
Individual Therapy with Children	87%	9%	69%
Individual Therapy with Teens	85%	34%	92%
Individual Therapy with Adults	84%	54%	92%
Individual Therapy with Older Adults	84%	54%	68%
Housing Services	76%	57%	60%
Discharge Services	80%	66%	93%

Note: Providers were asked to indicate whether they considered the service delivery type effective for various interventions. The values in the table represent the percentage of providers who rated each service modality as effective.

Conclusion

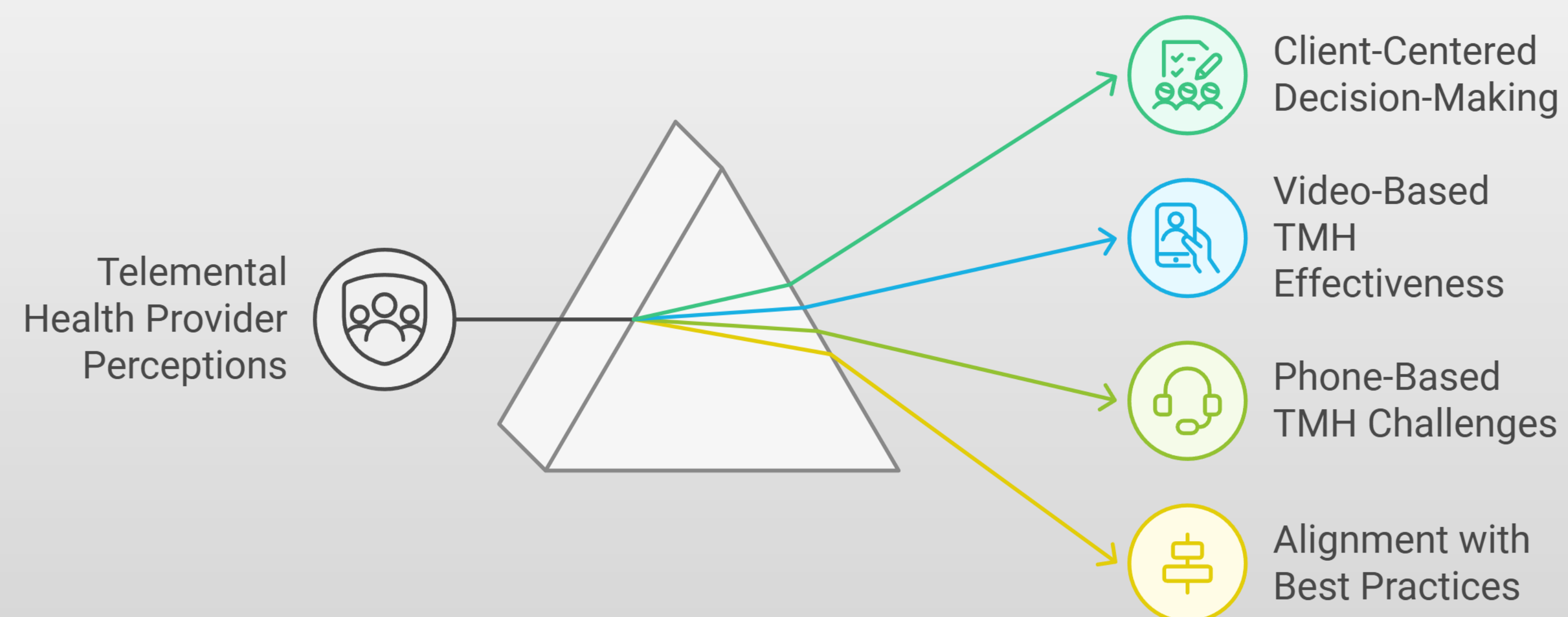
The study highlights key considerations for CMH organizations navigating the future of TMH. First, a client-centered approach to decision-making is essential, with providers prioritizing client needs over personal preferences, aligning with best practices for effective, accessible care.

Second, the positive perceptions of video-based TMH suggest it can enhance access to care and serve as an effective alternative to in-person services for many clients. However, the lower confidence in phone-based TMH raises concerns about its effectiveness for certain services. If phone-based services are to be utilized, additional training and resources are necessary to improve provider competency.

Lastly, while the organization's TMH guidelines align with best practices, there is room for improvement. Investing in training on ethical and legal issues in remote care and adapting interventions for specific populations, such as children and clients with severe psychopathology, can increase provider competence and confidence.

Implication for Practice

- Prioritize client needs over provider preferences when determining service modality.
- Invest in additional TMH-specific training and resources for providers, particularly in managing high-risk clients and legal/ethical issues.
- Continue evaluating TMH guidelines and adjust them to reflect emerging best practices and provider feedback.
- Regular assessments of provider perceptions and decision-making are recommended as the TMH landscape evolves.



Enhancing TMH Practices

