

Billings Clinic Psychiatric Center Response to 2019 Site Visit Recommendations

Board of Visitor's Recommendation:

- 1. Add an option for video conferencing to allow family/guardians the ability to communicate face to face with the treatment team and their family member/patient.**

Billings Clinic Response:

It is important for the families and caretakers of our patients to be involved in the treatment and discharge planning process. By history, patients and their treatment team have communicated with family members either in person or via telephone. These conversations allow all parties to provide and receive information, ask questions, and develop a discharge plan with follow up that is in the patient's best interest.

As our region continues to grow, we realize that face-to-face conversations are more difficult to coordinate. The technology that's available through the Eastern Montana Telemedicine Network (EMTN) would allow our patients and providers to communicate and plan with the patients' family members remotely while maintaining security and privacy. Coordination of care communication conducted via the Eastern Montana Telemedicine Network would decrease travel time and expense for family members and would enhance the continuity of care between patients, families and their inpatient psychiatric treatment team.

The Eastern Montana Telemedicine Network has over 40 locations throughout Montana, Wyoming and North Dakota. For families who would prefer face-to-face communication but are unable to drive to Billings for an in-person conversation, coordination of video conferencing at one of the telemedicine locations will offer a convenient and time-effective solution.

Coordination of the video conferences would be through the Billings Clinic's Eastern Montana Telemedicine Network office. Prior to the video conference, our staff will contact the EMTN office and provide them with the date, time, remote location, length of connection, and originating unit (PATU, PYTU or PSU). The Psychiatric Center will use portable conferencing equipment that can be moved to the appropriate consulting space on the treatment units.

Because of the sensitivity of the information that could be shared during these video conferences, secure communication systems on both sides would be necessary. Billings Clinic cannot connect its system to a non-HIPAA compliant system, thus video chat software such as Zoom, Facetime and Skype could not be utilized. However, family members could connect to the EMTN at a large number of clinics and Mental Health Centers across the region.

Board of Visitor's Recommendation:

- 2. Develop a new hire and continuing education training program on psychiatric disease states and psychotropic medication management. This program should include regularly scheduled inservice education opportunities to provide ongoing mental health education to all staff members.**

Billings Clinic Response:

Our new employee orientation content has expanded in the recent years to include increased content related to psychiatric disease states and psychotropic medications. Competency and knowledge of these areas are ensured prior to staff completing their education. However, a gap might exist in the education of longer-term, existing staff who were oriented before the new orientation material was formalized.

The Psychiatric Center Nurse Clinician will conduct a Needs Assessment in the fall of 2019 to determine the topics of future education related to psychiatric disease states and psychotropic medication management. To ensure all staff receive education on psychiatric disease states and psychotropic medication management, we will continue to offer content on these topics in Psychiatric Grand Rounds and Lunch and Learns for our employees who prefer to attend in-person workshops. However, with the complexity of our department with 24-hour staffing, these workshops cannot meet everyone's needs, so other methods of learning will be developed.

With the size and complexity of our staffing model, the option of written or electronic communication of the educational content may better meet the needs than requiring staff to attend the available workshops in person. This is a method we use in our department as it meets our employees' needs. On a regular basis, we will send out an educational offering for staff to read. After completing the reading, staff will answer questions related to the content to confirm their knowledge and competency of the topic. Moving forward, disease-specific and medication-specific educational content will be provided monthly.

The goal is multi-modal micro-learning, with topics being shared during staff meetings, on the LENS Board, and via email. In the future, content will be built into the Staff Resources online, upon the development of this resource.

Board of Visitor's Recommendation:

- 3. Develop a medication education group for Billings Clinic patients with a structured curriculum provided by nursing staff. Considering utilizing nursing students to help provide medication education.**

Billings Clinic Response:

The Psychiatric Youth Treatment Unit (PYTU) has had twice-weekly medication education groups on its schedule since 2016, however there have been some inconsistencies in the provision of this group. This medication education group is facilitated by a RN with the primary goals being identifying different classes of psychiatric medications and identifying individual concerns about taking prescribed medication (see attached group curriculum). Per standards of practice at Billings Clinic, patients receive

individual education on the medications they receive. For youth patients, parents/guardians also receive information about the risks, benefits and side effects of newly prescribed medications and/or dosage or administration changes.

Medication education is provided individually to patients on the Psychiatric Adult Treatment Unit (PATU) to ensure privacy as patients learn about the medications prescribed to address their psychiatric needs. Moving forward, we are engaging with BSN nursing students at MSU-B, asking them to develop medication education content, which will be reviewed by our pharmacist or one of the pharmacy residents. Once finalized, Psychiatric Center nursing staff will provide our medication education groups, which would start by January 1, 2020.