Starting in mid-March 2020, VCU Health psychiatrists and administrative staff began scheduling telepsychiatry appointments interspersed with in-person appointments. Before the appointment, VCU Health administrative staff provide a warm reminder call to the patient to ensure they understand how to log in to their session. During the video visit, the patient connects via the practice’s secure, synchronous video visit platform to receive evidence-based teletherapy. To ensure the safety of the patient during the appointment, the clinician verifies the patient’s emergency contact information and current location in case an emergency response must be activated during the appointment.

Based on the outcomes described below and the likelihood of continued patient demand for telepsychiatry, VCU Health will continue offering these services after the COVID-19 pandemic has subsided.
**Continuity of Care:** Prior to the COVID-19 pandemic, nearly all psychiatry visits were delivered in person. During the COVID-19 pandemic, VCU Health clinicians have provided between 3,000 and 5,000 psychiatry visits per week. Telehealth utilization peaked at 92% in April 2020 and has stabilized at about 80% of overall psychiatry visits.

**Satisfaction With Outpatient Services:** Patients appreciate the option to receive telepsychiatry services in the privacy and comfort of their homes.

**Satisfaction With Inpatient Services:** Dr. Robert Findling, chair of the VCU School of Medicine’s Department of Psychiatry and telepsychiatry program lead, noted that even when clinicians were technically able to visit with psychiatry patients who were admitted in the hospital, conducting video visits with those patients was more effective and “humanizing” than being in their physical presence while wearing full personal protective equipment.

**Satisfaction Delivering Inpatient Care Virtually:** Similar to the patient satisfaction with virtual inpatient care noted above, the ability to connect via video with inpatients, rather than through masks and face shields, is valued by clinicians and has fostered more meaningful clinician connections.
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No-Show Rates: The no-show rate among psychiatry visits declined from 11% pre-pandemic to 6% post-pandemic as virtual visits went from <1% to more than 80% of total visits. Patients were less likely to miss their telepsychiatry appointment because of the improved convenience of conducting a virtual visit. Additionally, the implementation of a live phone call appointment reminder system was correlated with reduced no-shows.

Gaps in Access by Age: As VCU Health’s psychiatry program went from an almost exclusively in-person model in FY2020 to one that relied primarily on telepsychiatry to connect with patients in FY2021, there was no reported decline in accessibility of care over time among VCU Health’s older patient population. This is notable, as older adults often have more difficulty accessing and using virtual care technology.

FIGURE 5. VCU PSYCHIATRY PATIENT POPULATION BY AGE, FY 2020–2021

Source: VCU Health

Source: Data and content for this case study were provided by and used with permission from VCU Health.