Executive Summary

Unserved and underserved, untreated mental illness embezzles vibrancy from communities with suicide, murder, legal infractions, and lost futures. Distance and access are significant barriers to mental health treatment. Travel time taking people from jobs or psychiatrists wasting precious talent looking at a windshield are equally unacceptable. Arkansas is 50 of 51 in funding for mental health at $28.59/person; of 75 counties, 68 have a mental health professional shortage! Telemedicine psychiatry services will fill a critical resource gap for vulnerable adults with chronic mental health problems. Participants will learn to use online services to gain knowledge of mental health risks and treatments, provide the motivation and skills needed to enhance their treatments, find support from other people in similar situations, and affect or reinforce attitudes. AO/Dayspring is dedicated to serving the mental health needs of children, adolescents and adults across the state of Arkansas. The goal of each service is to assist the consumer in achieving optimal functioning in their daily lives. AO/Dayspring currently serves 1244 people (an ever fluctuating number) A conservatively estimated baseline subscribership will be 500, measured by client enrolling. The expected increase will be at least 2500, approximately 1000 within one year and 1500 more by year 2. (Calculation includes patients, caregivers and community) A per program unit breakdown: Psychiatric services: 1000; Training: 1500 Psychiatry, especially in rural swaths of the nation that also often have deep social problems like poverty and drug abuse, is emerging as one of the most promising expressions of telemedicine. Increased broadband adoption using Telepsychiatry can play a critical role in eliminating multi-faceted barriers to mental health care by providing culturally competent services to rural areas. High resolution teleconferencing equipment will pair a psychiatrist with a consumer and AO/Dayspring clinicians for diagnosis and ongoing medical management. AO/Dayspring staff using established electronic medical records can share clinical notes with the hub psychiatrist to have necessary data to evaluate progress. Consumers are part of the treatment team creating a plan that helps them feel more in control and more comfortable with the telepsychiatrist's recommendations. This project is innovative because it combines Telepsychiatry with health literacy coaching to assist consumers in finding information to make them partners in the care team by understanding medication management and behavioral cues and joining on-line support groups. Partners for this project are the Arkansas Technology Oversight Management (ATOM) group who provide enhanced broadband speed the Arkansas Sheriff's Association who will benefit from better services for unmet mental health needs, and the University of Arkansas Medical School Rural Hospital project from increased availability of psychiatrists. Six new positions will be established, four more people will have added responsibilities to maintain full time jobs. At least 8 indirect jobs will be created. Consumers learning to control their illnesses will be able to obtain jobs that may have eluded them in
the past. Family members will maintain jobs that could have been lost due to frequent doctor visits. The thrust of this project is to serve the vulnerable population of the chronically mentally ill who often are unemployed with low incomes. Arkansas has a high percentage of minorities. AO/Daysprings Behavioral health has the expertise to treat and support mental health and other disabilities in a culturally competent fashion. The matching contribution for this project will be realized from cost savings of not paying for unproductive 'windshield' costs AO/Daysprings are substantial. While some in person visits will always necessary the savings substantially fund much of the match while AO will invest the difference in the future of telehealth and evidence-based psychiatric services. Our board and leadership has agreed that this is simply a must do for positive outcomes both for our clients and our agency.

Equipment to maximize broadband opportunities is the largest part of this proposal. We are adding six positions and reallocating several others to support these efforts. In summary the budget will be: Year 1 Total Cost: $853,718 Year 2 Total Cost: $388,979 Total Federal: $894,612 Total Matching: $388,979 Total Project Cost: $1,283,591 Year 1 Match - 30% Year 2 Match - 30% Total Match - 30% But if not for this funding AO/Dayspring could not take advantage of the opportunities of broadband technology to offer our customers increased psychiatric services we will be able to offer through telemedicine. Participants served both during the grant period and thereafter will have improved health literacy skills and computer skills supporting sustainability of improved client outcomes. The reduction of expensive and inefficient travel costs and travel time will support the sustainability and maintenance of the project equipment and approach to continue the expanded access to psychiatric care for this population. We will use the data supporting the improved client access and outcomes in legislative advocacy for expanding the populations approved for telehealth to encompass services for children in order to expand the usage of broadband services to increase the number of users and geographic areas. Through services delivered directly in AO/Daysprings offices to our customers and caregivers, staff and other professionals taking advantage of training and becoming more of aware of opportunities, and community members realizing the utility and relevance of the broadband and its greater availability, we believe that at least 2500 more vulnerable individuals will adopt broadband both in their homes and at public computing centers. The cost person adopter will be $543 a number that will plummet after initial equipment purchases. AO/Dayspring has highly qualified IT professionals who are more than capable to design, implement and maintain a videoconferencing system. They have 35 years of combined experience and with the multiple sites of the Alternative Opportunity family, are proficient in remote service, communication, and help desk functions. As AO/Daysprings seeks to continually improve quality to bring the best care to consumers in rural Arkansas telemedicine is the next logical step. We are ready, have the management and clinical controls in place, and the IT staff to support this project. Installation and training will take place in Q1-4. Q5-6 will see sites added. Full implementation of this project will be Q6-12.