

Posted on Fri, Dec. 22, 2006

Telepsychiatry dispenses aid to inmates

The Kansas program serves a need, and it saves doctors' time and state money.

By STEVE ROCK

The Kansas City Star



GARVEY SCOTT | THE KANSAS CITY STAR

Psychiatrist Kenneth Sonnenschein can see patients in remote locations via teleconference in his Overland Park office.

Inmates in rural prisons throughout Kansas visit the Lansing office of psychiatrist Charles Zaylor.

They come from Ellsworth, Winfield and Norton.

And they never leave their respective correctional facilities. Instead, they appear on a 19-inch computer monitor on Zaylor's desk in Lansing.

Telepsychiatry, it's called, and it is burgeoning in cash-strapped correctional facilities nationwide.

Using video technology, psychiatrists treat inmates hundreds of miles away with little more than a pad of paper and a mouse click. It is one aspect of the telemedicine industry, one that allows mental-health experts to reach out to segments of society — inmates scattered throughout rural America, for example — that long have been underserved.

"This field is just going to keep growing," said Judith Stanley, director of accreditation for the National Commission on Correctional Health Care in Chicago. "There is such a need.

"Many of the prisons and county jails are in areas where you don't have immediate access to qualified practitioners in the psychiatric field. This procedure allows the connection between those experts and the people out there in the sticks."

Telemedicine is a growing field that encompasses the delivery of medical help from one site to another. It cuts across the medical field — from dermatology to neurology to cardiology.

Experts say the trend is growing more in psychiatric care than in other disciplines because psychiatry does not require a physical examination.

The growth of telepsychiatry is especially strong in the field of corrections, where more than half of all prison and jail inmates were found by a recent Department of Justice study to have a mental health problem. Problems include depression, schizophrenia and any number of anxiety disorders.

"When you look at prison populations, mental health care is a significant concern," said Allen Sapp, assistant

director of the Correctional Managed Health Care Advisory Committee for the Texas Department of Criminal Justice. "That environment can be difficult for people with mental health issues to maintain their health status."

Texas has an active telepsychiatry program, with about 9,000 mental health consultations in fiscal year 2005 alone.

In Kansas, which has about 9,000 inmates statewide, psychiatrists handle about 125 consultations a month. Zaylor said the number would be smaller without telepsychiatry, because his staff consists of just five psychiatrists and two psychiatric nurse practitioners.

"This gives us the ability to provide access five days a week at a distant " said site as opposed to, 'Well, you'll have to wait until next Tuesday,' Zaylor, supervising psychiatrist for the state corrections system.

In South Carolina, corrections officials expect to fully implement a telepsychiatry program soon — about a year after three unidentified inmates and an advocacy group sued the state's prison system, alleging the state had failed to adequately treat mentally ill inmates.

According to a recent issue of *The International Journal of Neuropsychiatric Medicine*, corrections officials nationally "need to consider expanding the use of telemedicine" to fight mental health problems.

Angie Daly, a spokeswoman for the Missouri Department of Corrections, said the state has considered telemedicine.

"It's something we recognize and are looking at for the future," she said. "We just don't have the infrastructure in place right now."

Here is how it works with Zaylor:

The computer monitor in his Lansing office that he uses for consultations is the same one he uses to scan the Internet and check patient records. Attached to the top is a small camera pointing at him. A microphone sits on a nearby desk.

There are similar setups at four of the seven other state correctional facilities.

Doctor and patient visit in real time over the Internet.

The visit is every bit as good as it would be if the patient were in the office, Zaylor said.

"I do everything that I would do in person," he said. "I just don't see any difference, really."

Not everybody agrees.

Some experts said telepsychiatry should only be used as a supplemental tool and it cannot replace one-on-one interaction. It will never be as personal as an office visit.

Also, the visit is only as good as the equipment used.

Telepsychiatry is cost-effective in the corrections world, cutting travel and security expenses.

"When a psychiatrist is in a car driving for two or three hours, that's absolute lost time," said John Solomon, the director of mental health services for the South Carolina Department of Corrections. "We're tying up vehicles. We're using gasoline. Sometimes, we're using officers."

"When you're operating on a shoestring budget, that's significant."

To reach Steve Rock, call (816) 234-4338 or send e-mail to srock@kcstar.com.