13th ALL-OHIO INSTITUTE ON COMMUNITY PSYCHIATRY

“Behavioral Health Redesign in Ohio: Focus on Recovery for Ohio’s Consumers”

March 24-25, 2017

ABSTRACT SUBMISSION FORM:

WORKSHOP (1 – 2 presenters for a 90-minute interactive session)

SHOWCASE (1 – 2 presenters for 30 – 45 minutes; 2 or 3 showcases will share a 90-minute session)

x POSTER (at least one participant to be present during poster session on March 25)

TITLE OF PRESENTATION:

Process Improvement Initiatives to Optimize Safety and Throughput for Psychiatric Patients Boarding in the Emergency Department

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The increasing problem regarding psychiatric patients boarding in Emergency Departments (EDs) in the United States is evident. In 2011, the 90th percentile length of stay was 1,378 minutes for psychiatric patients and 543 minutes for non-psychiatric patients (1-3). Mental health presentations are now estimated to comprise 6-9% of all ED visits (4). At the request of OhioHealth administration, the Central Ohio Behavioral Health Task Force was established, for the purpose of developing strategies to optimize safety & throughput for psychiatric patients boarding in OhioHealth Emergency Departments throughout Central Ohio. Short-term initiatives included implementation of daily multidisciplinary teaching rounds on all psychiatric patients, prioritization of the medication reconciliation process for psychiatric patients, development and implementation of an agitation management protocol for use by ED physicians, installment of delayed egress doors, addition of a 24 hour Protective Services officer, daily nursing huddle board meetings, and increased staffing of psychiatric social workers, as well as increased psychiatrist time dedicated to ED work. Additionally, a telemedicine pilot was launched to provide psychiatric consultation to two other OhioHealth Emergency Departments. Following implementation of these initiatives, the Average Length Of Stay (ALOS) for psychiatric patients in the ED decreased by 5-27%, across the three Emergency Departments. At Grant Medical Center, following implementation of the telemedicine pilot, the ALOS in the ED for patients discharged to inpatient psychiatric treatment facilities decreased by 39%, and there was a 55% reduction in the number of patients admitted to an inpatient psychiatric unit. Across the system, staff assaults were reduced by 28%.
LEARNING OBJECTIVES (At the end of this presentation, learners will be able to…)

1. Understand a system-level approach to addressing the problems surrounding boarding of psychiatric patients in the ED.
2. Acknowledge the importance of a collaborative multi-disciplinary approach to providing optimal care for psychiatric patients in the ED.
3. Appreciate the challenges of measuring success of process improvement initiatives in psychiatric patients boarding in the ED.
4. Consider next steps in optimizing management of psychiatric patients boarding in the ED.

Please return submissions by e-mail with header “All-Ohio Abstract” by December 9, 2016 to be considered. Please return an electronic copy of the abstract form by e-mail to allohio2017@uhhospitals.org, email preferred but alternately you can fax to (216) 844-5833.

SUBMISSION DEADLINE: DECEMBER 9, 2016