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# Assessing Spokane Psychiatry Department's Knowledge of Outpatient Psychiatry Resources and Discharge Planning Practices

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## BACKGROUND

The period following discharge from inpatient psychiatry poses high risk of medication non-adherence, symptom exacerbation, hospital readmission, and suicide.<sup>3</sup> Concerningly, 42%-51% of adults fail to transition from inpatient to outpatient mental health care. The literature demonstrates that patients with a scheduled outpatient mental health appointment at time of discharge were more likely to attend outpatient services within 30 days of hospital discharge compared to those who did not have an appointment scheduled.<sup>1</sup> No prior research has assessed Sacred Heart Medical Center (SHMC) Psychiatry Department's knowledge of outpatient psychiatry resources or examination of routine discharge planning practices.

## AIMS STATEMENT

By April 2023, there will be a 25% increase of the psychiatry department's knowledge of outpatient resources, and a 10% increase of patients with appropriate follow-up appointments.

## METRICS

**Outcome Measure:** Consult psychiatry patients with psychiatric diagnoses will have established follow-up appointments with PCP/Psych and appropriate referrals at time of discharge.

**Process Measure:** Implement pre-and-post surveys to determine the department's knowledge of outpatient resources and making the appropriate referrals.

**Balance Measure:** Amount of time required by the department to incorporate appropriate referrals on the discharge instructions.

## INTERVENTIONS

### PDSA 1A:

- Identify outpatient psychiatric services with the help of Psychiatry Triage and Social Workers.
- Send a pre-survey to the department to assess where they would refer Consult psychiatry patients depending on their needs.
- Share a list of outpatient psychiatric resources with locations, contact information, and inclusion criteria

### PDSA 1B:

- Send a post-survey to the department to assess where they would refer Consult psychiatry patients depending on their needs.

### PDSA 2A:

- Conduct a retrospective study on 50 Consult psychiatry patients discharged from July-November 2022.
- Determine if outpatient follow-up appointments were established upon discharge.
- Provide laminated copies of outpatient psychiatric resources to the department to assist with discharge planning.

### PDSA 2B:

- Conduct a retrospective study on Consult psychiatry patients after the list of outpatient psychiatric resources have been shared with the department.

## OUTCOMES

Figure 1

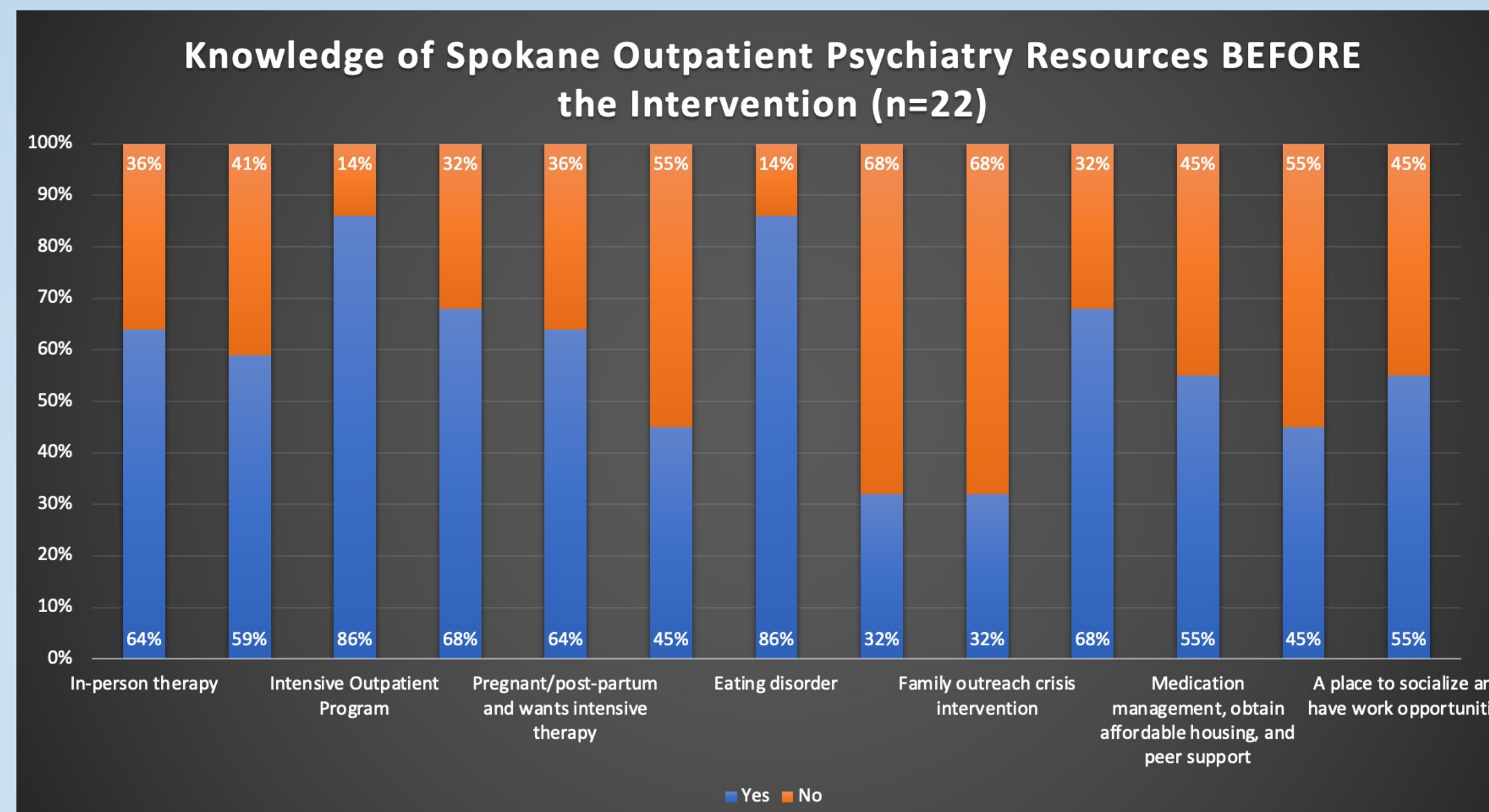


Figure 2

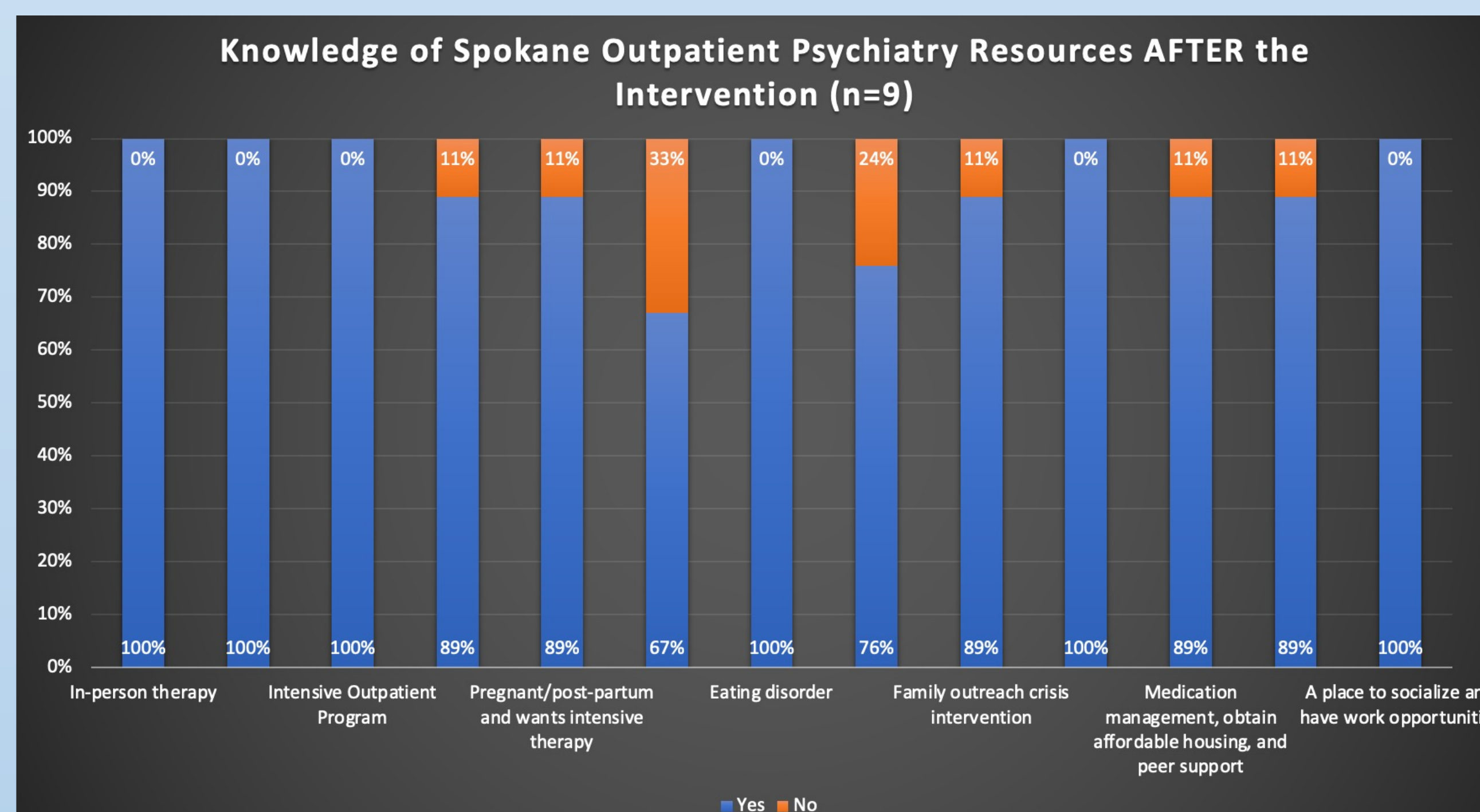
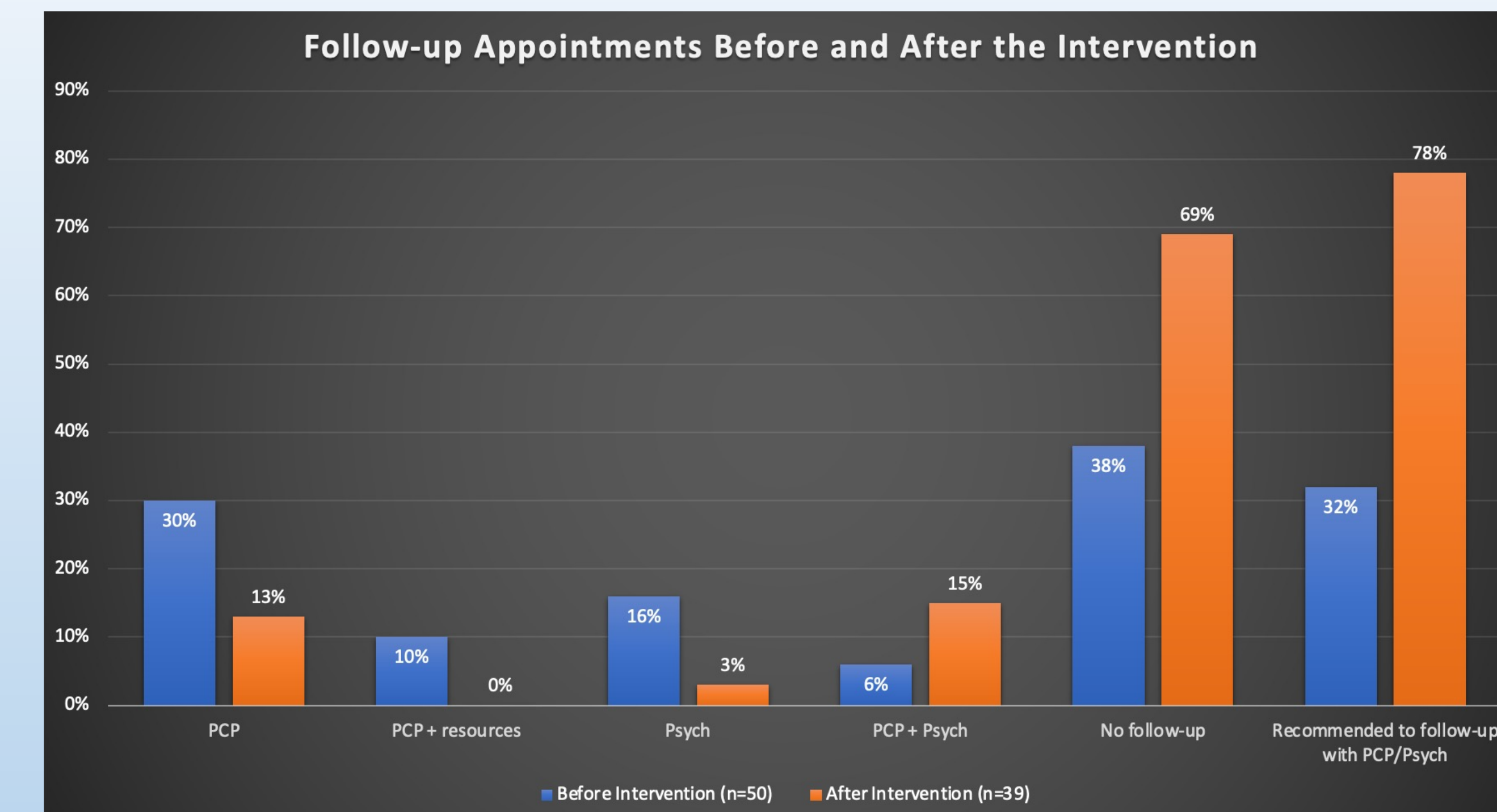


Figure 3



## DISCUSSION

### Conclusions from the pre-and-post surveys:

- Average increased from 58% to 68%

### Conclusions from the retrospective studies:

- Decrease in "PCP", "PCP + resources", and "Psych"
- "PCP + Psych" increased by 150%
- "No Follow-up" increased by 82%, however within this category, there was a 144% increase in recommendations to follow up with PCP and Psych

### Limitations:

- Patients refusing follow-up appointments, lack of community providers, and short length of stay preventing adequate discharge planning.<sup>1</sup>
- PDSA cycles had different duration of collection and sample number.
- The average of the surveys and retrospective studies do not show how much each category contributed the most or least to the results.

**Future Plan:** Determine patient's show rate to their PCP/Psych appointments post-discharge.

## REFERENCES

1. Smith, T. E., Haselden, M., Corbell, T., Wall, M. M., Tang, F., Essock, S. M., Frimpong, E., Goldman, M. L., Mascayano, F., Radigan, M., Schneider, M., Wang, R., Dixon, L. B., & Olfson, M. (2020). Effect of Scheduling a Post-Discharge Outpatient Mental Health Appointment on the Likelihood of Successful Transition From Hospital to Community-Based Care. *The Journal of clinical psychiatry*, 81(5), 20m13344. <https://doi-org.offcampus.lib.washington.edu/10.4088/JCP.20m13344>
2. Smith, T. E., Haselden, M., Corbell, T., Wall, M. M., Tang, F., Essock, S. M., Frimpong, E., Goldman, M. L., Mascayano, F., Radigan, M., Schneider, M., Wang, R., Dixon, L. B., & Olfson, M. (2021). Factors Associated With Discharge Planning Practices for Patients Receiving Inpatient Psychiatric Care. *Psychiatric services (Washington, D.C.)*, 72(5), 498-506. <https://doi-org.offcampus.lib.washington.edu/10.1176/appi.ps.202000021>
3. Steffen, S., Kösters, M., Becker, T., & Puschner, B. (2009). Discharge planning in mental health care: a systematic review of the recent literature. *Acta psychiatrica Scandinavica*, 120(1), 1-9. <https://doi.org/10.1111/j.1600-0447.2009.01373.x>