

Improving the Value of a Hospital-Based Consultation-Liaison Psychiatry Service During the COVID-19 Pandemic through Interprofessional Work

A Qualitative Analysis and Framework for Collaboration



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Background

- Consultation-liaison (C-L) psychiatry is an emerging field of psychiatry that has undergone significant growth in recent years
- Patients with primary psychiatric illnesses and co-occurring medical problems are achieving longer lives through advances in medical care
 - Prolonged inpatient general hospital care is often necessary when inpatient psychiatric settings are unable to safely manage complex co-occurring medical problems during periods of behavioral health crisis
- The COVID-19 global pandemic has underscored the need for robust integrated behavioral health care for patients across inpatient medical settings, especially when patients in behavioral health crises are COVID-19 positive and are precluded from care in other settings
- C-L psychiatry's ability to sustain growth will depend on our ability to provide and demonstrate value within healthcare systems and the larger healthcare apparatus
 - Includes fostering critical connections with other professional groups
- Innovating care through collaborative approaches can help:
 - Maximize continuity
 - Care outcomes
 - Increase the value of our services
- Our inpatient C-L psychiatry team (covering ~1400 hospital beds, ~11 new consults/day, >9500 bedside visits/year) regularly collaborates across professions with other healthcare professionals to provide full spectrum mental health care that assists with needs that cannot be met by primary medical or surgical teams

Methods

- Our C-L psychiatry service provides full spectrum mental health care to patients admitted to inpatient medical/surgical hospital services by collaborating with other professionals:
 - Nursing (a behavioral emergency response team (BERT))
 - Social work
 - Health psychology
 - Speech and language pathology (SLP)
 - Occupational therapy (OT)
 - Physical therapy (PT)
- A daily multidisciplinary review of patients on whom we have been consulted occurs with the input of nursing and social work, facilitated by secure virtual conferencing technology
 - Provides opportunity to review proactive intervention opportunities
- Care coordination through targeted therapy referrals to inpatient health psychologists, as well as functional assessment referrals to SLP/OT/PT have become critical in developing multidimensional assessments and safe, comprehensive discharge plans
- Our team continuously analyzes trends in interprofessional collaboration during focused consultations to identify opportunities for quality improvement and collaborative efficiency

Results

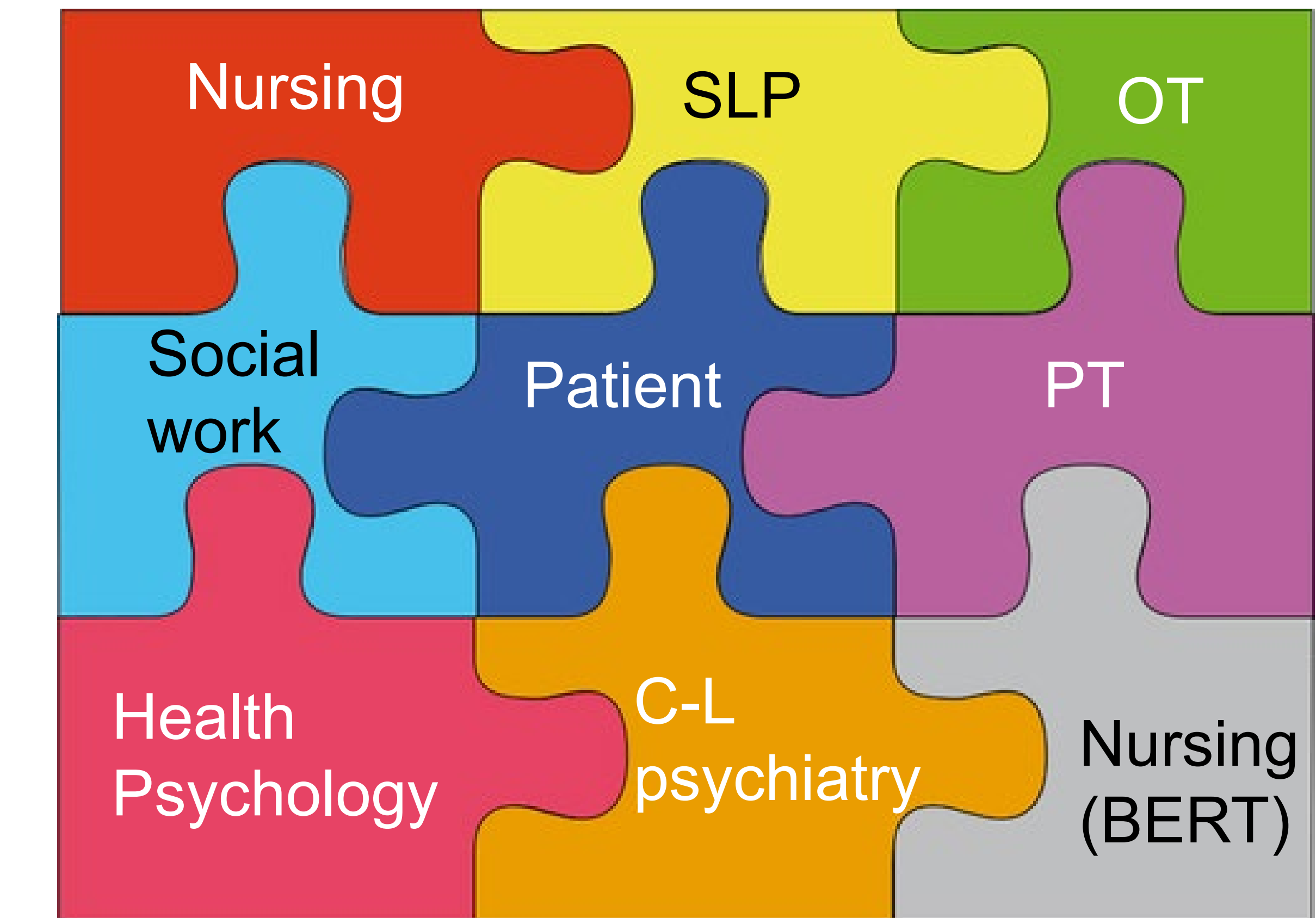
- Integrated daily case reviews with behavioral emergency response nurses, social workers, and health psychologists have been critical in synthesizing and anticipating the functional and biopsychosocial needs of patients with complex behavioral and medical illnesses, especially when these patients are otherwise unable to be safely cared for in traditional inpatient behavioral health hospitals
- In the past year, we have identified several areas to be the most representative of our interprofessional collaboration (Table 1)



Expansion of our interprofessional team in the general hospital setting allows for:

1. More efficient care coordination and aftercare planning
2. Effective engagement of providers and staff
3. Teaching interdisciplinary trainees
4. Development of comprehensive treatment plans

Table 1: Areas most representative of interprofessional collaboration and team members involved	
Example of Opportunity for Interprofessional Collaboration:	Interprofessional Team Members Involved:
Crisis care of agitated medical inpatients	C-L psychiatry, nursing (BERT)
General hospital care of COVID-19 + patients unable to receive care in traditional psychiatric hospitals	C-L psychiatry, social work, nursing, health psychology
Long-stay patients with dispositional capacity and complex discharge issues	C-L psychiatry, social work, PT/OT, SLP
Increasing clinical stakeholder engagement through secure messaging platforms, handoffs, and care continuity	C-L psychiatry, nursing, social work, SLP, PT/OT



Conclusions

- As our inpatient hospital C-L psychiatry service grows, it has been important to streamline the mechanisms by which we collaborate with our colleagues from other healthcare professions
- Although COVID-19 has created unique challenges for healthcare systems, it has also created new opportunities and modalities to collaborate
- Rapidly evolving electronic medical record communication tools and secure virtual platforms (implemented during the global pandemic to facilitate social distancing) have increased our ability to
 - Dynamically engage a broader interprofessional team
 - Engage in real-time treatment planning
 - Increase the sophistication of care coordination across a large medical-surgical hospital setting
- Opportunities to increase understanding of professional cultures and streamline workflows remain as we continue to dismantle traditional siloed approaches for the benefit of our patients with complex, integrated medical and behavioral needs.

References

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