

Behavioral Healthcare in the ED: *4 Strategies to Prevent Strain*

Appropriately providing care to the vast number of people in the U.S. suffering from mental health disorders can be challenging, especially in today's healthcare environment. The lack of adequate behavioral health solutions is a systematic issue that requires industry-wide remedies. However, there are impactful strategies individual facilities and healthcare systems can implement to improve patient care quality and lessen pressure on EDs.



STRATEGY 1: REINFORCING PATIENT-CENTERED PARTNERSHIPS

Hospitalists and ED physicians both face the problem of limited resources for patients with mental health disorders, including: space, beds, access to psychiatric services, and time. However, together, hospitalists and ED physicians can collaborate to better serve this patient population.

Front-line providers can reestablish patient-focused partnerships by thinking of the ED resources and the hospitalist's assets as one complete set of resources – one pool from which they can both draw to provide the best care for the patient.

For instance, if the ED needs to admit a patient who has arrived because of a psychiatric illness, they can request a sitter for the floor so the hospitalist doesn't have to put the patient in an ICU bed. In this scenario, the patient gets the attention needed, while the hospitalist can reserve one-to-one care and valuable ICU beds for those with acute medical needs.



Behavioral Healthcare in the ED: 4 Strategies to Prevent Strain



STRATEGY 2: PROCESS IMPROVEMENT

Examine policies and procedures surrounding psychiatric care in your facility/system and establish a systemic standard for coordinating behavioral healthcare.

To get buy-in from key hospital stakeholders, create a business case for process change by answering questions like these:

- What percent of patients come into your ED with behavioral health issues? (insured, uninsured, incarcerated individuals, etc.)
- What is the length of stay (LOS) of those patients? (Average wait times, hours patients are boarded in the ED before evaluation, inpatient op admissions, overall LOS)

These answers help illuminate the true cost of insufficient behavioral health resources and build the business case to invest in defining and executing improved behavioral healthcare processes.

Once buy-in is established, hospitals should invest time and resources in defining a process that helps ED clinicians and staff recognize and expediently treat psychiatric patients, stabilize agitated patients, and know how and when to bring in outside mental healthcare professionals.



STRATEGY 3: TELEMEDICINE SOLUTIONS

Hospitals and healthcare systems are increasingly embracing telemental health options to improve access and scalability of mental healthcare, particularly in rural or HPSA areas.

Providing remote mental healthcare services (usually via a secure audio or video platform) by psychiatrists, psychologists, social workers, and other mental health professionals ensures that clinical care, medical education, monitoring, and provider consultations are available anytime, anywhere.

The use of telemental solutions also helps guarantee that psychiatric consults happen earlier in the process, enabling providers to observe patients, ask diagnostic questions, and, in some cases, write a prescription on the spot.



STRATEGY 4: COMMUNITY PARTNERSHIPS

Partnerships with community-based mental health organizations that specialize in behavioral healthcare delivery is an outstanding way to supplement inadequate behavioral healthcare resources.

One drawback is the partnership option is better suited to larger markets with greater access to specialty hospitals, as rural areas or smaller markets typically don't have behavioral health specialists or specific care facilities nearby.

If a partnership can work, however, this approach benefits the hospital, the patient, and the community mental health providers by bridging gaps in the continuum of care and better-utilizing resources on all counts.

