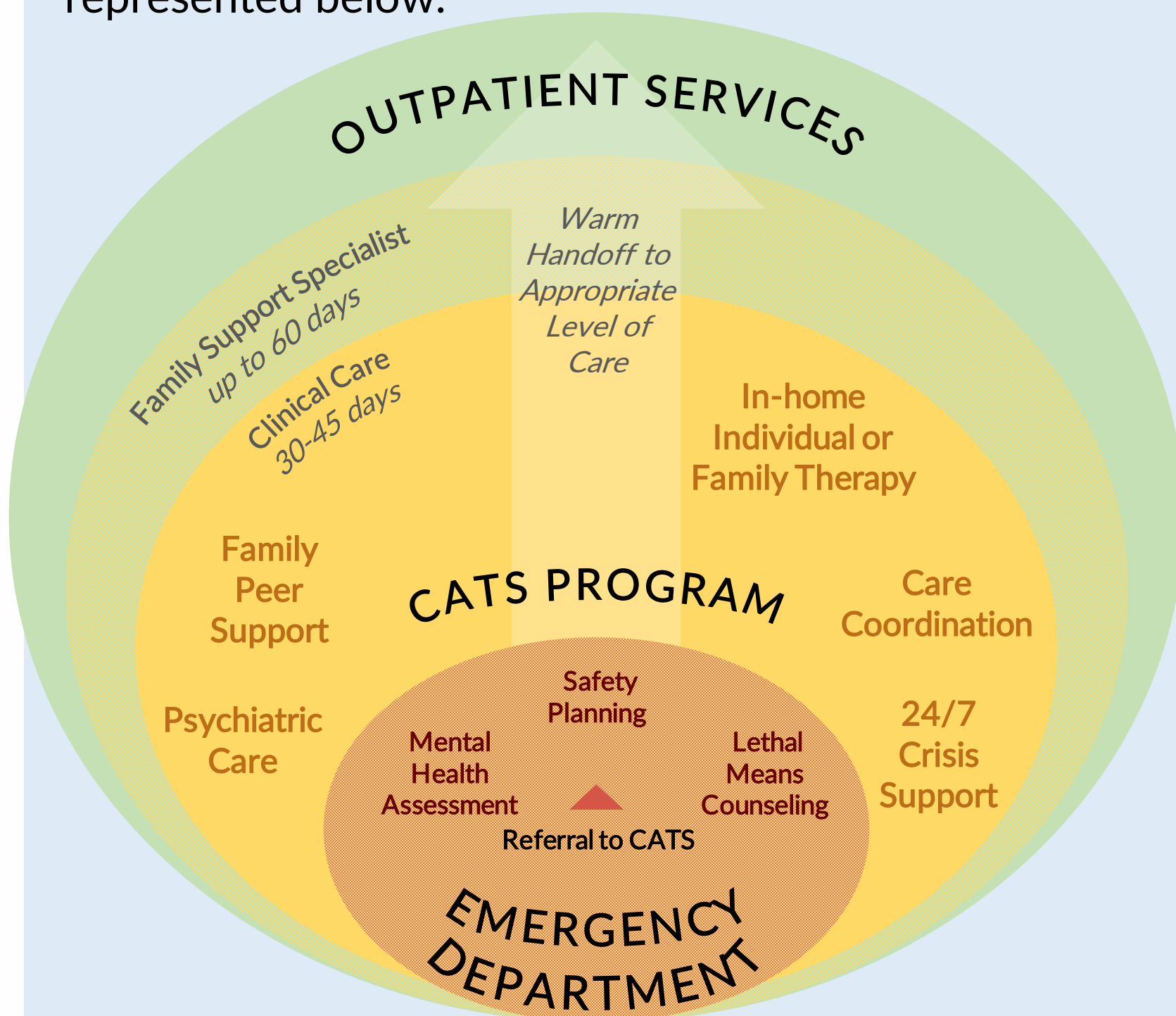


Addressing Psychiatric Boarding in the Emergency Department: A novel program to support youth and families after ED discharge

Rebecca Marshall MD MPH¹, Amanda Ribbers MS¹, Julie Magers BA¹, Ajit Jetmalani MD¹,
Amber Laurie Lin MS², David Sheridan MD MCR²

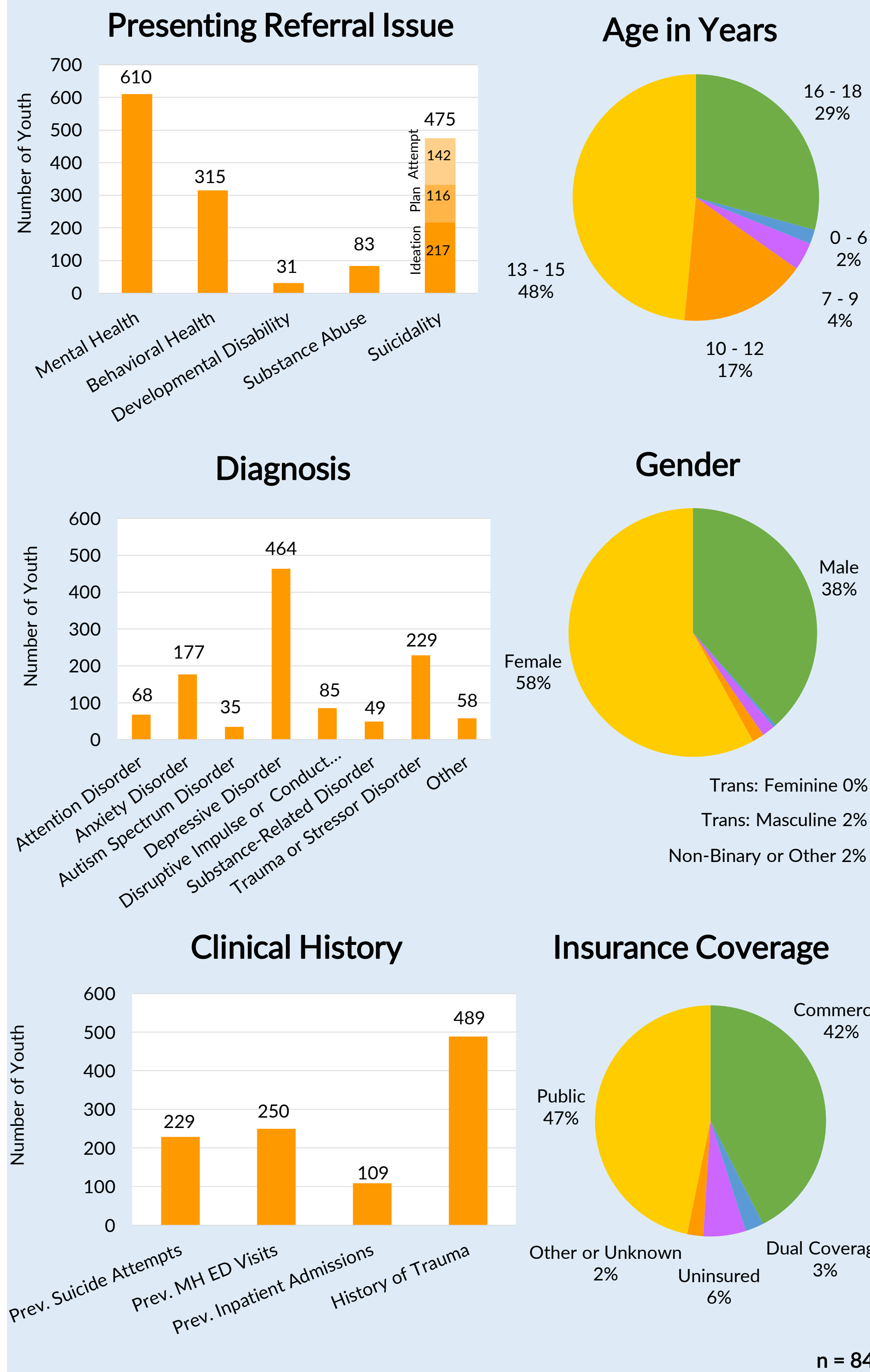
Background: In response to growing numbers of youth in psychiatric crisis boarding in Emergency Departments (EDs), the Oregon Health Authority has developed the Crisis and Transition Services (CATS) program, which delivers intensive bridging services for youth discharging from EDs. Communities have implemented different models of CATS, with possible elements including crisis services, case management, in-home therapy, and family support services, with the standardized model represented below.



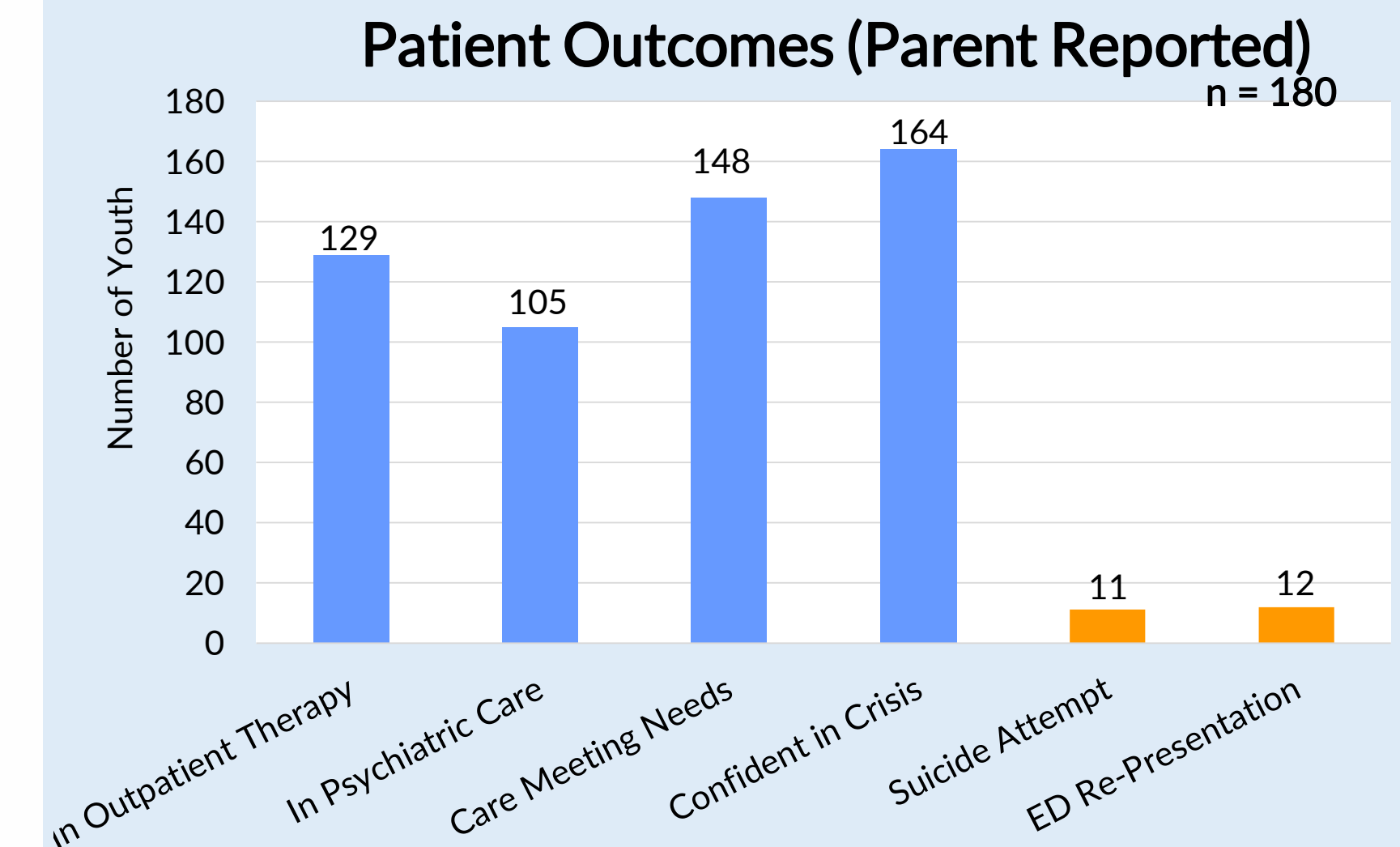
Objectives: Since January 2018, a team has collected data to monitor outcomes, standardize the model of care and inform best practices.

Methods: Demographic and service-delivery data is collected from 10 statewide programs using a secure electronic database. Five programs collect additional data including an acuity measure, the Crisis Assessment Tool, at intake, and a functional measure, the Kidscreen-10, at intake and closure. Participants' parents are contacted two months after close for program evaluation and outcomes follow-up.

Results: Between 1/1/18 and 6/30/19, 845 participants completed CATS at the five research sites.



For youth from the five programs participating in the outcomes study, 180 parents (21%) were reached for two month follow-up calls.*



*Early in the project, participants could opt out of follow-up calls at intake. This contributed to poor follow-up rates. Follow-up rates have improved to approximately 40% since changing the opt out process, adding incentives, and enabling email survey functionality.

Conclusions: Early results suggest that CATS targets a high-acuity population, providing crisis management and stabilization, increasing youth and family skills, and connecting them to long-term resources. Next steps include utilizing a statewide database to improve outcomes measurement and continuing system improvement efforts, such as developing a care algorithm, standardizing and strengthening community models, and expanding to commercial payer coverage.



Oregon Health & Science University
3181 SW Sam Jackson Park Road, Portland, OR 97239
¹ Division of Child & Adolescent Psychiatry, Mail Code: DC7P
² Department of Emergency Medicine, Mail Code:

Contact CATSinfo@ohsu.edu with questions or comments

n = 845