

Top 10 Intervention Series:

#7 Reducing Inpatient Psychiatric Readmissions

Health Services Advisory Group is spotlighting the 10 practices identified in *Reducing Behavioral Health Readmissions: Strategies and Lessons Learned*.¹ Hospitals using a variety of readmission reduction interventions endorsed **these top 10 practices** as **very important** or **critical** for reducing readmissions.

Providers share the responsibility and benefits of ensuring high-quality communication and collaboration throughout the patient continuum of care.

Tips for specific levels of care

Crisis and Inpatient Intake Evaluators:

- Advise outpatient providers in real time of patient's presentation
- Require outpatient provider's input prior to disposition

If patient is referred to begin or return to outpatient care:

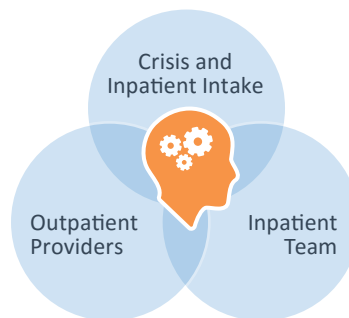
- Follow up with patient next day to confirm planned interventions
- Continue follow up until confirmed patient engagement with providers

Inpatient Treatment Team:

- Host discharge planning meetings with patient/caregiver/family/friend/outpatient provider
- Arrange a warm handoff to new providers or peer referrals before discharge
- Follow up with patient 48–72 hours post-discharge to confirm planned interventions
- Follow up until confirmed patient engagement with outpatient providers

Outpatient Providers (Psychiatrist, Counselor, Assertive Community Treatment (ACT), Pharmacy):

- Respond to patient and other providers' requests as soon as possible*
- Provide 24/7 availability of patient information for more effective decision-making during a crisis
- Be available for planning meetings, warm hand offs, and discharges
- Contact patient between appointments to evaluate status and additional needs



Intervention #7

Improve communication and coordination between providers

Tips for all providers:

- Stay vigilant in efforts for best patient outcomes
- Use health information exchanges
- Acquire and provide real-time information
- Develop protocols for expedited referrals to one another
- Cross-train with other organizations to increase:
 - Understanding
 - Collaboration
 - Utilization of services

For more information, read
**Reducing Behavioral Health Readmissions:
Strategies and Lessons Learned at**
<https://goo.gl/fo0sWr>

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To view and consider interventions 1 through 6 please visit www.hsag.com/bh-resources.
1. *The Office of Mental Health in New York.*

* Clients with personality disorder characteristics may require boundary-setting related to provider contact expectations. A reference article for outpatient providers: *Assessment and Management of Personality Disorders*; <http://www.aafp.org/afp/2004/1015/p1505.html>

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