Overview

Broadlawns Medical Center (BMC) is a community hospital that includes an acute care hospital, emergency and urgent care services, surgery, lab, radiology, mental health, specialty clinics, dentistry, optical and a 24-hour crisis team. In June 2018, Broadlawns added a Psychiatric Urgent Care clinic into its scope of services.

“We have a very large outpatient behavioral health department, and we’d been struggling with access to appointments, prolonged wait times and no-shows. These are all things that are common within large outpatient practices,” says Steve Johnson, behavioral health administrator of BMC. “As we looked at patient needs, we asked, ‘How can we expect mental health patients to keep an appointment that’s scheduled out a month or more?’ Meanwhile, our traditional urgent care clinics were seeing a growing number of behavioral health patients every day. The concept for creating a psych urgent care clinic was discussed for about a year before we really committed to making this concept become a reality.”

Services at Broadlawns Psychiatric Urgent Care include mental health assessments, medication management, therapeutic counseling and coordination of services for health care and basic needs. In addition, the medical center has begun offering electroconvulsive therapy procedures for patients with major depression for whom traditional therapies and medications have been ineffective.

Multiple diagnoses are common and often include medical as well as behavioral health concerns, so the patient care staff includes psychiatric nurse practitioners, physician assistants, and licensed, master’s-level therapists. In addition, there are high rates of homelessness and addiction among the clinic’s patients. Care coordinators are on site to meet the great need for follow-up services.

The Psychiatric Urgent Care clinic is located within the main medical campus, so care providers can transfer patients to the hospital, if needed. The clinic also includes a crisis observation center that is staffed 24/7, where patients experiencing an exacerbated mental health condition can stay for up to 23½ hours.

Impact

On the first day the clinic opened, they had 18 visits. Currently, they average about 200 visits a month. This has resulted in a 5 to 7 percent reduction in behavioral health-related visits to the primary emergency department.
Lessons Learned

Johnson offers a number of recommendations for those organizations looking to open a similar facility:

- Utilize an initial triage to identify patients who primarily need therapy or a prescription refill for antidepressants so that these patients are not put through unnecessary or elongated assessments.

- Ensure that your electronic medical records are readily integrated. “A mid-level prescriber is usually the last one to see the patient,” Johnson says, “so they need access to all the information from the psych urgent care visit as well as any previous medical or mental health visits to make informed assessments.”

- Utilize laptops and a team-based workspace. “Staff are walking around a lot and are not situated at their desks much,” Johnson says. “We ended up converting some offices into patient rooms. For staff, we utilize a large, U-shaped work area, which is ideal, because it enables the nurses, service coordinators, and staff to collaborate and work as a team.”

- Have staff available who can identify patients who qualify for Medicare, Medicaid, and insurance plans and assist them with registering on site.

- Have an efficient process in place with your organization’s laboratory (or a nearby lab) to take samples on site and obtain results quickly.

- Always have ready access to commonly used drugs and injectables so that patients can be treated immediately. For drugs that have special access protocols, have plans in place so that you can utilize those medications when needed.

- Think through patient handoffs. “Have a protocol with medical urgent care, the emergency department, and any other areas within your organization where patients may need to be transferred,” Johnson says. “It’s always helpful to call the department in advance of the transfer and make arrangements for the patient to be escorted to the next area of care.”

- In addition, there should be protocols for transferring patients who present at the emergency department (ED) with a concern that would be better served in psychiatric urgent care, and conversely patients who arrive at the psychiatric center with an issue that qualifies as an emergency under EMTALA that must be treated in the ED.

Future Goals

Currently, Broadlawns Psychiatric Urgent Care is open Monday through Friday, 9 a.m. to 7 p.m., but clinic leaders are exploring the possibility of offering some weekend hours. In addition, last July, the hospital began offering a psychiatric residency program, so they are looking at the clinic being part of a clinical rotation.

Finally, clinic leadership is looking at expanding the resources for addiction presentations. “A lot of patients here present with alcohol, methamphetamine or opioid addictions,” Johnson explains. “We’re good at identifying medical complications related to alcohol abuse, but a methamphetamine high can look like a mental health problem so it takes some time to discern the difference. We need to get addictions treated as quickly as possible.”

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