

## Workflow solutions to improve interdisciplinary collaboration and satisfaction in mental health urgent care

### Background:

- Mental Health Urgent Care Clinic (MHUCC) in Sacramento County is a pilot program that launched in 2017:
  - Aims to address gaps in the mental health system such as lack of inpatient beds, emergency department crowding, long wait times for outpatient services and access to crisis services.
  - Provides walk-in services, crisis intervention, medication management and linkage to outpatient services.
  - Staffed with an interdisciplinary team (IDT) consisting of peer providers, mental health clinicians (clinicians), nursing staff and psychiatric providers (MD/DO, NP/PA).
  - Fast-paced environment with challenges in workflow and communication between disciplines.
- Evidence suggests algorithm-based solutions have been successfully utilized to increase communication and remedy workflow issues among IDTs<sup>1</sup>.

### Problem:

Lack of formal workflow processes at MHUCC for how clinicians:

- Refer patients to a MHUCC psychiatric provider.
- Present clinical information (case presentation) to psychiatric providers.
- Lack of guidelines for psychiatric provider acceptance/rejection of referrals.

Resulting in:

- Tension between clinicians and psychiatric providers.
- Potential bias in patient referrals.
- Negative impact on clinician wellness and job satisfaction.

### Intervention:

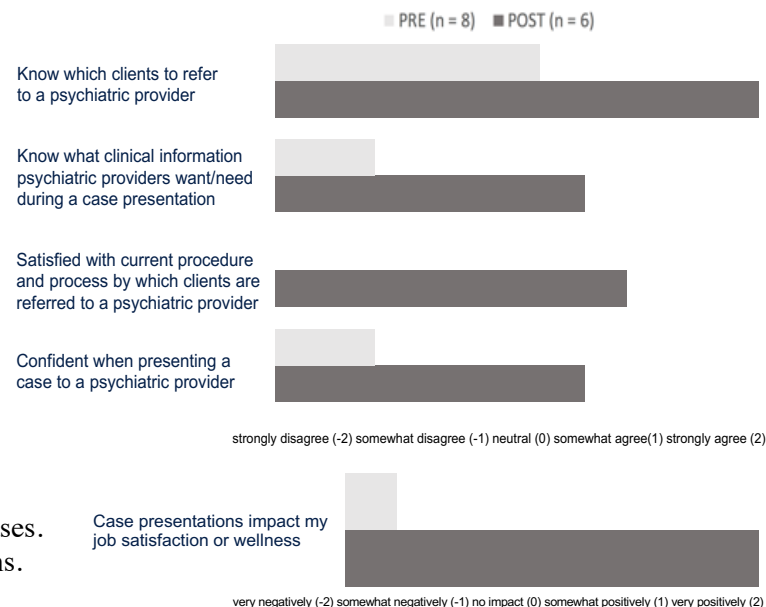
- Create a formal referral process for clinicians using:
  - Decision Tree Algorithm - prioritizing acuity/current provider/county/insurance
  - Modified Crisis Triage Rating Scale/LOCUS
- Develop a case presentation template for clinicians
- Run separate collaborative learning sessions focused on new tools.
  - Clinicians: Didactics, case presentations, role play, feedback.
  - Psychiatric providers: Reviewed algorithm, case presentation.

### Methods:

- Study Design: Descriptive Pilot Study (January 23, 2020 – April 30, 2020)
  - Data on demographics, pre/post implementation surveys and participant observations
- Sample (N=11); pre/post semi over-lapping due to staff turnover and COVID-19

### Results:

- Clinicians report improved knowledge regarding referral process.
- Decision tree helped facilitate referrals to psychiatric providers and increased clinician satisfaction with workflow. Overall, algorithm was viewed as a positive change.
- Template increased clinicians' confidence in presenting cases. Many identified its benefits for junior, but not all, clinicians.



### Implications:

- Structured algorithm-based solutions can successfully address workflow problems in complex, fast-paced safety-net settings that employ IDTs.
- Collaborative learning sessions can enhance interprofessional engagement and education as well as increase overall job satisfaction, which may increase staff retention.