

Conference abstract

Safe Discharges, Stronger Starts: A QI Educational Toolkit for Psychiatry Residents in Michigan

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INTRODUCTION

Psychiatric inpatients need good discharge planning if they are to be safe, continue treatment well, and reduce readmissions. However, psychiatry ward residents may not be equipped with advanced information regarding Michigan-specific disposition structures and funding sources (e.g., Medicaid through Prepaid Inpatient Health Plans and Community Mental Health Services Programs), or differences between programs like Partial Hospitalization Programs versus Intensive Outpatient Programs. Unfortunately, that gap can result in improper transitions, especially for vulnerable populations with serious mental illness, substance use disorders, intellectual/developmental disabilities, exposure to domestic violence, or homelessness.

METHODS

A concise presentation was developed covering core principles, psychiatric options, special populations, funding hierarchies, Partial Hospitalization Programs vs. Intensive Outpatient Programs, and support needs served included in

a short presentation. Differences in Intensive Outpatient Programs difference in extent of time commitment and severity) and medical dispositions (Skilled Nursing Facility, home health). A 8-question pre/post quiz measured agreement with main concepts (1 = Strongly Disagree, 5= Strongly Agree).

RESULTS

Anticipated: Significant increase in “Agree/Strongly Agree” responses post-intervention (target ≥30% improvement).

CONCLUSIONS

This resident-designed quality improvement initiative drives safer, more educated discharge planning. By providing the trainees with Michigan-relevant guidance and tools, this could improve quality of care, reduce readmission, and be a model of replication in residency programs.

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