

Psychiatry Grand Rounds

WCM Department of Psychiatry
Psychology CE Announcement

Length of Stay Reduction and Advocacy for Patients with Severe Mental Illness in General Hospitals: Rationale for a Proactive C-L Psychiatry Model

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11:00am – 12:30pm

<https://weillcornell.zoom.us/j/92812036154>

Meeting ID: 928 1203 6154

Password: 12345

1.5 CE credit available to WCM Department of Psychiatry full time and voluntary faculty Psychologists and Social Workers who sign in with their full name, attend the majority of the lecture and complete a survey which will be emailed following the completion of the lecture. Note the survey must be completed within 30 days of the lecture. Please contact wempsychiatryce@med.cornell.edu for additional CE information

SPEAKER: Dr. Lee has no relevant financial relationship(s) with ineligible companies to disclose and DOES NOT INTEND to discuss off-label or investigational use of products or services.

Hochang Benjamin (Ben) Lee, M.D. is currently serving as the John Romano Professor and Chair of the Department of Psychiatry at the University of Rochester School of Medicine and Dentistry. Dr. Lee is an eminent personality in the field of Psychiatry, and he also holds the position of Editor-In-Chief for the Journal of the Academy of Consultation-Liaison Psychiatry. Additionally, he is the President of the International College of Psychosomatic Medicine. Dr. Lee's primary research interests include developing innovative models for delivering behavioral health services for medical and surgical patients. He is also dedicated to the prevention of neuropsychiatric morbidity, such as delirium, depression, and dementia, among the elderly population after major surgery. Lastly, Dr. Lee is also involved in Asian American mental health disparity research, with a particular focus on the elderly.

Abstract:

Studies have found that patients with severe mental illness (SMI) often receive suboptimal care during their medical stays in general hospitals. When involved in their care, C-L psychiatrists can and should advocate for equitable care for patients with SMI. Proactive C-L psychiatry model is an interdisciplinary model of inpatient C-L practice that incorporates four components: systematic screening, proactive clinical engagement, an interdisciplinary team approach, and care integration. While length-of-stay reduction and staff satisfaction associated with proactive C-L psychiatry model has provided the financial and administrative rationale for the recent spread of the proactive C-L psychiatry services across many hospitals around the country, the greatest value of proactive C-L psychiatry lies in its advocacy for the equitable care of patients with mental illness.

Learning Objectives:

1. Recognize the role of C-L psychiatrists in advocating for equitable care for patients with severe mental illness in general hospitals.
2. Explain the principles and elements of the proactive C-L psychiatry model that integrates behavioral health services into acute medical services, as described by the APA Resource Document.
3. Identify the key advantages of the proactive C-L model over the conventional C-L model such as reduced hospital length of stay, enhanced psychiatric service utilization, reduced time to psychiatric consultation, and improved provider and nurse satisfaction.

References:

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2. Oldham, M., Desan, P. H., Lee, H., Bourgeois, J. A., Shah, S. B., Hurley, P. J., & Sockalingam, S. (2021). Proactive Consultation-Liaison Psychiatry: American Psychiatric Association Resource Document. *Journal of the Academy of Consultation-Liaison Psychiatry*, 62(2), 169–185. <https://doi.org/10.1016/j.jaclp.2021.01.005>
3. Oldham, M., Desan, P. H., Lee, H., Bourgeois, J. A., Shah, S. B., Hurley, P. J., & Sockalingam, S. (2021). Proactive Consultation-Liaison Psychiatry: American Psychiatric Association Resource Document. *Journal of the Academy of Consultation-Liaison Psychiatry*, 62(2), 169–185. <https://doi.org/10.1016/j.jaclp.2021.01.005>
4. Walker, J., Burke, K., Toynbee, M., Van Niekerk, M., Frost, C., Magill, N., Walker, S., Sculpher, M., White, I. R., & Sharpe, M. (2019). The HOME Study: study protocol for a randomised controlled trial comparing the addition of Proactive Psychological Medicine to usual care, with usual care alone, on the time spent in hospital by older acute hospital inpatients. *Trials*, 20(1). <https://doi.org/10.1186/s13063-019-3502-5>
5. Sledge, W. H., Gueorguieva, R., Desan, P., Bozzo, J. E., Dorset, J., & Lee, H. B. (2015). Multidisciplinary Proactive Psychiatric Consultation Service: Impact on Length of Stay for Medical Inpatients. *Psychotherapy and psychosomatics*, 84(4), 208–216. <https://doi.org/10.1159/000379757>