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### SIGNIFICANCE:

Outcome measures are increasingly important in healthcare. Feasible measures for CL psychiatry are lacking. Can we identify quality improvement measures that require minimal manual effort and allow for repeated review?

### METHODS:

- Retrospective review using encounter diagnosis and problem list codes from electronic health records for patients admitted to medical floors at the San Diego VA Medical Center from January-June 2019
- Quality measures: mental health follow up and readmission rates
- Mental health diagnoses: serious mental illness (SMI), defined by psychotic or bipolar disorders; mental health continuum (MHC) diagnoses, defined by PTSD, depressive disorders, and anxiety disorders; substance use disorders (SUD); and neurocognitive disorders
- Analysis was done with logistic regression.

### REFERENCES:

Kroll DS, Gopal A, Kimmel RJ, Mattson J, Beizai K, Danovitch I. Performance measurement tools for consultation-liaison psychiatry services must consider feasibility. *Gen Hosp Psychiatry*. 2020 May-Jun;64:46-49.

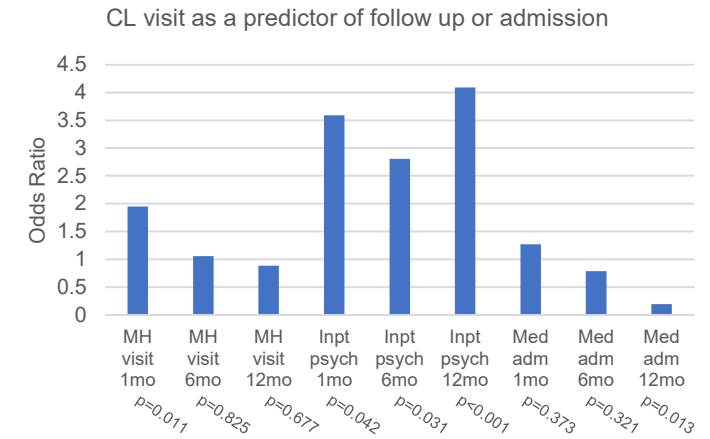
J.M. Oldham, W.E. Golden, B.M. Rosof. Quality improvement in psychiatry: why measures matter. *Psychiatr Pract*, 14 (Suppl. 2) (2008 May), pp. 8-17

# The association between CL visits and mental health follow up is a feasible quality improvement measure for a VA CL Psychiatry service.

### PATIENT DEMOGRAPHICS

- 2,681 total unique admissions
- Mean age: 67
- 92.7% male, 71.5% white, 84.7% non-Latinx
- 1,259 patients had at least one mental health diagnosis
- 92 patients were seen by CL service with mean of 1.75 encounters for those seen during the admission

### OUTCOMES



Being seen by CL was associated with greater likelihood of MH follow up in the month after discharge and of MH admission in the next year. It was associated with lower odds of medical admission in the next year.

### DISCUSSION:

- While patients seen by CL were more likely to be readmitted to inpatient psychiatry, this may be related to increased illness severity among patients receiving CL consultation.
- Our data identifies an opportunity to increase post-discharge engagement in patients with SMI.
- Given the minimal manual data input or individual chart review required, this analysis can be repeated on a regular basis for performance measurement in the future, including measuring the impact of new resources.