

# Efficacy and Care Continuity of a Psychiatric Gap Care Clinic: A Program Evaluation

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## Purpose

Program evaluation performed of an Academic Medical Center's (AMC) psychiatric gap care clinic to determine efficacy of clinic & identify areas of improvement moving forward

## Background & Significance

Psychiatric Gap Care Clinics aim to provide aid & continuum of care, allowing patients time to establish mental health services & decompress emergency departments & inpatient units

Regional trend similar to national trend of mental health crisis & lack of available mental health treatment services

Nationally,

- 36.9% of adults experience depression & anxiety with 41.7% not receiving service due to cost
- 37% of high school students experience depression & anxiety of which 55% are not receiving services
- Overall, seven times more likely to be forced out-of-network for mental health care vs primary care

Regionally,

- Gap Clinic location is designated Mental Health Professional Shortage Area (MHPSA)
- Daily average of 33 adults & 10 children on state hospital wait list post pandemic
- Some discharged from emergency department without psychiatric treatment, despite deemed threat to selves or others as temporary detaining order (TDO) expired prior to bed availability

Program

Evaluation

Model



CDC, 2019

## Methods

### Data Collection

Retrospective analysis: data collection over 6 months span

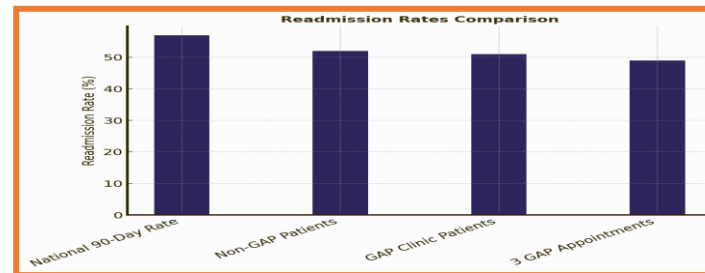
- Time frame: 1/2024-6/2024
- Source: electronic health records

Data gathered:

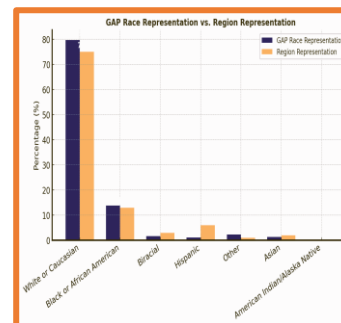
- Psychiatric discharges from ED & inpatient services
- Gap clinic appointments scheduled upon discharge
- Readmission rates of seen vs not seen over 90 days
- In person vs virtual scheduled and no-show vs completed appointments
- Patient demographics

## Results

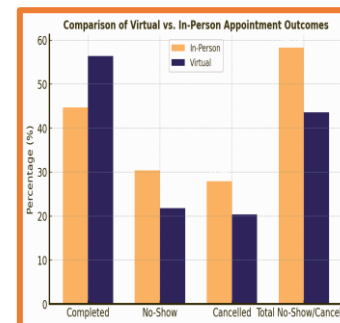
### Readmission Rates



### Demographics



### Appointment Adherence



## Conclusions

- Readmission rate for GAP vs Non-GAP (50.47% vs 51.54%)
- Reduced readmission rate for GAP Clinic patients (1.07%)
- Further reduction in readmission rate for GAP Clinic patients found with adherence to all 3 GAP Clinic appointments (49.26%)
- Reduced readmissions implications: reduced cost & improved patient outcomes
- More in-person appointments made but more virtual completed
- No show/cancel rate higher in-person vs virtual (58.3% vs 43.6%)
- Overall, clinic demographics consistent to region with exception to Hispanic population (79.7% White, 13.8% African American & 1.13% Hispanic)
- Care disparity identified at GAP Clinic specific to Hispanic population (regional demographics vs GAP Clinic demographics of Hispanic population (6.6% vs 1.13%))

## Recommendations

- Improve patient appointment compliance
- Establish automated appointment reminder via Gap Clinic similar to other ambulatory services
- Assist with EHR sign up to access virtual visits prior to discharge (My Chart appointment attendance was 7.9% higher than other virtual methods and 19.5% higher than in person)
- Further assessment of demographic disparities & interventions to improve equity access and culturally competent care

## Acknowledgements

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## Reference QR Code

