

SAVE THE DATE!

Identifying Effective Solutions: Reducing Psychiatric Boarding in Emergency Rooms

Wednesday, December 11, 2019

3:00 – 4:00 PM ET

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Psychiatric boarding has become an increasing problem in Emergency Departments (EDs) across the country, weighing heavily on the ED system and adversely impacting patients. One survey revealed the odds of boarding for psychiatric patients were 4.78 (2.63-8.66) times higher than non-psychiatric patients. This results in patients being subjected to long wait times in a chaotic atmosphere that can compound their psychiatric issues.

Multiple factors contribute to the ED boarding of psychiatric patients, ranging from large societal challenges and hospital-systems issues to individual patient characteristics.

Join us for a webinar hosted by the American Psychiatric Association (APA), American College of Emergency Physicians (ACEP), and Coalition on Psychiatric Emergencies (CPE) to identify how communities and emergency departments can mitigate the problem, and the role of psychiatrists to improve care for patients based on APA's Resource Document, "Boarding of Mentally Ill Patients in Emergency Departments".

Participants will learn:

- The effect of boarding on persons with mental illness (patient perspective)
- The extent of the problem of mentally ill patients in the EDs
- Possible solutions on the local, state, and national level to help minimize boarding

Agenda:

- Introduction:
 - Michelle Dirst, Director of Practice Management and Delivery Systems Policy, American Psychiatric Association
- Faculty:
 - Kimberly Nordstrom, MD, JD, University of Colorado School of Medicine, Department of Psychiatry
 - Michael P. Wilson, MD, PhD, University of Arkansas for Medical Sciences, Department of Emergency Medicine
 - Jennifer Snow, Acting National Director, Advocacy and Public Policy, NAMI

The American Psychiatric Association (APA) Association is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The APA designates this live activity for a maximum of 1 AMA PRA Category 1 Credit™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.