



STUDY OBJECTIVES

Evaluate post-discharge outcomes of the RSP intervention

Obtain follow-up data on patient and caregiver motivation and utilization of coping and communication strategies identified on the patient's individualized safety plan following discharge

Hypotheses

- Self-reported motivation and utilization of coping and communication strategies will be greater at 1w than at the 1m and 3m assessment points

Exploratory

- Improvement in daily functioning from 1w to 1m and 3m

BACKGROUND

- Suicide is the second leading cause of death among adolescents in the United States
- Demand for psychiatric emergency services and inpatient beds is increasing, while the number of beds available decreases or remains static
- One solution is to decrease length of inpatient admissions by implementing an intensive short-term intervention

Rapid Stabilization Pathway (RSP)

- Creative, values-based safety-planning intervention utilizing DNA-V model of ACT for hospitalized adolescents experiencing an acute crisis
- RSP leads to a significantly shorter LOS compared to standard care without associated increase in readmission to psychiatric inpatient unit or the psychiatric emergency room
- Although promising, data on long-term effectiveness of this intervention is needed

ACKNOWLEDGMENTS

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SETTING & PARTICIPANTS

Setting

- URM/Golisano Children's Hospital Pediatric Inpatient Psychiatry
- Follow-up data is collected via telephone calls or REDCap survey links sent to the participant's email based on preference

Participants

- Participants are adolescents and their caregivers admitted to the child and adolescent inpatient psychiatric unit (4-9000) who have received the RSP intervention
- Target N=30 dyads
- 11 - 17 years of age
- Enrollment is ongoing

Exclusion criteria

- Suspected intellectual disability, moderate to severe autism spectrum disorder, mania, or psychosis

METHODS

- Within-subject longitudinal design
- Follow-up surveys sent at 3 time points following discharge
 - 1-week, 1-month, 3 months

Measures

- Columbia Impairment Scale: Parent & Youth Versions
 - Assesses adolescent functioning across multiple domains
- Motivation and Utilization of Safety Plan: Parent & Youth
 - 3 Likert style questions
 - Caregiver and adolescent motivation to support/use safety plan and self-reported adolescent use of coping and communication skills

Data Analysis

- Descriptive statistics on demographic information
- Repeated measures analysis of variance (ANOVA)
- Effect sizes will be calculated

DISCUSSION

- A short-term, intensive individual and family intervention allows for a shorter LOS, therefore, allowing more patients to receive care
- Data from this study will allow us to assess the efficacy and generalizability of the RSP intervention
- Future studies should compare long-term outcomes of adolescents who received the RSP intervention to those who received standard care
- If the long-term outcomes supports use of the RSP intervention, more psychiatric hospitals should implement RSP to meet the growing demand of psychiatric crisis services

Limitations

- Use of self-report measures
 - May not be an accurate representation of true behavior and functioning
- Not controlling for additional supports and services utilized post-discharge
- No standard care comparison group

Example Communication Chart

Mood Level	What it means	What I should do	What my support system can do
1	Excited, happy, talkative, energetic, kind	Enjoy the moment, spend time with others	Act as normal, enjoy the moment with me
2	Feeling good, content, peaceful, less talkative but sill social	Go for a walk, talk with friends, spend time with family, play with dog, read a book	Do something active with me, tell me about your day, encourage me to get outside or engage in an enjoyable activity
3	A bit quiet, slightly anxious, discontent	Listen to music, read a book, watch a funny video, go for a walk, talk with my friend	Give me space if I ask for it, listen without judgement, help me problem solve, encourage me to do something active
4	Irritable, on edge, short-tempered, low frustration tolerance, snapping at others, anxious, quiet, isolating	Deep breathing, grounding, take a hot shower, intense exercise, be in nature, talk with trusted adult	Go on a car ride with me, help me problem solve, encourage me to use coping skills, give me space if I ask for it, check-in on me to see how I am doing
5	Hopeless, deeply depressed, numb, isolating, crying, <i>possible thoughts and plan for ending life</i>	<i>Share my #</i> Be physically near someone, contact therapist, contact crisis support	Give me a hug, sit with me but don't talk, make sure I am safe <i>If both a plan and intent for suicide, coordinate crisis support (hospital, 911, mobile crisis)</i>

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