

Inpatient Outpatient Continuity

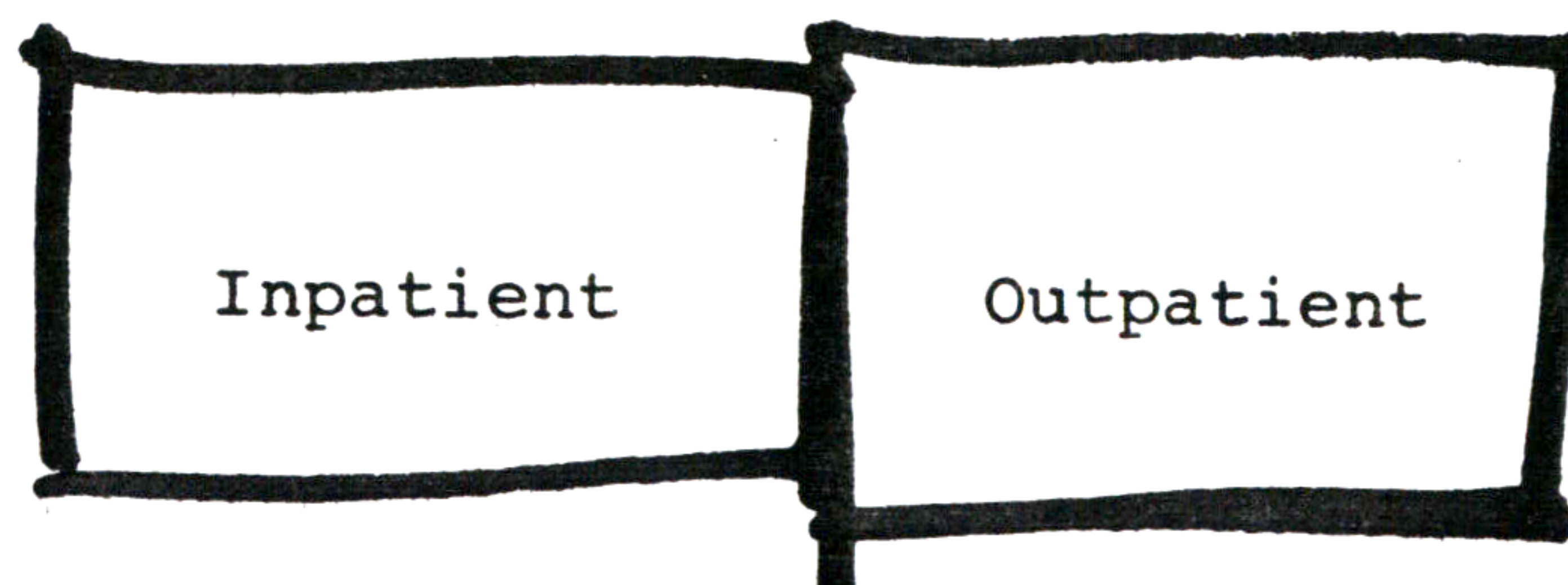
Treatment programs which violate continuity of care are bad for patients.

When they leave the inpatient unit, and go to the outpatient unit, patients should not have to go to another building since the place, the therapists, and the nurses will all be unfamiliar to them.

Ideally the transition should be smooth so that they can stay in a familiar therapeutic situation while making the change from inpatient to outpatient.

This continuity can only be maintained if there is an outpatient unit next to every inpatient unit. That way outpatients do not have to go back into the inpatient unit as they get better, and inpatients do not have to go into the outpatient unit before they are ready.

Therefore: In any mental health center with inpatients, locate an outpatient unit next to the inpatient unit.



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This pattern is tentative. If you have any evidence to support or refute its current formulation, please send it to the Center for Environmental Structure, P.O. Box 5156, Berkeley, California 94705; we will add your comments to the next edition.