



Racial Inequities in Physical and Chemical Restraint Use in the Emergency Psychiatric Setting

*Live Webinar (including Q&A)
Date to be determined*

FREE to OPPIA Members; all others \$39

This webinar will address current research on racial inequalities in physical and chemical restraint use in the emergency psychiatric setting. Participants will learn about the impact of unconscious bias and structural racism on patient care. Participants will be inspired to self-examine their own biases and to make changes in their practice that reduce race-based inequities.

WHO SHOULD ATTEND

This webinar is designed for psychiatrists and residents/fellows. Other groups may find this educational activity of value, including other non-psychiatric physicians including primary care, as well as psychologists, nurses, social workers, counselors, physician assistants, and other mental health care professionals.

LEARNING OBJECTIVES

- Identify a case highlighting outcome by race in the emergency psychiatric setting.
- Discuss existing evidence demonstrating racial disparities in chemical and physical restraint use in emergency psychiatric care.
- Describe how structural racism contributes to physical and chemical restraint use in the emergency psychiatric settings.

SPEAKERS

Jane P. Gagliardi, MD MHS, FACP, DFAPA completed medical school, residency training in combined internal medicine-psychiatry, and her masters of health science in the clinical research training program at Duke, where she has remained on faculty since completing residency training. She is a small group leader in the medical school Clinical Skills course and founded and co-directs the medical school Evidence-Based Medicine course. Dr. Gagliardi is particularly interested in the interplay between patient safety measures, various pressures in medicine including implementation of the electronic health record, and medical education, and equity, and she has worked to develop and encourage projects in patient safety and quality improvement. She does inpatient clinical work in both departments, spending time on the General Medicine, inpatient Psychiatry, combined Medicine-Psychiatry, Consultation-Liaison Psychiatry, and Emergency Psychiatry services.

Colin M. Smith, MD is a PGY-6 and chief resident in the combined internal medicine-psychiatry residency program at Duke University Medical Center and a master's student in the Duke Global Health pathway for residents at the Duke Global Health Institute/Hubert Yeargan Center for Global Health. He currently serves as a Lieutenant Commander in the United States Public Health Service Commissioned Corps. Dr. Smith has devoted his research and career to elucidating and addressing injustice in health care and has published on topics ranging from mental health intervention for people living with HIV in low- and middle-income countries to racial disparities in provision of emergency mental health services in the United States.

CME

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