

CORRECTION

Open Access



Correction to: Proceedings of the Addiction Health Services Research (AHSR) 2020: Virtual Conference: Part 2

Correction to: Addict Sci Clin Pract (2020) 15(Suppl 2):35
<https://doi.org/10.1186/s13722-020-00208-4>

After publication of this supplement [1], it was brought to our attention that errors were apparent in the following abstracts.

A1 “Patient characteristics associated with admission to low-safety inpatient psychiatric facilities: evidence of racial inequities” (AW01)

Morgan C. Shields

Lead Author Affiliation: Center for Mental Health, Department of Psychiatry, Perelman School of Medicine, University of Pennsylvania, 3400 Civic Center Blvd, Philadelphia, PA 19,104, USA

Correspondence: Morgan C. Shields (shmorg@upenn.edu)

Correction:

The text of the abstract is incorrect. The abstract text should read:

Background: I examined patient demographic, clinical, payment, and geographic factors associated with admission to low-safety inpatient psychiatric facilities.

Methods: Massachusetts all-payer 2017 discharge data (N=39,128) were linked to facility-level indicators of safety (N=38). A composite of safety performance was

constructed by averaging standardized measures of restraint and seclusion, as well as five-year (2014–2018) averages of overall, substantiated, and abuse-related (verbal, physical, sexual abuse) complaints per 1,000 discharges ($\sigma=0.73$). This composite informed the grouping of high (top 20%), middle, and low-safety (bottom 20%) performers. I first examined unadjusted differences across safety groups, as well as differences in bypass patterns across racial and ethnic groups. I then fit a series of multinomial regression models, adding payment and geography separately.

Results: Outstanding factors independently associated with admission to low-safety facilities were being a racial or ethnic minority compared to White patient (relative risk ratio [RRR] for non-Hispanic Black=1.7, 95% CI=1.5–2.0; non-Hispanic Asian=5.6, 95% CI=3.6–8.7; non-Hispanic “other” race=2.2, 95% CI=1.7–2.7; Hispanic/Latinx=1.3, CI=1.1–1.5), and not having private insurance (RRR for uninsured/self-pay=2.4, CI=1.6–3.6, Medicaid=1.8, CI=1.6–2.0, Medicare=1.3, CI=1.2–1.5). Several other factors were independently associated with admission to low-safety facilities, such as substance use disorder other than alcohol, proximity, severity, schizophrenia/psychosis, homelessness, and younger age.

Conclusion: There were considerable racial and ethnic inequities in admission to low-safety inpatient psychiatric facilities even after accounting for clinical, geographic,



and payment characteristics. Future research should further examine quality variation and outcomes, as well as how community-based referrals, mode of transport (e.g., police, self), and deliberate steering and selection affect admissions and outcomes.

The original paper has been updated.

A53: "A Multidisciplinary Outreach Team Approach to Treatment Engagement in Medication for Opioid Use Disorder" (IS03)

Courtney M. DelaCuesta, BS*; Rebecca Uth, PsyD; Linda Hurley, MA, CAGS, LCDCS; and Rosemarie Ann Martin, PhD.

Lead author affiliation: Brown University School of Public Health, 121 S Main St, Providence, RI 02903, USA

Correspondence: Courtney DelaCuesta (Courtney_DelaCuesta@brown.edu)

Correction:

The title of the abstract is incorrect. The title should read:

A Multidisciplinary Outreach Team Approach to Treatment Engagement in Medication for Opioid Use Disorder

A75 "Examining preliminary data for opioid-related technical assistance requests for underserved communities" (MM08)

Holly Hagle, Michael Knabel, Yifei Liu, Frances Bozsik, Ignacio Alex Barajas Munoz, Laurie Krom, Aimee Campbell, Kathryn Cates-Wessel, and Frances Levin.

Lead Author Affiliation: University of Missouri, Kansas City, 5000 Holmes St, Kansas City, MO 64,110, USA.

Correspondence: Holly Hagle (hagleh@umkc.edu).

Correction:

The lead author of the abstract should be Holly Hagle, Ph.D., and corresponding author should be: Correspondence: Holly Hagle (hagleh@umkc.edu), the original paper has been updated.

A100: "Operationalizing Person-Centered Care in Behavioral Health Treatment: How can Treatment Centers Implement "Respect for Patients' Values, Preferences, and Expressed Needs?" A Qualitative Study" (SW13)

Olivia Randall-Kosich, MHA*; Barbara Andraka-Christou, JD, PhD; Rachel Totaram, MHA; Kendall Cortelyou-Ward, PhD; Olena Mazurenko, MD, PhD; Danielle Atkins, PhD; and Andriy Koval, PhD.

Lead Author Affiliation: Georgia State University School of Public Health, 140 Decatur St SE, Atlanta, GA 30303, USA

Correspondence: Olivia Randall-Kosich (orandalkosich1@gsu.edu)

Correction: An author was left out of the original author list. The author that was left out is:

Olena Mazurenko, MD, PhD

A126: "Screening, Self-Management, and Referral to Treatment (SSMRT): A Secondary Prevention Platform for Populations Without Access to Care" (TD18)

Karen T. Y. Tang, BA*; Alexandra Loverock, MSc; Jakob Koziel, MSc; Cameron Wild, PhD, and Igor Yakovenko, PhD.

Lead Author Affiliation: Dalhousie University, 6299 South St, Halifax, NS B3H 4R2, Canada

Correspondence: Karen Tang (karen.tang@dal.ca)

Correction: An author was left out of the original author list.

The author that was left out is: Cameron Wild, PhD

Published online: 02 March 2021

Reference

1. Proceedings of the Addiction Health Services Research (AHSR) 2020: Virtual Conference: Part 2. Addict SciClinPract. 2020;15(Suppl 2):35. <https://doi.org/10.1186/s13722-020-00208-4>.

Publisher's Note

Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.

Ready to submit your research? Choose BMC and benefit from:

- fast, convenient online submission
- thorough peer review by experienced researchers in your field
- rapid publication on acceptance
- support for research data, including large and complex data types
- gold Open Access which fosters wider collaboration and increased citations
- maximum visibility for your research: over 100M website views per year

At BMC, research is always in progress.

Learn more biomedcentral.com/submissions

