**Abstract**

**Nature and scope of the project.** In the United States and within the Arrowhead region of Minnesota, there is a lack of access to mental health services for individuals experiencing an acute crisis (Falconer et al., 2018; Minnesota Department of Health, 2021). Coates (2018) describes different approaches for providing crisis care within the community. This quality improvement project aimed to develop a best practice toolkit about implementing the Living Room Model (LRM), an identified approach for crisis care in the community, at a facility that is under development.

**Synthesis and analysis of supporting literature.** Literature synthesis revealed that lack of access to mental health care contributed to the phenomenon of boarding in the Emergency Department. Boarding can be lengthy, detrimental to patients, and costly to facilities (Canady, 2019; Nordstrom et al., 2019). While community-based care does not have a one-size fits all approach, care in a relaxed environment is preferred by consumers. Heyland et al. (2013) describe the LRM as an approach to providing care in a homelike environment, instead of a sterile facility. Centers using the LRM can provide crisis services that negate the need for an Emergency Department visit, save money, and consumers find hope in peer support (Ashcroft, 2006; Heyland et al., 2013).

**Project implementation.** The principal investigator developed interview questions to interview experts in providing acute mental health crisis care, at facilities using the LRM and with local facilities who do not use the model. Two experts provided answers to the interview questions which were used to inform development of the best practice toolkit that describes appropriate triage consideration and assessments and guides patient flow using the LRM.

**Evaluation criteria.** The best practice toolkit was evaluated by the experts interviewed and four additional experts using a survey containing Likert-scale and open-ended questions. Survey feedback was used to revise the toolkit before it was presented for final evaluation.

**Outcomes.** The best practice toolkit received positive feedback from the experts with 100% reporting the recommendations were clear and feasible to implement at a facility in Minnesota.

**Recommendations.** Use of the LRM is recommended to the project setting.