



## Introduction & Background

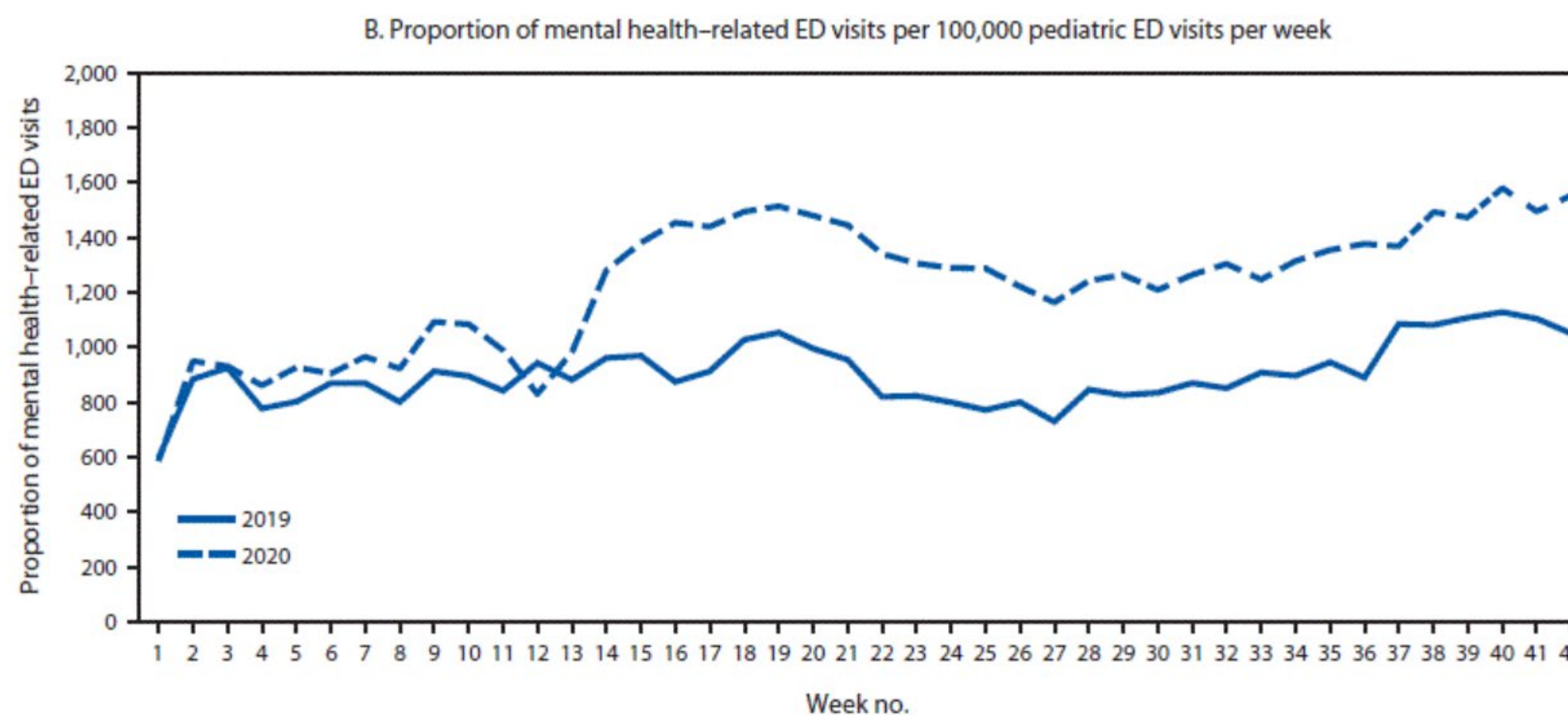
As of March 2020, the World Health organization labeled COVID-19 a pandemic, followed by regulations including stay at home restrictions and school closures, resulting in elevated distress among youth (Hill, 2021). Emergency department (ED) visits are often the first point of care for pediatric mental health emergencies, and throughout 2020 there was a **66% increase in mental health presentations** among children <18 years old. (Leeb, 2020). Although the need for mental health resources has increased, there is still a lack of quality care being met. The most prevalent issue is called boarding, defined by The Joint Commission as, "holding patients in the ED after the decision to admit or transfer has been made." **Children seeking mental health care can be boarded anywhere from 3 to 41 days**, (Hoffman, 2019), **receiving little to no psychiatric care.**



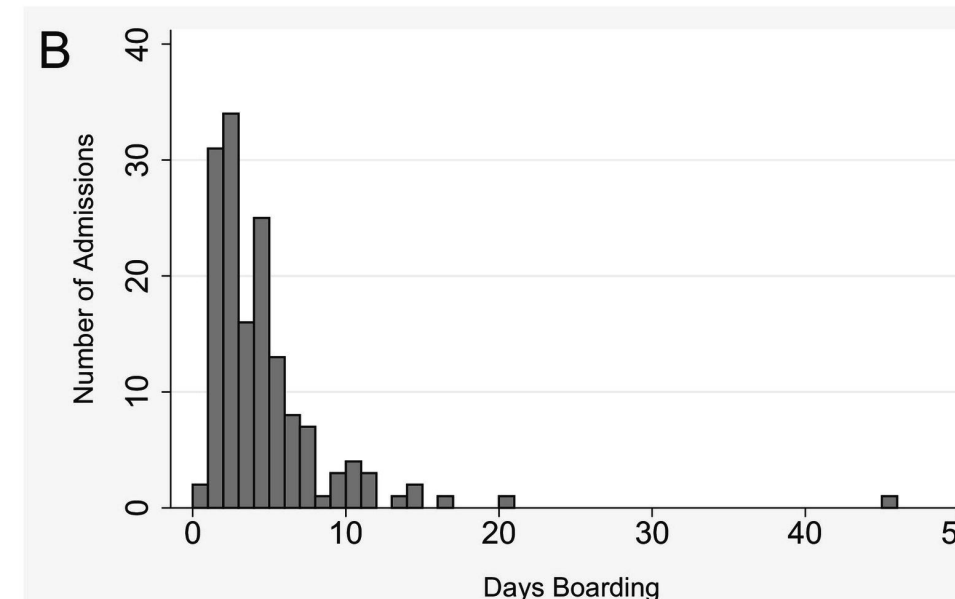
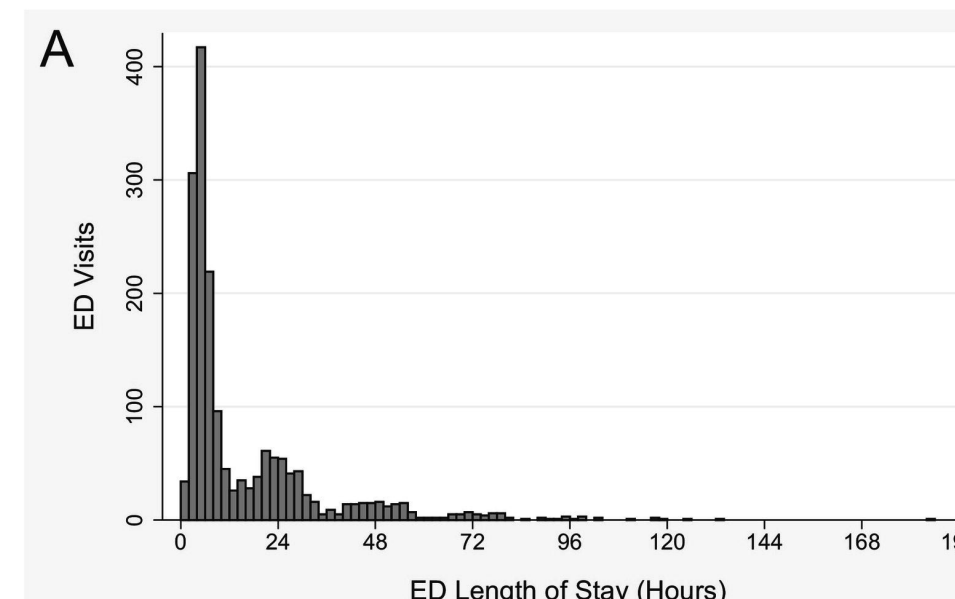
## Purpose Statement

**To understand the phenomenon of prolonged boarding in pediatric patients with acute mental health emergencies. What is the impact of COVID-19 on children's mental health?**

## Findings



- ❑ Overall, ED visits decreased 43% in 2020, with a **66% increase in mental health presentations**, (Leeb, 2020).
- ❑ **Suicidal ideation** among children increased by **59%**, (Carison, 2021).
- ❑ **Self-harm, suicidal ideation, drug overdose, and suicide attempts** made up **55%** of all mental health presentations, (Carison, 2021).
- ❑ **58% of Children experienced boarding**, (McEnany, 2020).
- ❑ Children cumulatively spent **49,853 hours** in the ED, (Hoffman, 2019).
- ❑ **16% - 32% of children seeking psychiatric care** were not seen by a mental health provider, (Kalb, 2019).



## Literature Review Methods

### Databases

- PubMed and CINAHL

### Key words

- Pediatric mental and behavioral health
- pediatric emergency
- Psychiatric
- COVID-19 & pandemic.

Articles needed to be published within 5 years. Twenty articles were reviewed.

## Conclusion

The COVID-19 pandemic has burdened an already unsteady system. There are not enough mental health providers, (Scruth, 2020), to meet the increase of pediatric mental health presentations. As well, there is a lack of resources for children seeking mental health care (Hoffman, 2019), prevalent boarding issue (McEnany, 2020), lack of psychiatric training for ED providers, inadequate interventions, and a high demand for psychiatric beds, (Reynolds, 2019). New interventions are required to achieve better patient outcomes (Reynolds, 2019).

- Increase mental health education for new and existing nurses.
- Additional funding in this area of research.
- More tools to evaluate mental health status.
- Increase collaboration efforts with mental health care providers.

## References

