



Preparing for Pediatric Mental Health Crises in the Emergency Department

Mental health is an area of continuing challenge for children and their families. Suicide is a leading cause of death among adolescents 12–17 years old in the United States, according to the Centers for Disease Control and Prevention (CDC). The adolescent suicide death rate has steadily increased in the last decade ([National Center for Health Statistics 2016](#)). With the impact of the COVID-19 pandemic, particularly on youth, some of the deficiencies and lack of capacity in the mental health system have been exacerbated. Mental health emergency department (ED) visits were increasing before COVID19, and with the pandemic, even more children are presenting with mental health concerns to the ED.



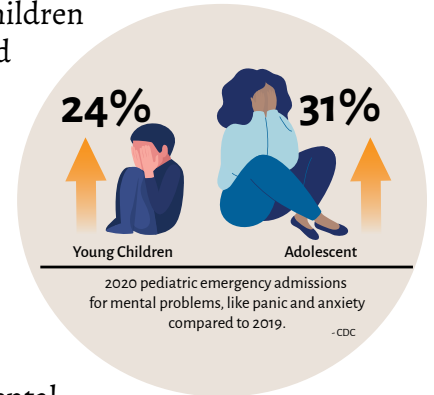
Suicide is a leading cause of death among adolescents 12–17 years old.

As the number of children presenting with stress, anxiety, and depression has skyrocketed throughout the country, EDs have been overwhelmed and are struggling to adjust and cope

with the need for psychiatric services. Many ED providers feel that they have inadequate training and resources to manage this unprecedented demand.

A recent [article in the New York Times](#) featuring Dr. Rachel Stanley, Chief of Pediatric Emergency Medicine at Nationwide Children’s Hospital and the co-lead for the Research Domain of the Emergency

Medical Services for Children (EMSC) Innovation and Improvement Center, discussed how the COVID-19 pandemic has exposed these shortcomings and inadequacies in the mental health care infrastructure. When access to outpatient mental health services is inadequate, clinicians struggle to adjust to this surge in demand, and the lack of preparedness to provide mental health



The number of children presenting to EDs with suicidal ideation/gesture tripled between 2007-17, despite total ED visits by children staying flat.

care in EDs is starkly apparent. As clinicians struggle to adjust to this surge in demand., the EDs see a lack of preparedness for mental health care, as clinicians struggle to adjust to this surge in demand.

EMSC, a federally funded program of the Health Research and Services Administration (HRSA) has developed several programs to help develop education and resources focused on mental health emergencies for a variety of audiences.

Additional Resources:

- HRSA [Critical crossroads toolkit](#)
- [EHC PEAK \(Pediatric Education and Advocacy Kit\)](#) Mental health toolkit (launch mid-June 2021)

Selected Publications:

- Predicting 3-Month Risk for Adolescent Suicide Attempts Among Pediatric Emergency Department Patients <https://acamh.onlinelibrary.wiley.com/doi/abs/10.1111/jcpp.13087>
- Five Profiles of Adolescents at Elevated Risk for Suicide Attempts: Differences in Mental Health Service Use <https://pubmed.ncbi.nlm.nih.gov/31830523/>
- Risk And Protective Factors for Suicide Among Sexual Minority Youth Seeking Emergency Medical Services <https://pubmed.ncbi.nlm.nih.gov/33074147/>
- Development and Validation of the Computerized Adaptive Screen for Suicidal Youth <https://pubmed.ncbi.nlm.nih.gov/33533908/>
- Ed Suicide Screening Toolkit for the Youth From the National Institutes of Mental Health (NIMH)- [ASQ Youth toolkit](#)

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