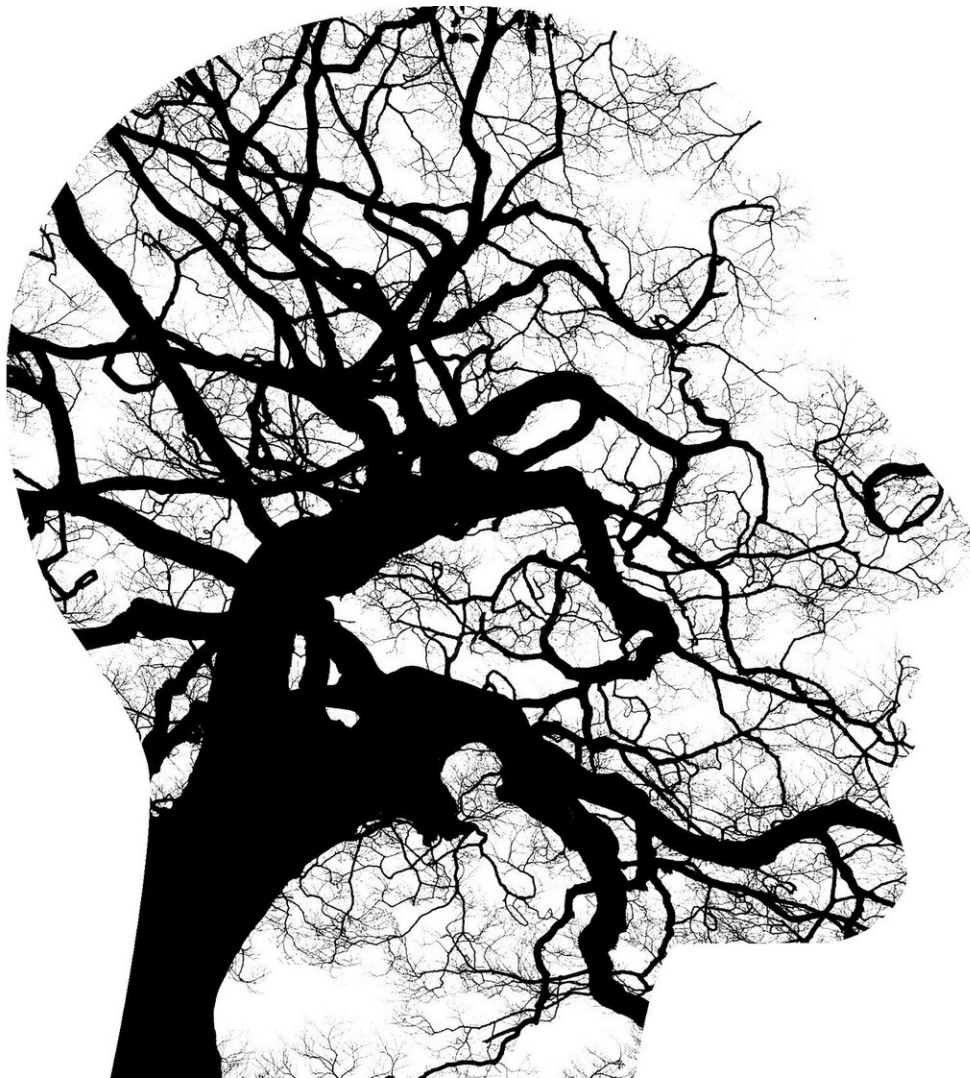


Long wait times increase for children seeking emergency care for mental health

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Rates of prolonged visits for pediatric mental health emergency department (ED) visits increased over a decade, in contrast to non-mental health visits for which visit times remained stable, according to a study published in the journal *Pediatrics*. From 2005-2015, rates of ED visits lasting over six hours for children presenting for mental health issues jumped from 16 percent to nearly 25 percent, while rates of visits lasting over 12 hours increased from 5 percent to nearly 13 percent.

"The trend of increasingly long ED visits for pediatric mental [health](#) problems likely represents worsening access to essential mental health services. This is concerning, especially since during the COVID-19 pandemic we are seeing substantially more [children](#) coming to the ED for mental health reasons," said study co-author Jennifer Hoffmann, MD, a pediatric emergency medicine physician at Ann & Robert H. Lurie Children's Hospital of Chicago and Assistant Professor of Pediatrics at Northwestern University Feinberg School of Medicine. "At Lurie Children's, the percent of our ED visits for mental health conditions has doubled since the onset of the pandemic, and over the past year we have been averaging about 100 mental health visits per month."

The study also found that Latinx children are nearly three times as likely to have a prolonged mental health ED visit (lasting longer than 12 hours) than [white children](#). The study showed no significant difference in rates of prolonged ED visits by payer type, as an indicator of socioeconomic status and comparative access based on insurance.

"The disparity for Latinx children highlights that much more work needs to be done to provide equitable and timely mental health care for all children," said Dr. Hoffmann.

Dr. Hoffmann and colleagues analyzed nearly 150 million ED visits across the United States among children 6-17 years of age using the

National Hospital Ambulatory Medical Care Survey from 2005-2015. Over 7 million were mental health visits, or nearly 5 percent of all ED pediatric visits during that period.

The study authors note that mental healthcare for children is expensive and suboptimal reimbursement limits incentives to expand services. There continues to be a dearth of child psychiatrists and community supports. EDs struggle to safely discharge children who present in crisis to appropriate care settings in light of limited services and poor coverage, which in turn leads to prolonged ED visits.

For children who need to be admitted to the hospital for ongoing mental healthcare, a shortage of pediatric psychiatric inpatient beds leads to children waiting long amounts of time in the ED for beds to open. Prior research on children's mental health ED [visits](#) showed only 10 percent of the total visit time is spent on medical evaluation, with the majority of time spent determining an appropriate discharge or admission plan.

"Policy needs to address the shortage of pediatric mental health providers and expand coverage and reimbursement for the full spectrum of mental health services," said Dr. Hoffmann.

Provided by Ann & Robert H. Lurie Children's Hospital of Chicago

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