

PRESENTATIONS TO THE EMERGENCY DEPARTMENT

PRE AND POST COVID-19

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CAMHS	PCLPS
Child and Adolescent Mental Health Services (CAMHS) is a service that provides assessment and treatment for young people and their families who are experiencing mental health difficulties.	Paediatric Consultation Liaison Psychiatry Services (PCLPS) are specialised services designed to address co-morbid medical and psychiatric problems in children.

In the absence of emergency CAMHS provision, PCLPS resources are being increasingly diverted to Emergency Department referrals at the expense of routine PCLPS users¹. In light of the COVID-19 Pandemic, we wished to examine the impact of increasing demand for mental health services on the profile of acute psychiatric cases presenting to paediatric emergency services.

Introduction

Mental health disorders of significant severity to warrant some form of intervention occur in 10% of children². Poor CAMHS resourcing and large demand (2,500 young people on the CAMHS waiting list³ in 2018) might strain resources even further post COVID-19. The Emergency Department (ED) has always been a pathway for acute mental health assessment, and this study examines changes in the profile of these acute psychiatric ED presentations before and after COVID-19 related restrictions were implemented.

Recent research in the UK found a decrease in acute psychiatric emergency presentations, and suggested the lack of school related pressure and increase in time spent within a family unit as potential explanations⁴.

The aim of this study is to prospectively examine the impact of COVID-19 on acute paediatric mental health cases assessed in terms of impact on social, financial, psychological and educational restrictions. This was done by way of analysing the profiles of acute psychiatric presentations to paediatric emergency services during the COVID 19 pandemic.

Methods

- 'Lockdown' in Ireland occurred on March 12th 2020, as such a period of 2.5 months both before and after this date were identified to examine any changes before and after the restrictions were put in place. The period analyzed was January 1st to June 30th 2020, compared with the same dates in 2019.
- All cases presenting to the ED with Acute Psychiatric presentations were eligible. Total number across both periods, 2019 N = 73, 2020 N = 80
- An anonymous database was formed from PCLPS department records. This database was exported to SPSS, where the file was split by Year of Referral (2019 vs 2020).
- Variables examined were Gender, Age at Presentation, Length of Stay, Time of Presentation (Normal Working Hours = 09:00-17:00 Mon-Fri), Patient Admitted to Ward, Patient Previously Known to CAMHS, Deliberate Self Harm (DSH) as a presenting complaint, and Suicidal Ideation (SI) as a Presenting Complaint.

Results

January 1st – June 30th 2019 (N = 73) / 2020 (N = 80)

	2019 – N 73	2020 – N 80
Gender	Female: 43 (58.9%) Male: 30 (41.4%)	Female: 54 (67.5%) Male: 26 (32.5%)
Presented Outside Normal Working Hours (ONWH)	36 (49.3%)	53 (66.3%)
Presented with deliberate self-harm	32 (43.8%)	44 (55%)
Presented with suicidal ideation	47 (64.4%)	58 (72.5%)
Patient was admitted to ward	39 (53.4%)	58 (72.5%)
Patient was previously known to CAMHS	32 (43.8%)	37 (46.3%)

Table 1: Frequency table of patients presenting to the ED from Jan 1st - Jun 30th 2019 and 2020.

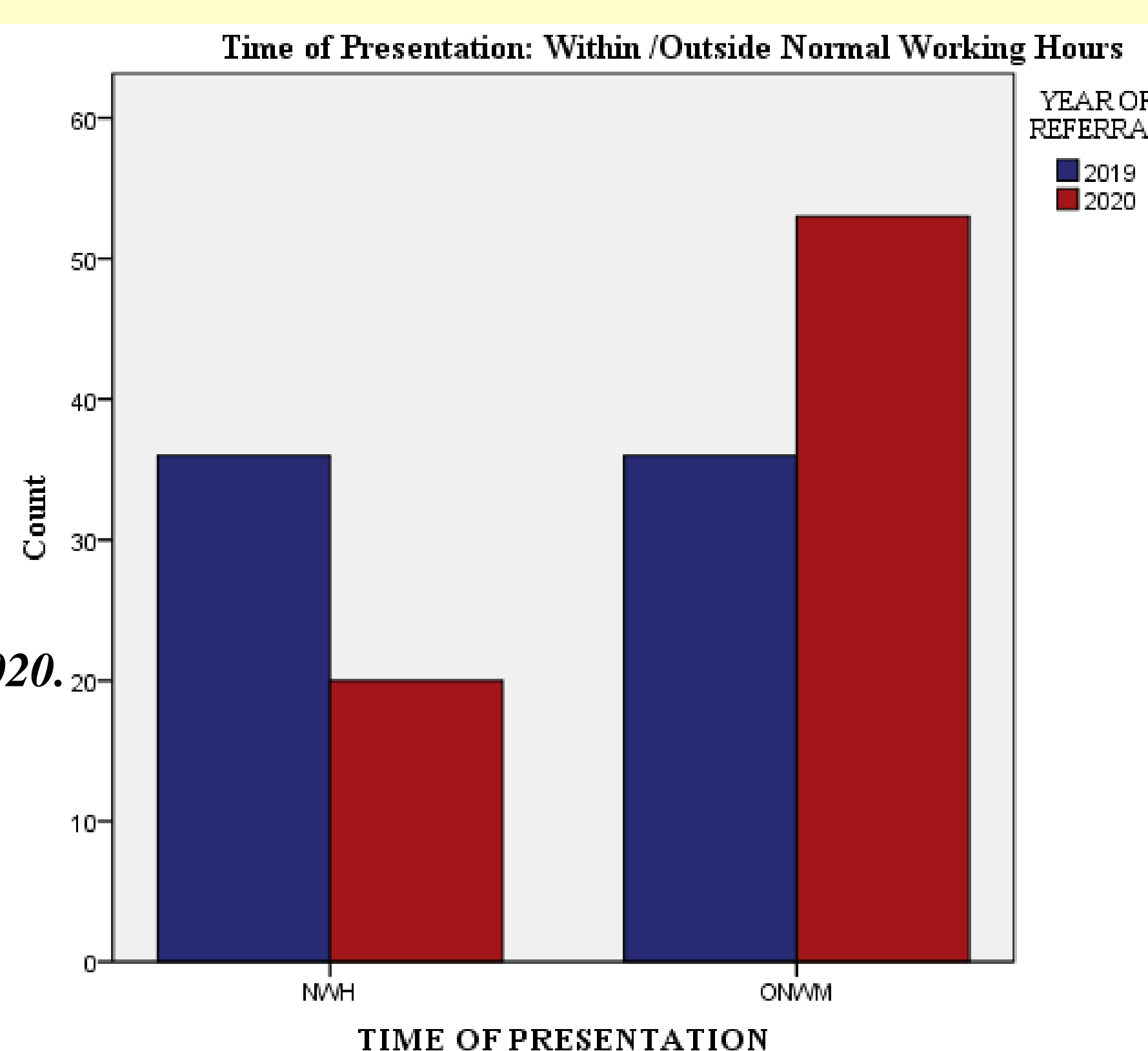


Figure 2: Numbers of patients presenting ONWH and within NWH (2019 vs 2020)

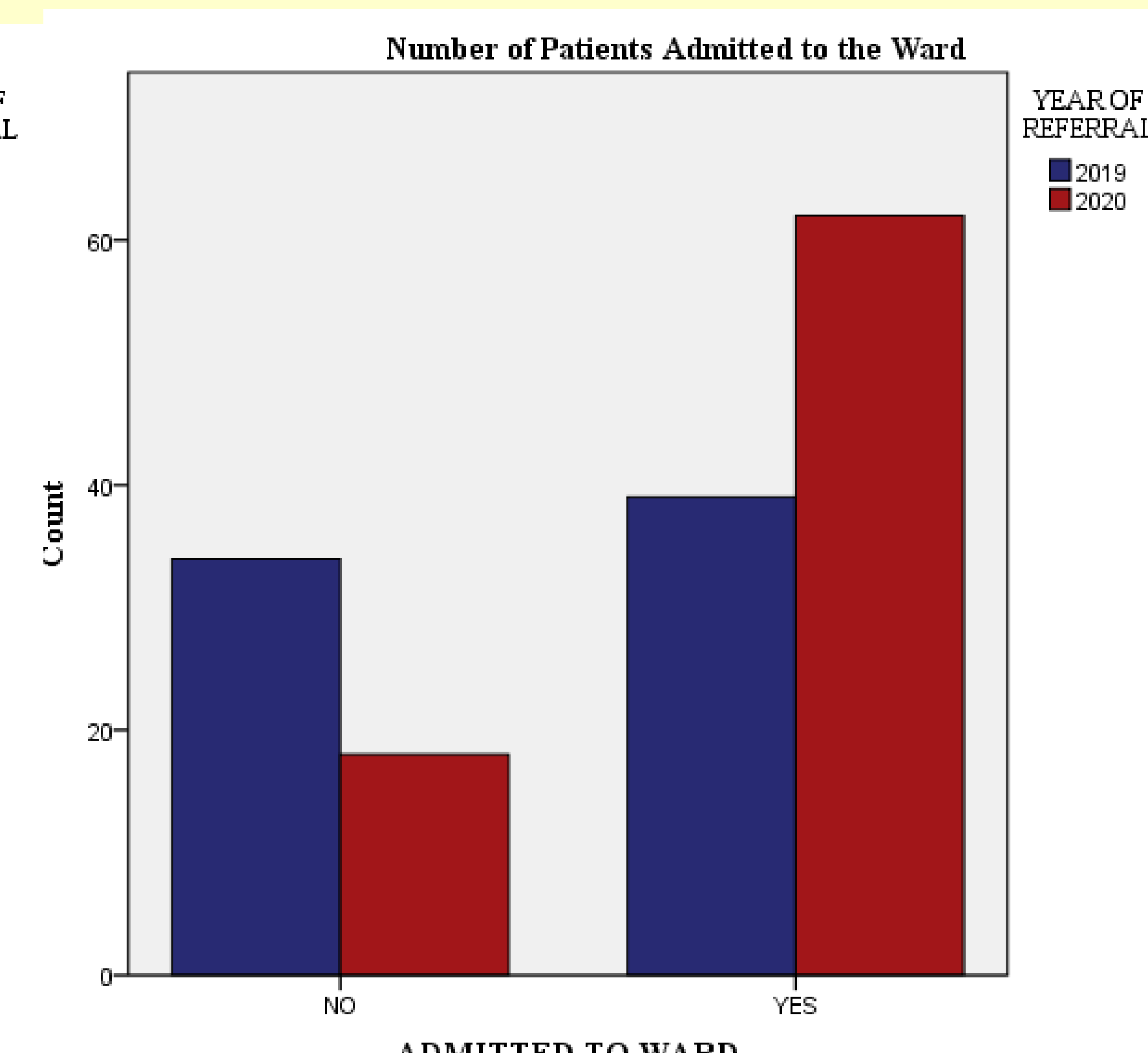


Figure 3: Numbers of patients presenting who were admitted to the ward (2019 vs 2020)

YEAR OF REFERRAL	Frequency	Percent	
2019 Valid	JANUARY	15	20.5
	FEBRUARY	10	13.7
	MARCH	17	23.3
	APRIL	12	16.4
	MAY	12	16.4
	JUNE	7	9.6
	Total	73	100.0
2020 Valid	JANUARY	3	3.8
	FEBRUARY	7	8.8
	MARCH	10	12.5
	APRIL	15	18.8
	MAY	27	33.8
	JUNE	18	22.5
	Total	80	100.0

Figure 4: Numbers and percent of patients per month (2019 vs 2020)

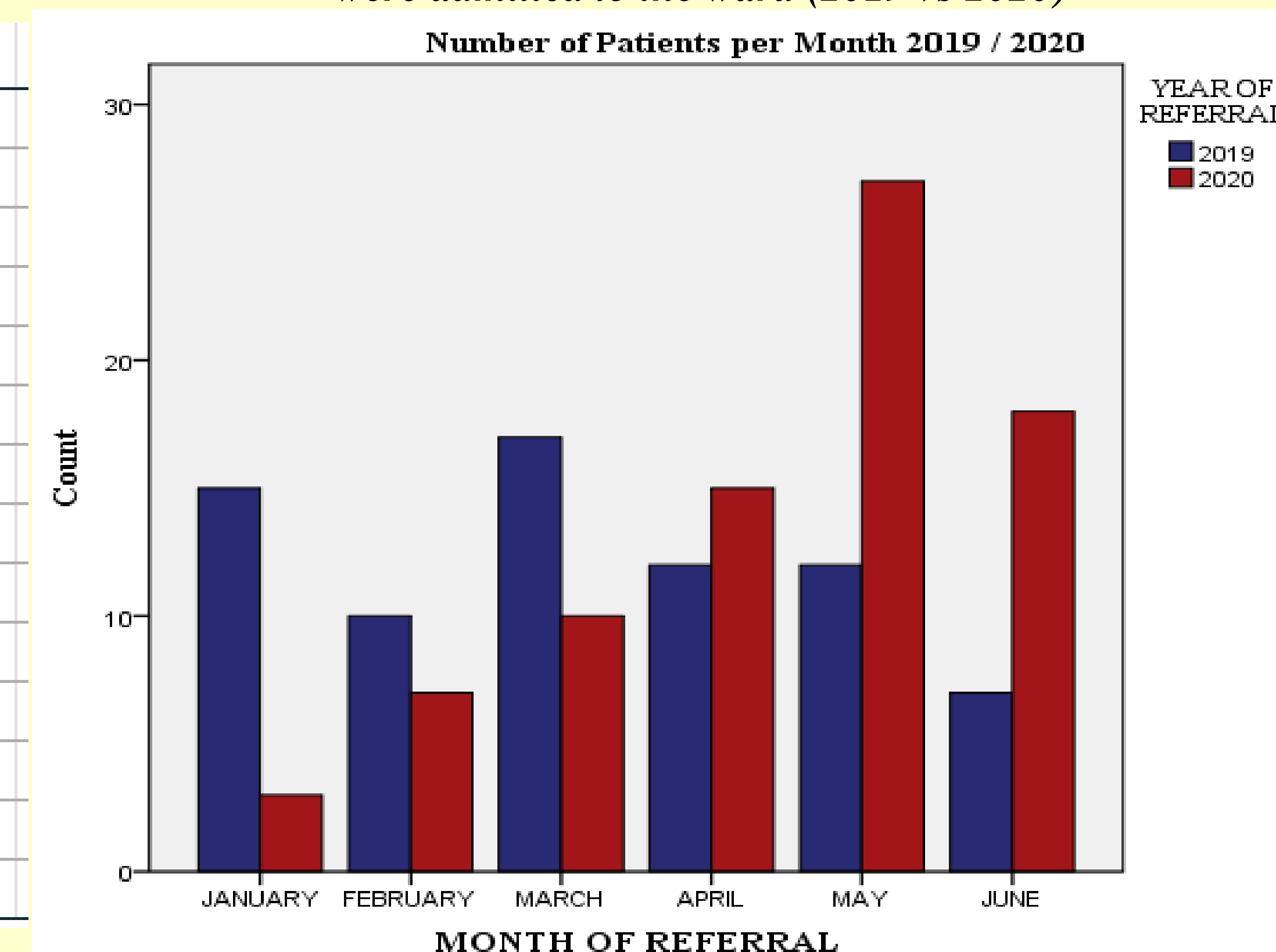


Figure 5: Numbers of patients presenting per month (2019 vs 2020)

Compared with the same time period in 2019, in 2020 :

- There was a 8.75% increase in the total number of acute psychiatric cases presenting to PCLPS.
- It was more likely that a patient was admitted to the ward - X2 (1, N = 153) = 9.861, p = .002
- It was more likely that a patient presented outside of normal working hours – X2 (1, N = 153) = 7.812, p = .005
- Patients length of stay in 2020 was slightly longer (M = 4.23, SD = 8.2) when compared with 2019 (M = 3.56, SD = 9.4) However this did not reach statistical significance (t (153) = -.464, p = .644)
- There is also a trend towards significance in the increase in patients in 2020 presenting with Deliberate Self Harm (DSH) and Suicidal Ideation.

The division of referrals across the months of January – May in 2019 is relatively equal, with a decline in numbers in June. In 2020 however, over 1/3rd of the total number of patients were seen in May

Discussion

The increase in the total number of patients presenting to ED may be due to:
 - Lock down resulting in few face to face appointments in CAMHS / disability services and dissatisfaction with telephone / video consultations.
 - The continued encouragement of patients to attend ED by the HSE.
 - A belief that ED could better treat the patient if covid-19 were the cause of symptoms.
 - An increased incidence of psychiatric / mental health difficulties directly or indirectly due to covid-19 or other factors.
 The increase in proportion of Out of Hours presentations also explains the increase in admissions and length of stay. Due to the increased risk of contracting covid-19 in acute medical settings and the unsuitability of EDs for assessment of children with mental health difficulties, 24/7 emergency CAMHS services should be provided nationwide. Further research in this area is advised.

References

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4. Ougrin, D., 2020. Debate: Emergency mental health presentations of young people during the COVID-19 lockdown. Child and Adolescent Mental Health, 25(3), pp.171-172.