

Perceptions of Care for Pediatric Mental Health Inpatients

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Introduction



Between 2015 and 2020 New Brunswick experienced a 33% increase in the demand for addiction and mental health (MH) services for youth [1].

Access to appropriate, timely and effective support for children and youth who are living with MH challenges is of critical importance, as it can prevent adverse and lasting consequences [2].



The purpose of the present study was to gain an in-depth understanding of the lived experiences of and care practices for pediatric mental health (PMH) inpatients.

The goal was to provide insights that can be used to enhance MH outcomes and services for PMH inpatients and their families.



Themes

Family Caregivers

Parents are struggling to access care for PMH

"...fighting for mental health care..."

Unclear expectations and lack of communication in hospital MH units

"Like I felt blind through this whole process"

Once in the door, PMH care made a positive difference

"...she [child] seems to be like almost a completely different person..."

"...the GPs...are not willing enough to say ... I don't know, let me find out for you"

Primary care givers can act as an advocate or as a gatekeeper for PMH care

"...he said he would call the psychiatrist himself and tell him how urgent it was..."

Healthcare Providers

Lack of dedicated healing environments for PMH in hospitals

"They come here for stabilization, and are in and we discharge them within 24 and 48 hours...because we don't really have an inpatient facility..."

There are site differences in terms of physical spaces and care provision

"...it was very planned for youth, so I think it's well designed."

"... it's just not set up, with like a pediatric psychiatry unit in mind."

Families are not well supported by the system

"...and just how everything is set up and how everything functions, and-- puts more pressures and stress on families then there needs to be."

Severe issue with recruitment and retention of HCP within MH

"...there's just not enough manpower to deal with the demands at this point in time."

subtheme

Shared

Negative PMH emergency department experiences / Challenges with PMH emergency department care experiences

"...they weren't very patient...and they seemed more annoyed then anything else that they had to deal with this kid that overdosed."



"...often our emergency room is overcrowded, so they have long wait times, which doesn't tend to help when they are in crises."

Lack of continuity of care and community care for PMH / Lack of continuity of care between hospital and home

"...she still doesn't have a psychiatrist, she doesn't see a psychologist until ...we're kind of in limbo."



"...we're an acute care [hospital]...they need to find their own supports in the community."

More MH training needed for HCPs and those who work with PMH populations/ Not enough PMH training for HCP and others who work with children

"...practitioners don't have the knowledge or the know how to deal with MH patients and can be dangerous, some, not all..."



"...I think we need more education... newer more modern techniques... trauma informed care"

Implications

- Increase standardization and consistency in care across sites.
- Improve access to PMH care and expertise.
- Dedicate resources to a preventative PMH approach and improve continuity of care.
- Provide additional mental health training for HCPs and others who work with PMH patients.
- Improve communication regarding goals and expectations of inpatient PMH care.
- Provide direction to parents for where resources and parental support may be obtained.

Methodology



All participants provided informed consent and participated in a semi-structured telephone interview.

Five family caregivers of patients with mental health diagnoses, who had sought/ accessed mental health care at any NB hospital, while the patient was a child or youth.



Fourteen healthcare providers (HCPs) of PMH patients.

The interviews were digitally recorded and transcribed verbatim.



The transcriptions were uploaded to Nvivo and subjected to iterative thematic analysis.

Themes were agreed to through consensus.



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References

1. New Brunswick Department of Health. Interdepartmental addiction and mental health action plan priority areas for 2021-2025. NBDoh, Fredericton, NB.
2. Dube, A., Iancu, P., Tranchant, C.C., et al. Transforming child and youth mental health care: ACCESS Open Minds New Brunswick in the rural Francophone region of the Acadian Peninsula. Early In Intervention Psychiatry. 2019; 23 Suppl,1:29-34.