

Toward a Quality Standard for Emergency Departments: A Commentary on Improving Mental Health and Substance Use Care for Youth in Canada

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TABLE 1.
Calls to action for service providers, emergency departments and health systems to improve mental health and substance use care for youth in Canada

Recommendation	Description
Adopt a collaborative approach to decision-making	Work collaboratively with youth and caregivers/family when assessing, treating and referring youth to appropriate community services and supports.
Incorporate mental health and substance use training as part of the accreditation process for emergency department staff	Provide mental health and substance use training for all emergency department staff (i.e., healthcare practitioners, front-line staff, department managers, decision-makers/leaders, security officers, paramedics, volunteers). This may include non-violent crisis intervention training, trauma-informed care, motivational interviewing and emotion-focused therapy/emotion-focused family therapy.
Develop processes to ensure that emergency department staff have access to current best practice guidelines	Develop an online repository of clinical practice guidelines to support the provision of mental health and substance use care for youth and develop processes to update the emergency department on current best practices. Specific guidelines for providing developmentally appropriate care to youth with mental health and substance use concerns are warranted.
Embed service providers and care teams that have specialized mental health and substance use training and/or lived experience	Embed service providers and care teams in the emergency department who have specialized mental health and substance use training and can help with mental health and substance use assessments, treatment and referrals. This may include peer support, outreach, case managers, patient navigators, multidisciplinary care teams, community care teams and relational security officers.
Implement interventions and programs that support rapid access to specialized mental health and substance use care	Embed rapid access models in hospitals to provide youth experiencing moderate to severe mental health and substance use concerns with rapid access to specialized mental health and substance use support. Utilize telehealth or telephone consultation helplines to access mental health and substance use specialist support when no one is available in the emergency department to assess and treat youth. Implement programs such as Familiar Faces, Community Resources for Emergency Department Overuse and patient navigators for youth who frequently return to the emergency department to reduce wait times and help them connect to appropriate services and supports.

Recommendation	Description
<p>Create a more supportive and accommodating environment for individuals with mental health and substance use concerns</p>	<p>Equip emergency departments with comfort carts, sensory items (warm blankets, earplugs, adult colouring books) to mitigate escalation. Incorporate private spaces in emergency departments that are calm and soothing for youth experiencing mental health and substance use concerns, such as designated spaces for mental health and substance use patients or separate psychiatric units/emergency departments for mental health and substance use. Secure rooms or physical/chemical restraints should only be used in extreme circumstances, following provincial least-restraint guidelines in emergent/urgent care and in-patient settings (Child Health BC 2022).</p>
<p>Have information about mental health, psychosocial and substance use services, supports and resources available in the emergency department</p>	<p>Have regularly updated information and resources readily available for youth and caregivers/family impacted by mental health and substance use to increase their awareness of relevant community services (e.g., service pamphlets, posters in emergency department waiting rooms, QR codes directing youth to virtual services, patient navigators). This includes informing youth and families of specialized care teams and providers available in the emergency department (e.g., community care teams, multidisciplinary care teams, peer support workers, patient navigators, outreach workers, case managers, social workers) who are trained in mental health and substance use and can support youth with service navigation.</p>
<p>Develop safety plans with youth and embed lasting chart alerts</p>	<p>Update emergency department policies and processes to ensure safety plans are created and consulted when youth first access an emergency department for mental health and substance use concerns, including electronic health record safety plan alerts. Update hospital operating procedures to ensure that permanent chart alerts are in place for youth who have mental health and substance use challenges.</p>
<p>Implement programs that support youth placed under involuntary care</p>	<p>Implement programs that support youth detained under involuntary care and provide them information about their legal rights. Ensure that legal forms are youth-appropriate so that youth can understand them.</p>
<p>Develop processes and opportunities to facilitate collaboration between emergency departments and community services</p>	<p>Develop processes and opportunities for collaboration, such as quarterly check-ins, joint organizational training, community system planning meetings and asking youth about existing care providers whom they trust and whether they can include them in their medical chart.</p>
<p>Increase youth-specific service and service provider capacity</p>	<p>Expand the number of youth-specific services (e.g., early interventions, integrated youth services, outreach programs, treatment services, detox, opioid agonist treatment, virtual services) and extend service operation hours (e.g., evenings and weekends) to reduce pressures on emergency departments. Upskill primary care providers to be able to provide youth with mental health and substance use support.</p>