Nowhere to go: Perspectives on pediatric hospital closure and mental health care

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Nowhere to go:
"When the number of children's services in a hospital shrinks, the access to [outpatient] multidisciplinary care – including mental health care – is smaller."

The dwindling of inpatient pediatrics

- 2019: 5.2 million total pediatric hospitalizations accounting for >46 billion healthcare expenditure
- <50% AHA surveyed hospitals had inpatient pediatrics units
- Children presenting to general hospital EDs increasingly transferred to regional freestanding children's hospitals
- Total pediatric hospitalizations declining
- Reimbursement for pediatric care generally low relative to adult care

Mental health care in acute pediatric hospitals

- 2009–2019: Mental health hospitalizations increased by >41,000
  - By 2019, >25% of all hospital days (19.8% of hospitalizations)
- Pediatric inpatient psychiatric facilities and outpatient services have not increased proportionally to rising mental health concerns in children
- Changes associated with pandemic under investigation

Systems research directions

- Qualitative focus group-based study examining providers' experiential themes
- Goal to identify strengths and gaps in the systems of care that exist to compensate for fewer points of acute care

"The fewer kids we have here, the more challenging it is for staff who aren't trained in caring for children to learn how to take care of [this] population."

"It used to be that because we were admitting [to board] right away, there was less of a sense of urgency to find placement. Now that they board in the ED, we need to find a solution sooner."

20 January, 2022
Pediatric hospital closure and transition announcement

1 July, 2022
Inpatient pediatrics, PICU, and BMT close permanently. ED remains open. Specialist attrition, with suspension of some outpatient subspecialty services and transition to nearby freestanding children's hospital.

17 March, 2023
New joint Triple Board program matches 2 interns for 2023-2024

Reference