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Recognising over 100 000 hidden children

Children who attend hospital wards without being admitted

Ready and rapid access to specialist services for children who need them is part of paediatric philosophy. Many paediatricians therefore use the ward to see patients outside their outpatient clinic hours. For patients who need frequent reassessment this is often more convenient than conventional outpatient appointments and has the advantage of maintaining the ward staff's links with the patient. The ward may also be used for short outpatient procedures. Until recently this workload has largely gone unrecognised and unquantified.

Caring for Children in the Health Services is the name taken by a committee representing the British Paediatric Association, the National Association for the Welfare of Children in Hospital, the National Association of Health Authorities, and the Royal College of Nursing. Last year the group produced a report showing that a quarter of children were nursed in adult or mixed adult's and children's wards.¹ In its most recent report, *Hidden Children*, it examines the use of children's wards for children who attend but are not admitted either as day cases or as inpatients and have therefore not, until recently, been included in hospital statistics.² The Körner committee defined ward attenders as patients attending a ward who do not require the use of a hospital bed.³ Since April 1987 wards have been required to count them and enter them in the daily ward listing. A survey by the Caring for Children in the Health Services Committee of the general managers of all units in England with a children's ward showed that ward attendance occurred in all types of children's wards and in all areas. Sixty five wards were chosen for a more detailed study: a little over half were mixed medical and surgical, about a quarter were children's medical wards, and about one in five was a children's surgical ward. All attendances at the ward for whatever reason by children or parents were recorded during a two week period in February 1987. Fifty one wards participated, providing information about 1051 ward attenders.

Most (94%) attenders were children. The remaining 6% were adults attending on behalf of a child. Three fifths of the children were under 5 years old. In about half of the hospitals providing adequate data ward attenders formed more than a fifth of the patients passing through the ward.

Most ward attenders came by arrangement during normal weekday daytime hours. The visits were often short and entailed little waiting. About a fifth of the visits lasted for less than 20 minutes and 8% for more than three hours. Visits varied from brief "thank you" visits by parents, which often led to further discussion and counselling, and visits to collect equipment for home use to those for procedures such as sedation or catheterisation before radiographic examination or tests such as jejunal or bone marrow biopsy. Many children, especially those attending medical wards for complex procedures, would have been better categorised as day case admissions. Other children attended as emergencies by arrangement with ward staff—many because they suffered from chronic conditions, were well known on the ward, and had been encouraged to attend with their problems. Another important use of ward attendance is the early review of children after discharge.

Ninety per cent of ward attenders needed nursing attention, often from more than one nurse. Doctors were involved in 70% of cases, and other professionals—such as dietitians, physiotherapists, and laboratory technicians—in 17% of cases. The survey has shown that the staff of children's wards undertake a lot of work that has until now been unrecorded. Probably well over 100 000 children in England are ward attenders each year.

There are two main lessons to be learnt. Firstly, the ward attender system is large, well established, efficient, and approved by both parents and staff and so its demands must be recognised and met by health authorities. Secondly, the further development of community paediatric nursing services might make some visits, especially to surgical wards, unnecessary.

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