What to expect when a child goes to hospital
Action for Sick Children (Scotland) (ASC(S)) has been working in Scotland for over 30 years on behalf of all children, young people and their families to promote and campaign for the best standards of health care at times of illness. We act as a bridge between health services and patients and their families.

Before the age of seven 50% of all children will have a hospital admission. Most will be treated, recover and go home but for some, their illness may be more complicated and become a long term condition, requiring frequent hospital visits or admissions throughout their lives.

We have known for a long time that most children benefit from the support of a carer/parent when in hospital. In the same way we recognise the importance of quality, appropriate and timely information in helping families to cope better with an unknown or worrying situation. This booklet will answer some of the questions families may have and is designed to be used with any information you receive from the hospital.

Most hospitals send you information and instructions before a hospital visit (pre-admission information/booklet). Remember to ask for this if you do not receive it.

ASC(S) is a member of the European Association for Children in Hospital (EACH) which has produced the EACH charter. This sets out 10 standards for children and young people’s health care at times of illness. Hospitals are in the process of working towards these standards.
Going into hospital

What is it like?

Once admitted, the child is allocated a bed in a children’s ward, and introduced to her special named nurse. Nurses and doctors are easy to identify because they all wear a uniform and have name badges.

Usually children’s wards are bright, cheerful places that have been specially decorated to appeal to children. Many hospitals have a separate play area with toys and games to suit all ages and there is usually a TV, DVD and other IT equipment. Some hospitals will also have a designated school area.

What do I tell the child?

This depends on their age and the reason for their stay. A teenager is likely to cope with a full explanation, whereas a five year old, needs it to be kept simple. In any event it is best to be as truthful as possible although it may not be appropriate to give all the details.
It’s also very important to reassure the child as much as possible, whilst keeping your own worries in check. Even small children pick up on anxiety. The happier and more relaxed a child is, the quicker they will get better.

**Top tips for a happier stay**

- Ask the ward if you can arrange a pre-admission visit before you come into hospital.
- Ask your local library or look on our website [www.ascscotland.org.uk](http://www.ascscotland.org.uk) for a booklist aimed at children going into hospital.
- Explain things to small children on a step-by-step basis but not too far in advance – a few days before admission is early enough for a five year old.
- Reassure small children that they are not going to hospital as a punishment – many think they are.
- Make sure children know that they are coming home again but don’t specify a particular day.
- Explain to older children what is happening. Don’t assume they know because they have not asked or appear confident. Use words they will understand as children can misunderstand terms they’re not familiar with and this can add to anxiety.
- Don’t promise it will not hurt – it may – be truthful and talk about ways to manage pain.
- What should we take with us?
  - Things to make them feel at home such as their favourite toy or blanket and mug, dummy or bottle. Be aware that soft toys and other similar items are not allowed because of infection control.
  - Cool comfortable day and night clothes, slippers, shoes.
  - Things to do and read – books comics, toys, games, puzzles, writing/drawing things. Electrical equipment e.g. personal stereo will need to be checked by hospital electricians before use.
  - Toiletries.
  - Make sure you also pack a bag for yourself or whoever is staying with the child.
What happens if I stay?

It might be upsetting for a child to be away from home, especially if they are feeling unwell so stay with them as much as you can.

Staying overnight is recommended, especially if the child is small and all hospitals make provision for this. Do check arrangements with the hospital before admission, especially if you are breast feeding or need to have a baby with you. For an emergency admission you will automatically be accommodated.

During the day there will often be a designated parent/carer room, or a day room to relax away from the ward.
On the ward

Who looks after the child?

Nurses – often nurses work in teams looking after a group of children. One will be allocated to the child as their named nurse. If you have any questions, speak to them first. This nurse will also be able to tell you how the child is coping with hospital.

Doctors – working in paediatrics (children’s medicine) are specially trained to deal with children, so they know how anxious children can get, and how to make them feel as comfortable and relaxed as possible. The Consultant is the most senior, and they will have other doctors working with them. The Consultant will usually meet you and the child to talk about their condition and treatment.

Play Specialists – specially trained staff who organise play in hospital and help prepare children for their treatment. You may have met some of them at a preadmission visit. In some hospitals there are also Play Assistants whose only role is to provide basic play. If your child is a teenager a few hospitals have staff who are there for this age group. Ask about this.

What is the daily routine?

This will vary in each hospital. Breakfast is often followed by the ward round where the doctors and nursing team visit each patient for an update on progress and treatment. However, doctors can come and go at any time. During the morning, patients are washed and beds changed where necessary. Lunch is usually followed by a quiet time. Carers and parents can visit children’s wards anytime during the day and often other visitors can be there too but some hospitals only allow other visitors in at certain times. Ask about this. Teatime is usually around 5.00pm. You may see children being admitted and discharged,
taken for tests and operations and even having school lessons. Sometimes there is a snack in the evening.

**What about eating and drinking?**

Children’s meals will be provided by the hospital at set times. If you want to give your child (or another child) anything else, check first with your named nurse. Since many children are on special diets, staff need to know exactly what they are eating. Be careful not to leave food where it can be reached by other children. If you stay, you will be expected to provide your own food and there is often a hospital cafeteria you can use.

**How can I help?**

You can care for a child in hospital as at home, by washing, changing, feeding and putting to bed yourself. This may help the child to settle in more quickly and the nurses will appreciate the help. You know the child best, so you can help them understand what is happening and explain how they feel to other people. Don’t be afraid to ask staff how you can be involved.

**How can I have a break if I stay?**

Explain to the child where you are going and when you’ll be back. Don’t be surprised if they are upset – they may feel vulnerable and it’s much better for them to express their emotions rather than bottle them up.

If a child is young and doesn’t want you to leave, try wandering around the ward where they can see you. Then, still on the ward, stay out of sight for longer periods, but always return. This helps to build up confidence about being left. After a day or so, leave for half an hour and then gradually increase the time you are away.

If you leave hospital e.g. to go home, always tell the staff that you are going and when you expect to return and tell them when you arrive back.

Leaving the child with your photo or other comforter can also help.
Staying and visiting

What if I can’t stay?
Many parents and carers have responsibilities at home or work which means they can’t stay with their child or visit as much as they’d like. Talk to the nurse in charge or named nurse to keep up to date on the child’s progress and welfare. You can keep in touch with the named nurse by phone. You can also send letters and postcards, which most children enjoy receiving. Mobile phones can be used in some areas in some hospitals but not in clinical areas including wards. Check where mobiles can be used as children may wish to phone or text. Be aware that there are strict rules about use of phone cameras etc.

Can relatives or friends help?
Sharing staying or visiting with others the child knows well, can relieve the pressure on you and give you some time off. Tell the ward staff or named nurse so that they know who is involved with the child.

Visitors are important, but too many can be tiring and any child will appreciate visits more if they are spread out. Ask someone you know who will be tactful to arrange this for you.

Managing the rest of the family?
It’s important they don’t feel left out. Include the family as much as possible, and talk to them about what’s happening to their young relative.

Encouraging brothers, sisters, and friends to write a card, make a present, or talk on the phone (if possible) can make everyone feel better.

If a child is in hospital for some time, ask a relative or friend to stay with them to let you spend time at home with the family.
Having an operation

What should I tell a child beforehand?

Reassure them that doctors and nurses know how to make them better, and the operation is part of this. Explain that they will go to sleep during the operation, and be given something special to help them sleep (anaesthetic) before they go into the operating room.

Be honest. Don’t tell them it will not hurt or they will feel let down if it does. Make use of the play specialist, who will use dolls and story-telling to prepare the child.

What if a child wants to know more?

Explain that they will probably miss a meal before their operation and may have to take medicine about an hour before. (This pre-med may make their mouth feel a bit dry).

Afterwards they may have some special cream rubbed on to numb the skin where the needle for the anaesthetic goes, so that it won’t hurt as much. Alternatively, they may be asked to breathe in some special air (anaesthetic) to make them sleepy.

It is dangerous for children to have food or drink before an operation, so always be careful and check before giving them anything.
What will happen on the day?

If the child is to have a bath or shower before the operation, offer to do this yourself.

Children sometimes have to wear an operating gown with loose fastening ties down the back with nothing on underneath. The child might not like this, so ask if it’s possible for them to keep on their own clothes e.g. pyjamas or underwear. Then after the pre-med help them settle quietly in bed.

Whether it is routine for a parent or carer to go with the child into the anaesthetic room depends on the hospital. Find out well in advance what their policy is by asking the Nurse in Charge or Anaesthetist. If this is something you feel strongly about then you can ask to talk to the anaesthetist about it. If the child will be more settled with you there and you are sure you can cope in the anaesthetic room, it may help the anaesthetist to have you there. If you can’t go into the anaesthetic room, talk to the Nurse in Charge about the best time to leave and to come back.

What happens afterwards?

The child will spend time in the recovery area. When they return to the ward they need to rest and sleep as much as possible to aid recovery. Don’t worry if they sleep a lot, or if they’re restless, they will sleep more peacefully as the anaesthetic wears off. Nurses keep a close eye on patients recovering from an operation they will tell you when it’s safe for them to drink, sit up, or go to the toilet.
Going home

Make arrangements in advance, so that when you’re told you can leave hospital things are planned. Remember to sort out transport, because unless your child needs an ambulance you will have to make your own way home.

You may hear quite suddenly that the child can go home and it’s normal to feel anxious about caring for them without medical and nursing staff on hand.

When a child is discharged you will be given all the medicines, pain relief and dressings you need for a few days. It will be brought to you on the ward or you may need to collect it from the hospital pharmacy. Take time to talk to the Nurse in Charge before you leave hospital. Ask any questions you need to, until you feel satisfied. Make sure you are clear about the medicines you have been given, any other medicine you can give; who will change any dressing and when and who to contact if you need medical advice. If you will have visits from the community or home care team find out when.

If the child needs special equipment (e.g. nebuliser, suction machine), you should be taught how it works, what spares you need and what to do if it goes wrong or needs replacing.

Follow-up appointments?

Sometimes you will be given a follow-up appointment at the Out-Patients clinic to check the child’s progress and recovery. You may be given this before you leave, or by post once you’re home. If you don’t hear within two weeks, phone the ward and find out what’s happening.

The hospital should send your GP a letter about the child’s condition, and any medicines they’re taking. Check when you next visit your doctor’s surgery that they’ve received this letter.
Getting back to normal

At home

A child may be unsettled and upset for a while after hospital. They may cling to you and cry if you leave them. This is normal. By showing the child your love and support during this time, you will help them to get ‘back to normal’ and feel secure again as soon as possible. Give the child the opportunity to talk about their experiences. Younger children can best be encouraged to express themselves through play. Hospital and doctor-related toys and books help them to do this.

Teenagers need to deal with their experiences too. Try to make opportunities for a chat even although they might not want to talk to you and might prefer talking to friends face-to-face or on-line.

Children and young people with learning difficulties also need to express their experiences. You will know best what could help. This might involve the child’s school or other professionals who work with them.

If you have other children, their sibling’s stay in hospital might affect them in different ways. Be open to their worries and don’t be surprised, if they behave differently. They might be a bit jealous of the focus on the ‘sick child’ and so they may appreciate extra time with you or the opportunity to share their feelings.

You may feel insecure, worried and unsure about what to expect in relation to your child’s recovery and behaviour. If you have any worries contact the ward, your GP or NHS 24. It is OK to ask for help and advice.

Please use this space for telephone numbers where you might get help:

NHS 24 0845 242424

Your GP

The hospital ward

Your health visitor

Community Children’s Nurse
**At school**

A child might feel worried about going back to nursery or school after their absence. Encourage them to speak to you about this. It might help if you take them into class on the first day back. Check with your school first.

Let teachers and others working with the child know about the child’s experience in hospital and how they coped so that support strategies can be developed for them.

Staff also need to know about the child’s medication and whether they can take part in activities like PE, or if they need to rest. Sometimes a ‘phased return’ can be arranged where the child goes back for only a few hours a day for a while.

If the hospital experience has been stressful for a teenager, the school might be able to offer access to a counsellor. You can ask at school if this service is available.

**A child’s view on hospital care – tell the staff**

Encourage the child to write or draw about their stay in hospital and how they feel about it to help them deal with the experience. It will make them feel important if you pass on their opinion to hospital staff who will value the feedback as a positive contribution towards making their service as good as possible.

**Your feedback – discuss your views with health professionals**

Your opinion is also very important. Tell hospital staff and/or your GP what was good about the child’s treatment and where care could have been better. It is important for them to find out how supported you felt throughout the child’s treatment and recovery.
Helpful organisations

- **Action for Sick Children (Scotland)**
  www.ascscotland.org.uk

- **Carers Centres and Carers Organisations**
  www.princessroyaltrust.org.uk/map

- **CHIP + Children in the Highlands Information Point**
  www.chipplus.org.uk

- **Contact a Family**
  www.cafamily.org.uk

- **Family Support and Information Service, Yorkhill**
  Tel: 0141 201 0736/0707 or call the hospital switchboard on 0141 201 0000 and ask to have us paged, or email us at family.information@yorkhill.scot.nhs.uk

- **Parent-to-Parent, Tayside**
  www.parent-to-parent.org

- **Special Needs Information Point (SNIP)**
  www.snipinfo.org

- **Young Carers**
  www.youngcarers.net
“Going into hospital is a very frightening experience for a 5 year old, he feels powerless and although as a parent you can try and explain what’s going to happen there is still a gap to bridge. Personally I feel Action for Sick Children (Scotland) helps to bridge this gap.”
Mother of a 5 year old boy, Central Scotland

“The use of Action for Sick children (Scotland’s) play material really made my son more comfortable with the thought of going for an operation. He has special needs and the toys were used in a way he understood with plenty of time given to him to ask questions. A really valuable service.” Mother of 9 year old in Lanarkshire.

“Our son was very much helped to talk about issues that were troubling him from his visits to professionals. The ASC(S) play box eased his frustrations and anxieties by giving him a way to talk to us about what was really troubling him. There needs to be more widely available resources such as this. I am so pleased… it really helped our boy to regain some control over his situation.”
Carer of 5 year old boy needing several specialist surgeries in a tertiary centre.
Action for Sick Children (Scotland) is the only charity in Scotland dedicated to informing, promoting and campaigning on behalf of the needs of ALL sick children and young people within our healthcare system.

For information in your language phone 0131 553 6553.

Aby uzyskać informacje w Waszym języku, prosimy o kontakt pod numerem telefonu 01315536553.

For a full list of publications please go to the Action for Sick Children (Scotland) website at www.ascscotland.org.uk

For all other information please contact:

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