



**SIBLING INFORMATION –  
A guide for parents while your child is  
on intensive care**

## **CHILDREN'S INTENSIVE CARE UNIT**

As a children's intensive care we promote family centred care. This means we wish to include the whole family in the care in which we give. This leaflet aims to tell you how to help your other children and advice involving other children with the care of the ill child being nursed in the intensive care unit. As well as this, answers to some common questions will be given and a list of further information will be included.

### **Why do we need to involve the other children in our family?**

When an ill child is brought into hospital it is normal for all the family to feel anxious and upset. Normal daily routines are changed. Many other problems may exist because a child is in hospital. Research suggests that brothers and sisters can worry about the ill child. These worries and how they show them all depends upon their ages. Every child is different and you know your child best. The next pages give an idea of what different ages may think or feel and some advice on how to help them best.

## **What are the main concerns for infants (0-1 yrs)**

The main concerns of a baby up to the age of one year of age is being separated from their parents or main care giver. Infants can pick up emotional changes of their main care givers and can become upset. Infants may be affected by changes in their normal routines for example eating and sleeping may be effected.

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## **How can we help?**

If possible maintain contact with the main care giver during the ill child's hospital admission. This may be done in two ways, either bring the child to the hospital or plan regular visits home. Please ask a member of staff on duty if there are any reasons for a young infant not to visit on the planned day.

## **What are the main concerns of toddlers (1-3years)**

Toddlers can still be very concerned by the separation of their parents. Even at this age the toddlers are aware that something is wrong. They may have tantrums and show behaviours they have grown out of such as accidents with toileting or not feeding themselves.

## **How can we help?**

Tell the toddler by using simple terms that their brother or sister is “sick”. It can be helpful to reassure the child that they did not cause the illness as this is sometimes what they may believe. Explanations can be given using books, through playing with dolls or teddies. Encourage the child to visit with you if possible.

It may be helpful to get them to bring something for the child. Such as a drawing or the ill child’s favourite toy, this will help the toddler feel involved with their brother or sister. Short visits of 10–15 minute are best. During the visits tell them simply about the objects and equipment surrounding them e.g the monitor is like a telly. Allow time to play as normal after the visit in a suitable area and talk to the toddler about what they saw and did on returning home which may help the child tell you their feelings, or you may see this when they play.

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## **What are the main concerns of the pre-schoolers?**

Pre-school children are able to cope a little better with the separation from their main carers. They will need regular support. They may still fear that they are the cause of the separation and the illness if they had recently been naughty at home. Remember their understanding is different to yours. For example when they ask “What is wrong with my sister?” to know that “she is poorly” or “she has hurt her head” may be all they need to know – not the details and uncertainty that may be in your mind. It helps this age group to experience normal routines and daily activities as far as possible- this makes them feel safe.

## **How can we help?**

Encourage short visits. If the parents main carers are unable to stay at home then childminding with someone they know will help. Prepare the child before visiting the ill child and always tell the truth using simple explanations. Encourage the toddler to talk about the visits. Children can find it hard to say how they feel or talk about things but they

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## **What are the main concerns of the school age child?**

This age group will need you to listen continuously to their questions and answer them simply. They may have headaches or tummy aches as a result of their worrying. There may be concern about causing the main carers further problems. This age group may also worry about the ill child and their imagination about how the ill child will look can be worse than reality.

## **How can we help?**

Allow the child to feel included and answer questions as the child asks. Allow the child to tell you what he or she understands and let them know that it is OK to feel what they feel e.g. frightened, sad and angry. Encourage the child to visit, try to give them time before and after the visit to ask questions or just to know you are there. Make sure that the adults around your child e.g. teacher knows a little of what is happening. This will help them to understand any unusual responses or behaviours.

## **What are the main concerns of teenagers?**

Teenagers are able to understand the illness or injury. They need to feel independent and may not ask questions or admit that they do not understand. Children argue and teenagers may feel guilty about having argued with their ill brother or sister.

## **How can we help?**

Be open with the teenagers answering their questions provide support and encourage them to be involved with the ill child. Encourage them to get help from their friends or other supportive adults, youth leaders or teachers. Give them some control about when they want to visit within reason. It can make them feel important to give them jobs to do at home.

## **Some common questions and answers.**

**QUESTION :** When can the children visit ?

**ANSWER :** This decision is best made by you and the child. We encourage well children to visit at anytime. Remember that having a child in intensive care is very stressful to you as parents or carers. You need to look after yourself as well as support well children. Talk to the nurses about your child visiting.

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**QUESTION :** What about infection risks ?

**ANSWER:** If you or your child has been in contact with anybody who has an infection then please discuss this with the doctors or nurse caring for your child.

**QUESTIONS :** Are there any facilities for the well children in the hospital ?

**ANSWERS :** No there are no special facilities for the well children however, they are allowed in the waiting rooms and in the shopping area in the main reception. It may be possible for the well children to play in the special playroom in the main children's ward but you have to ask the nursing staff to arrange this with the play leaders. Some toys and play materials are available on the unit in which the children may use at any time. Your children must be supervised by an adult at all times.

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**QUESTION :** What if I cannot find anyone to look after the children at home ?



**ANSWER :** If you wish to sleep at the hospital, a room may be found however, children are not allowed to stay with you. If you have problems finding other carers then please let the staff know, the hospital social work department may be able to help.

## **FURTHER HOSPITAL SUPPORT**

UNIVERSITY HOSPITAL OF WALES SOCIAL WORK  
DEPT. TEL 029 20747747 AND Ask for Social Work Department

UNIVERSITY HOSPITAL OF WALES RELIGIOUS  
SERVICES. TEL 029 20 747747 Ask for chaplain on call or  
visit chapel on level B5

PAEDIATRIC CARDIAC LIASON NURSE  
TEL 029 20 747747 Ask for Claire Logan on long range bleep.

## **USEFUL CONTACTS**

CONTACT A FAMILY : 170 Tottenham Court Road, London  
W1P 0HA Can arrange contact between families with specific  
health problems and unusual diagnoses.

ACTION FOR SICK CHILDREN : Argyle House 29-31 Euston  
Road, London NW 1 2SD Monitors standards and quality of  
child health in hospital, home and community.

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