

Paediatric Inpatient Services for adolescents in England

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There is growing scrutiny regarding the quality of inpatient care for adolescents in England, and whether services can meet their unique medical and psychosocial needs¹. Adolescents represent a substantial proportion of paediatric health service users and have a rising chronic disease burden. Adolescents with chronic conditions have high unplanned admission rates and longer hospital stays than younger groups. Despite broad agreement that inpatient services should cater specifically to adolescents' needs, there are sparse data available detailing what is actually happening on the ground.

We surveyed the paediatric clinical leads of all 155 NHS England hospitals with acute inpatient paediatric services to understand the current provision for adolescents. The 115 (74%) respondents reported substantial variation in current practice. Half of paediatric inpatient services routinely admit only patients <16 years to paediatric wards, with admission policies for 16-18 year olds variable and often poorly defined (Fig.1). In these hospitals, reasons for admitting young people over 15 years to paediatric wards included accommodating patients with complex needs (70% hospitals) and some paediatric subspecialties including diabetes (14% hospitals) and oncology (5% hospitals). A fifth of responding hospitals had specific adolescent accommodation (a dedicated bay or ward), a third had inpatient adolescent education provision, and half had a dedicated adolescent recreational area. One third of responding services employed a consultant or nurse with an adolescent health special interest (Fig.2). Almost half (48%) of hospitals had no written policy for transferring adolescents' care to adult services. More than half of respondents were dissatisfied with their current adolescent inpatient services.

National Institute of Clinical Excellence guidance advocates for age and developmentally-appropriate services, recognising the substantial variation in adolescents' biological, psychological and social development². The Joint Medical Royal Colleges and the Society for Adolescent Health and Medicine support the view that effectively delivering developmentally appropriate healthcare requires services specifically designed for adolescents. Quality of care

is better for 12–17 year olds admitted onto dedicated adolescent wards than to adult or paediatric wards³, and adolescent-specific settings are preferred by adolescents themselves. Adolescents admitted to adult wards report feeling afraid and isolated, and struggle to develop relationships with staff, while adult ward nurses have described feeling inadequately prepared to manage adolescents with complex needs, multiple social issues or challenging behaviour.

Modelled adolescent inpatient activity data suggest that most general hospitals in England can support a 12–15 bedded adolescent ward⁴. Half of our survey respondents reported future plans to develop adolescent services, including developing a designated adolescent ward or bay in their trust (28%) or employing a consultant or nurse with an adolescent interest (33%). This suggests many paediatric departments will continue to fall short of existing recommendations for adolescent inpatient care.

Our findings suggest many NHS trusts are not currently implementing national established guidance for good practice in adolescent healthcare. Understanding the reasons for this and how they should be addressed should be a priority to meet the goals of *The NHS Long Term Plan*, and effect change to improve the inpatient care received by adolescents in England.

Conflict of Interest

There are no conflicts of interest to declare for any author.

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Contributorship Statement

AG conceptualised the study. NS, JLW and AG developed the methodology and planned the study. NS collected the data data. All authors contributed to data analysis, production of original figures and drafting and revision of the manuscript. All authors approved the final

version of the manuscript. The corresponding author attests that all listed authors meet authorship criteria and that no others meeting the criteria have been omitted.

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