minded women did not differ appreciably from the rest of the population. Amongst those married, fertility was high and figures are given showing a high incidence of mental deficiency in the children.

There are many points of interest in this comprehensive and detailed survey. Seldom can any population have been more thoroughly screened or the mental defectives more carefully classified in relation to a wide variety of demographic and other factors. The monograph is one that deserves careful study.


Children often need to be looked after away from home; only now is a determined effort being made to give these children the care they should get at home. Every British paediatrician has in his area, nurseries, homes, residential schools. In these are children who are ‘at risk’ because of their physical and other ailments or their previous environments, and who are therefore in need of specially good assessment and help.

This is a brief but very comprehensive report. It deals with new approaches, including ‘efforts to provide continuous mothering and exploring ways of introducing fathers into a field which, in the past, has often relied only on women as child-care staff’. The B.P.A. and each individual paediatrician should act on the opinion expressed that the health programme in such places is preferably supervised by a paediatrician. In-service training of staff is usefully discussed.

A plea is made for inclusion of subjects relevant to the care of well children in the training of paediatricians. An admirably comprehensive report includes a recommendation that governments should vote funds for research in this field.

Every paediatrician can find out about day and residential centres in his own area and decide what he should be doing to help those deserving children who are in these centres.


Everyone interested in children in hospital will welcome this book which contains a great deal of information that has not been collected and correlated before, and which sets out clearly the problems that must be faced by those who are engaged in providing hospital care for children, and gives reasoned solutions. Its appearance in Britain now is timely.

It is only a little over a hundred years since the first special provision for children in hospital was made, and it is fascinating to read about the evolution of ideas and designs. Early in this century Escherich admitted ‘that the ideal condition for a child’s hospital would be a separate room and nurse for each child patient, but this is obviously unattainable’. But by the middle of the century a children’s hospital in this country had 515 nurses for 414 children. If Escherich meant a nurse for each child throughout the 24 hours, that would mean 1,242 nurses for that hospital, working on a three-shift basis. But one feels that he would have been more than satisfied with the 515, and with the fact that the proportion of single rooms need only be 40%, because so much infection had been overcome by improvement in hygiene and antibiotics.

Later in the book is a discussion of the number of nurses required to look after 20 children; 15 or 16 on a three-shift basis. It is refreshing and encouraging to find that an objective study of nursing organization shows so clearly that a shift basis is best for the patients. It is certainly better for the nurses, and it is hoped that this book will be widely read by matrons as well as by paediatricians.

The Division found it difficult to assess the number of children’s beds that should be provided for the population. Statistics are not complete because many children are admitted to adult beds, especially by specialists and then they are classified by disease rather than by age. Also habits of putting children into hospital vary greatly from place to place. Some paediatricians believe in home nursing, and many general practitioners may think that it is wiser to keep an ill child at home rather than send him to a hospital that is not suitably equipped to look after him.

The belief that children should be in children’s wards and not among adults will be accepted by all. The old contention that the dangers of cross-infection outweighed the advantages of putting children together has been overcome by provision of enough single rooms to isolate those who may be infectious. Babies should also be in single rooms to prevent from being infected, and older children or very ill children may be better in a room to themselves. The suggested proportion of eight single rooms in a 20-bed unit fits in with the general experience of existing children’s hospitals or units. It is thought that a unit for 40 children is the minimum size that would prove to be economic in staff and equipment, and if it were smaller it would not attract or maintain the interest of the specialized staff, which is desirable.

More detailed consideration is given to the design of a 40-bed children’s unit, and plans are shown. It is acknowledged that provision must be made for mothers to go into hospital with their children and the single rooms are planned to be big enough to take a bed for the mother placed against a wall; but the room is intentionally too small to accommodate two child-patient’s beds, for that would lead to the number of patients for which the nursing staff and ancillary services are provided being exceeded. One wonders if it will be easy to resist the plea for the doctor to put two small cots in such a room when he is short of beds. He should, of course, never be short of beds but the rate of illness is not

BOOK REVIEWS 641

http://adc.bmj.com/ Arch Dis Child: first published as 10.1136/adc.38.202.641 on 1 December 1963. Downloaded from archdischild.bmj.com on September 23, 2023 by guest. Protected