Working parents resort to emergency or urgent care visits to get kids back into child care

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Substantial proportions of parents chose urgent care or emergency department visits when their sick children were excluded from attending child care, according to a new study by University of Michigan researchers.

The study, published today in *Pediatrics*, also found that use of the emergency department or urgent care was significantly higher among parents who are single or divorced, African American, have job concerns or needed a doctor's note for the child to return.

Previous studies have shown children in child care are frequently ill with mild illness and are unnecessarily excluded from child care at high rates, says Andrew N. Hashikawa, M.D., M.S., an emergency physician at C.S. Mott Children's Hospital.

This is the first national study to examine the impact of illness for children in child care on parents' need for urgent medical evaluations, says Hashikawa.

In the study, 80 percent of parents took their children to a primary care provider when their sick children were unable to attend child care. Twenty-six percent of parents also said they had used urgent care and 25 percent had taken their children to an emergency room.

"These parents may view the situation as a socioeconomic emergency, and therefore choose urgent or emergency room care over the inability to return to work," says Hashikawa. "Parents without sick leave benefits face a considerable problem when they risk loss of wages or loss of a job to stay home with a child excluded from child care."

That's why policies that exclude children unnecessarily have a big impact for families and employers, says Matthew Davis, M.D., M.A.P.P., director of the C.S. Mott Children's Hospital National Poll on Children's Health. The poll's survey was used in this study.

Many child care settings require a health care visit or doctor's note before a child may return, which is in direct conflict with the national child care recommendations of the American Academy of Pediatrics, says Hashikawa.

The American Academy of Pediatrics has child care illness exclusion guidelines, particularly if the child cannot participate comfortably in activities or needs more attention than staff can provide safely. But several studies demonstrate that child care provider adherence to the guidelines is low, and training is unavailable in most states, says Hashikawa.

Previous research has shown that more than half of the 25 million pediatric visits to the emergency department each year are for non-urgent conditions. Using emergency rooms for non-urgent care leads to increased cost, prolonged wait times and patient dissatisfaction.

The study was based on responses of 630 parents with children aged 0 to 5 years old in child care. More than 80 percent of children up to age 6 in the U.S. require non-parental child care.

"Caring for kids who are sick can be a challenge for child care providers.

Many have high-turnover of staff, poor pay, and lack of available health-related training. Some parents may also believe that any sick children should be excluded from child care, even though guidelines are clear that exclusions for mild illness are not necessary," says Davis, who is also professor of pediatrics, internal medicine, public policy, and health policy and management at the University of Michigan.

Hashikawa recommends widespread sharing of the national American Academy of Pediatrics guidelines at the state and national level and training child care professionals regarding appropriate illness exclusions. He says that may reduce the unnecessary exclusion of children from child care, thereby reducing unnecessary visits to emergency department and/or urgent care centers and possibly decreasing parental work absenteeism.

Provided by University of Michigan Health System

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