

Children and their family's experience of waiting for unplanned minor surgery

SThompson¹, G Moore¹, S Sheppard-Law^{1,2}, J Tinsely¹
Sydney Children's Hospitals Network¹,
University of Technology Sydney²

Presentation and hospital admission of a child to undergo unplanned minor surgery or a procedure following an injury is a frightening experience to many patients and their family. These circumstances often give the family little or no opportunity to prepare emotionally or to prepare for changes within the family unit. Although, families understand the prioritization of urgent and life threatening surgical cases, prolonged operating theatre (OT) delays may impair a patient's hospital journey from hospital presentation to OT. This study aimed to explore family's experience of waiting for their child to attend OT for unplanned minor surgery or a procedure.

Parents of children waiting for unplanned minor surgery or a procedure were identified by clinical staff. Willing participants consented to complete an in-depth interview by phone. Interviews were digitally recorded and transcribed verbatim. Recurrent key words, phrases and concepts were organized into a simple thematic framework using discussion and consensus.

Ten parents were interviewed between January and February 2017. Operating theatre waiting times ranged between three hours and 1½ days. Two dominant themes emerged: 1. Preparation to wait and 2. clinician-consumer/ parent interactions. Parents who described their waiting experience in a positive manner said that they were adequately prepared to wait for their child to attend OT, and described an interaction of several sub-themes including being well informed, receiving regular OT updates. Conversely, parents who described a negative experience felt they were unprepared, received limited information with little or no updates regarding waiting times, OT delays and/or cancellations. The way clinicians interacted with parents/children additionally determined parent's waiting experience. Positive clinician-parent/child interactions were described as caring, professional, and these were contrasted by little to no interaction.

Our findings highlight ways in which patients and their family's experience of waiting can be improved. Strategies such as communicating OT delays are recommended.