

Supplementary Material

10.1302/2633-1462.55.BJO-2024-0024

Theme 1: Making the right decision

To make a decision about treatment for their child, parents endeavored to make sense of the information they received about their child's injury, the two treatment options and their risks. Parents questioned the surgeon as they strived to make the right decision, feeling responsible for the outcome of their child's injury

Making sense of the study

The study made sense to most parents who understood the treatments as two pathways to a similar outcome. However, some parents struggled to take in information while caring for their distressed child.

I would rather the operative route and obviously it's difficult because you're praying that if you go 'operative' he doesn't have to have metalwork or wires out of the skin, because that's the worst kind of operative. He might have to go back and have yet another operation a year later. So, there's a lot of buzzing around in my head, and actually it's not anyone's fault but at the time I'd barely slept because I'd been up with my son all night, and you know you're trying to make some decisions. (Interview #11, surgical reduction)

Initially, I was a bit frustrated that I was being told that they didn't know what to do with her, but the more I understood about the study I kind of got that's why you're doing the study. So that going forward you've got a clearer idea about what should be the right thing to do but that wasn't made clear from the outset at all. The person that carried out the X-ray said this was quite a nasty break and there was sort of mixed messages within the hospital, and then when I was asked them and they didn't know what to do with her I was like come on guys, we've come to the right place here. (Interview #12, non-surgical casting)

He just said that kids were amazing and how they didn't really need to do anything to the bones and they would just kind of fix themselves. So, if I was interested in taking part in the study then that might be something that would be done for (my child) and he wouldn't need to have an operation type thing to straighten the bone. (Interview #15, surgical reduction)

Trusting the clinician

Parents trusted staff who were open, honest, gave reassurance and answered their questions about the treatments. However, some sensed information was withheld from them and could be frustrated when staff avoided answering their questions.

I think I was a little bit apprehensive shall we say about the thought of leaving it but I did trust the doctors and so yes, I didn't really have many questions because I knew that they would talk to me about it more the next day. (Interview #15, surgical reduction)

I was obviously quite nervous either way because I didn't want to not do the surgery and then him not recover, but I also didn't want him to go through the surgery because there's always risks associated with surgery. So, I was nervous either way but I was happy to trust the judgement of the consultant that we saw at the fracture clinic. (Interview #16, non-surgical casting)

We were in hospital for a few nights and nobody wants to be in hospital but it was just lovely. You knew that your children were just going to get such good care and be looked after and you know you trusted them absolutely. (Interview #2, surgical reduction)

Being responsible

Parents felt a great sense of responsibility for the decision to include their child in the study and for the outcome of their child's injury and often wanted to discuss the study as a family. A minority of parents experienced worry or regret at their decision

It was just the fact that I just felt like maybe my son was going to be a bit of a guinea pig, not a wild guinea pig but it was just the fact that it was my son and I'm responsible for him if something went wrong, but yes. (Interview #13, surgical reduction)

I was dreading it even though I'd seen the X-rays, seen the statistics, and in my head, it was, this is okay, it's going to work but I was still doubting myself, had I made the right decision all the time when the cast was on and so I dreaded the moment when it came off. (Interview #19, non-surgical casting)

For the first couple of months, I regretted it, I really regretted it and yes, I was worried I'd made the wrong decision. (Inteview #18, non- surgical casting)

Theme 2: Worrying about recovery

Parents worried about how their child's wrist was healing, some encouraged their child to use their injured wrist while others restricted activities to prevent further injury. Parents needed more information about recovery to help their child.

Worry about healing
Some parents were
concerned their child's
wrist still looked deformed
when the cast was
removed and worried
about how the wrist was
healing.
Others were prepared for
their child's wrist to remain
wonky initially and were
reassured it would
straighten with time.

I just hope it doesn't stay quite as deformed as it is. I do really hope it grows out and I know that that's all cosmetic, but it's not nice looking at it. I mean her friends get freaked out by it all the time, but at the minute she loves it because it's a bit of a 'show' for her! Other than that, I think I'm okay with it. (Interview #8, non-surgical casting)

So, it didn't seem to just go back to normal initially but I think you probably get that with any removal of cast from any limb. There is that sort of initial, it looked really wasted away and frail, and yes it was a bit unpleasant, but I think I felt that more than he did. (Interview #9, non-surgical casting)

For me it was, and for her dad, just that she didn't have any major deficit and that it was straight and looked like everybody else's, because we know that kids pick up on any differences that others have, and we didn't want her being bullied for it. (Interview #5, non-surgical casting)

Preventing re-injury
Parents worried about
their child re-injuring
their wrist They often
felt that their child's
wrist was unprotected
once the cast was
removed and some
parents limited their
child's activity to
prevent another injury.

She was desperate to get back to it (sport) and so they said give her three months but we didn't we gave her six, but now she's started back and she's fine. (Interview #2, surgical reduction)

He was advised not to play football for about another six weeks when we got home. I added another six weeks to make it almost three months for him not to play football, because I wanted the wrist to heal very well. (Interview #20, non-surgical casting)

I mean it's probably more me, me thinking about him playing football and diving for the ball. I'm like oh god please don't break your wrist again, but I think, because he just doesn't notice it at all it's as good as new, as far as he's concerned. (Interview #11, surgical reduction)

Needing information
Parents wanted
reassurance that their
child's wrist was
healing as expected.
They wanted more
information about what their
child should or should not
do with their wrist once the
cast was removed and
wanted more contact with a
health care professional.

I think that's part of the hard bit, you're discharged now and I know I can always contact them, do you know what I mean. I knew at the time I could always get in touch, if I was worried, and we did both online questionnaires, didn't we, but I suppose I just wondered. I don't know. It may have helped at the time to have had another appointment but I don't know. Or a chance to speak to someone another six weeks later. Probab ly when it got to those six weeks, I wouldn't have needed it, but at the time you just feel a bit nervous still, I think. (Interview #19, non-surgical casting)

Just I would say that they've (the hospital) chucked a cast on her and booted us out the door and then forgotten about us until it comes off. I wanted just that bit of contact in between times, for me anyway, just to make sure she's not been forgotten about really. (Interview #12, non-surgical casting)

It would have been quite helpful to have a little bit more information about how it may be a bit sore, it may feel quite weak, and to be able to give that information to my daughter as well, because she felt quite exposed, I suppose when the cast came off. It was very much right cast's off, it's all going well so we'll see you in a couple of months kind of thing. I think a little bit more information at that point might have been more helpful but I don't know if that's just the function of fracture clinic in that they're very busy. (Interview #1, non-surgical casting)

Theme 3: Comforting my child	Theme	3: Com	fortina	my child
------------------------------	-------	--------	---------	----------

Parents took into account their child's worries and found ways to take care of their child. Parents valued support from caring clinical staff and appreciated staff putting their child at ease.

Understanding my child's worries After injury, children were often tired, scared and in pain. They were conscious of the look of their wrist and felt it was vulnerable. Parents knew what was most important for their child. Some worried about the look of their wrist but others were more concerned about when they could return to sport.

No, I don't think so. I mean I think when kids get worries a lot of the time it's because they reflect your (the parents) worries, don't they. So, I think because I'm not worried about it (the child isn't worried). My partner does sometimes say it's quite wonky still and I say that's fine and it doesn't matter, so he (the child) doesn't think about it at all on a day to day or a week-to-week basis. No, I don't think he's worried about it at all, he hasn't said he is. (Interview #14, non-surgical casting)

I don't if you can get some healing cream, just to speed up the process because it's just so ugly isn't it and it just looks a little bit inflamed when actually it's not. This is what I said to her, you need to look at that and that reminds you how brave you were and we've all got little scars on our bodies that just show we've got through life, doesn't it. (Interview #2, surgical reduction)

Taking care of my child

Parents found ways to help their child cope with their injury, the busy hospital environment and recovery. I think at the time I was trying to be as neutral about everything, as possible. So as not to scare him just in case he did end up having to have it. In retrospect I'm really pleased. Also, he didn't have the operation, so I'm really, really glad now, but I don't think I wanted to show that to him, at the time, if you see what I mean. (Interview #9, non-surgical casting)

We saw the doctor and he showed my child some exercises for physio, to recover. She plays the piano and so the doctor said well, it (playing piano) will help her to recover gradually, for the bone to become stronger, she can move her fingers and so she can still play piano. I did say to her that her arm was broken and still needed to recover, she needs to gradually use them. (Interview #10, non-surgical casting)

Being supported

Parents appreciated staff acknowledging and addressing their worries and valued staff putting their child at ease and answering their child's questions. I mean the experience obviously at the time was, we were really upset, he was upset and he was in pain. We were worried about him and all the normal kind of human reactions that you can have, but I can't fault the treatment and the care he's had. The follow-ups were all timely and he was always well looked after. He was always treated with respect, always treated like a decision maker and never patronised or anything like that. So, I think from my experience, yes, nothing to add really, just that a horrible experience ended up being okay to go through, I guess. (Interview #16, non-surgical casting)

He (the consultant) made her feel important and that whatever she said was worth listening to and I think that actually is probably quite important, that it's not trivial because it's (the injury) life changing. (Interview #8, non-surgical casting)