

A Human Factors Approach to Improving the **Preassessment Anaesthetic Passport Tool for** Paediatric Patients with Additional Support Needs

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Introduction, Aim and Methods

Many patients who visit the Ninewells children's theatre suite (ward 30) have additional support needs (ASN) and present unique challenges for healthcare staff, and understanding how best to support them can be complex as there is no singular approach(1). Individualised anaesthetic passport tools have been successfully implemented at other hospitals.

Aim: To improve the preoperative assessment process for patients with additional support needs through the development of an individualised anaesthetic passport tool which ensures staff are better equipped to meet the needs of these individuals and lead to an improved staff and patient-carer unit experience.

Methods: The double diamond method (2) underpinned the project with the first three phases of the double diamond utilised: Discover, define and develop. At each phase, qualitative data was gathered using the following methods;

DISCOVER – non-participant observation & informal interview.

DEFINE – semi-structured interview designed using SEIPS 2.0 (3) and the Critical Decision Method(4).

DEVELOP - semi-structured interview designed and analysed using SEIPS 2.0 and adapted Tool Acceptance Model (TAM)(5).

The interviews involved 12 healthcare staff (including 2 play specialists, 6 ward nurses and 4 consultant anaesthetists) and 10 patient-carer units.

Key Findings

- All ward staff highlighted that the current system often does not identify patients with ASN 50% of staff recalled not receiving any information about patient's needs prior to their arrival
- 66% of staff recognised that the flow of work can be disrupted by gaps in knowledge of the needs of children with ASN.
- 50% of staff reflected on experiences of patients requiring physical restraint, acknowledging that this can be distressing for all involved.
- 100% of carers of patients were able to detail the patient's additional needs and highlight strategies to support them.
- 100% of patients used different methods of communication and had varied levels of understanding. 50% used visual communication tools such as PECS.
- 80% of carers felt a visual tool to aid in preparing patients for their visit would be beneficial. One patient's school had created a personalised 'social story' for the patient.
- All patients were affected by sensory needs. However, five (50%) patients had a formal diagnosis of ASD and only two patients were described as having sensory processing disorder. There were three patients who were awaiting a diagnosis/ further review by CAMHS.
- All patient-carer units and staff perceived the anaesthetic passport tool as useful and easy to use.

What Matters to Me?

What would I like to wear at the hospital?

- One healthcare staff highlighted uncertainty in applying information such as sensory needs and multiple carers highlighted difficulty in communicating sensory needs.
- Play specialists were highlighted by staff as being valuable and relied upon for the management of patients with ASN;

Final Product

A remit and language emphasising preferences was added to alleviate safety concerns highlighted by staff regarding choice.

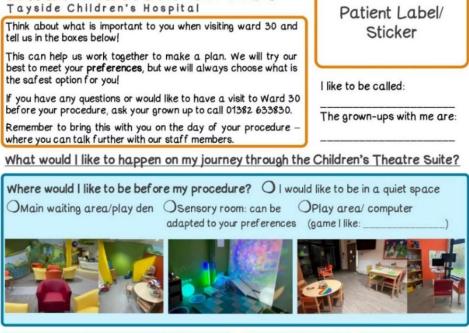
'I just wonder how we form that into these are preferences, they're not binding on the clinician who's looking after you' Healthcare staff 12 (consultant anaesthetist)

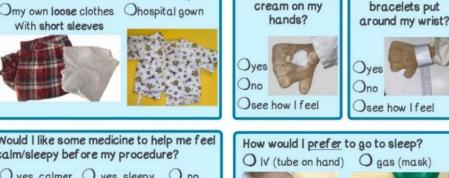
Adding pictures was suggested by 7 promote carers to patient participation as well as simplifying language.

'he would probably need some pictures of things to help him with choosing and understanding' Patientcarer unit 9

It was suggested that the passport could ensure effective communication of needs for both staff and carers.

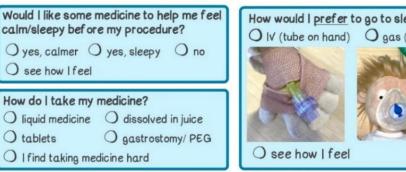
'thats good questions because sometimes we struggle to find out how their autism affects them.' Healthcare staff 5 (nurse)

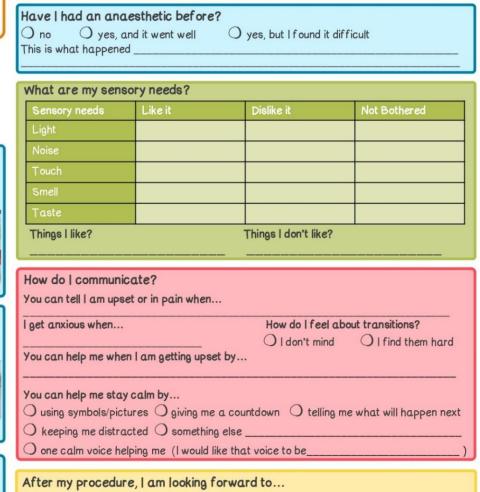




Will I have numbing

Will I have a name





Something else that is important to know about me or my grown-ups...

What Matters to Me? Tayside Children's Hospital

You may not find everything on this page important. You only have to fill out what matters to youl

saying I think it makes me feel like

Two patient-carer units and two staff suggested the passport could help ensure carers feel supported 'I just would think, he's been heard, they know he's got these additional needs and they're looking to make this the best, the most positive experience, not just, well he's got autism he's your problem. I'm

I've got other people on my side.'

Patient-carer unit 3

It was suggested that there could be

'can be identified earlier that can

then lead to maybe a different

planning of the list, just allows extra

time to manage the patients better'

Healthcare staff 1 (consultant

anaesthetist)

improvement in list management

The qualitative data gathered in the discover and define phases of the double diamond highlighted that Ward 30 faced many challenges which stemmed from core organisational problems such as poor and inconsistent identification and information gathering of patients with ASN and resultant issues in list management.

The develop phase produced a 'What Matters to Me' individualised anaesthetic passport tool which looks at procedures, medication intake, environmental/ sensory needs, clothing, communication and patient trauma. A guidance document for staff was created to collate the range of management strategies highlighted and to ensure an understanding of why, how and where to introduce a preassessment tool as advised by wider literature(1). Furthermore, a social story aimed at outlining the hospital journey was also developed to aid in the preparation of patients with ASN for their visit to Ward 30.

Recommendations and Areas for Further Research

Implementation of the developed anaesthetic passport tool, named 'What Matters to Me?' to improve the preassessment process alongside utilisation of the staff guidance document.

Share the social story with ASN patients during in-person preassessment clinics or on admission to aid in patient preparation for their procedure and upload to Healthzone app for access at home.

Incorporating a total communication approach into daily practise using various communication methods to accommodate the wide range of communication abilities, improve patient understanding and patient voice.

Gathering feedback from patients with ASN on their perioperative experience is less well researched and should be explored further to ensure there is a true understanding of the perspectives of this population.

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