

Evidence from qualitative studies with 60 parents and 28 GPs and practice nurses

1 Parents' information needs and consulting triggers

- Parents value consistent advice from a trusted source which addresses their common concerns about their child's RTI.
- Parents want to understand their child's illness better and be reassured about serious illness.
- Parents consult when they think there is a potential threat to their child's health.
- Parents from different socio-economic backgrounds had similar beliefs and concerns.

Ingram J, Cabral C, Hay AD, Lucas P, Horwood J. Parents' information needs, self-efficacy and influences on consulting for childhood respiratory tract infections: a qualitative study. BMC Family Practice. 2013; 14: 106.

2 Parents' understanding of clinician communication

- Clinicians should tailor explanations to parent's expectations and concerns and address the significant symptoms with parents.
- Parents need more advice about symptom relief and more precise safety netting advice.

Cabral C, Ingram J, Hay AD, Horwood J. "They just say everything's a virus" – parent's judgment of the credibility of clinician communication in primary care consultations for respiratory tract infections in children: A qualitative study. Patient Education and Counseling. 2014; 95(2): 248–53.

3 Clinician prescribing decisions in consultations

- Clinical uncertainty remains an important driver of antibiotic prescribing.
- Experience and training in recognising severe RTIs, plus more evidence to identify the children at highest and lowest risk of illness deterioration may help to identify children most and least likely to benefit from antibiotics.

Horwood J, Cabral C, Hay AD, and Ingram J. Primary healthcare practitioners' diagnostic and antibiotic prescribing decisions in children's consultations for respiratory tract infections BJGP.

4 Keeping children 'safe': drivers of consulting and prescribing behaviours for children with RTI

- Social norms in relation to child vulnerability and the protective role of parents and clinicians influences both consulting and prescribing behaviour.
- A perceived threat or uncertainty about the threat lead to parental consulting and clinician prescribing.
- Future interventions to reduce consulting or prescribing need to make the desired action feel safer.

Cabral C, Lucas PJ, Ingram J, Hay AD, Horwood J. "It's safer to ..." parent consulting and clinician antibiotic prescribing decisions for children with respiratory tract infections: An analysis across four qualitative studies. Social Science and Medicine. 2015; 136-137C: 156–64.

