

## [ET-40] Development and Psychometric Evaluation of a Pediatric Sedation Scale Assessing Patient- and Family-Centered Care

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### BACKGROUND:

Patient- and Family-Centered Care (PFCC) is a new approach to the planning, delivery, and evaluation of health care based on the mutually beneficial partnership among patients, families, and health care professionals (1). According to the Institute for PFCC (IPFCC), the 4 core concepts include: dignity and respect, information sharing, participation, and collaboration. Implementation of PFCC can improve patient outcomes and enhance the patient's and family's experience as well as lower health care costs and increase professional satisfaction (2). While a number of tools have been designed to measure PFCC in different settings (3), there is no instrument to assess PFCC in pediatric sedation. To address this issue, the authors developed a pediatric sedation scale.

### OBJECTIVE:

Our aim is to develop and evaluate a short and simple scale that assesses the components of PFCC in all settings of pediatric sedation.

### METHODS:

In Phase 1, we performed a comprehensive literature review on PFCC and pediatric sedation and utilized the expert opinion of 25 anesthesia providers to formulate a list of scale questions. The providers included physician anesthesiologists and sedation nurses who administer deep and moderate pediatric sedation, respectively. The questions consisted of items for each of the core categories outlined by IPFCC. In Phase 2, these items were examined for content validity and statistical significance in order to narrow the item pool. In Phase 3, the remaining item set was reviewed by experts in pediatric sedation to further reduce scale length. In Phase 4, the final item pool was evaluated by 100 parents of children undergoing same-day sedation to determine the relevancy of the scale items.

### RESULTS:

Phase 1 resulted in a scale consisting of 60 items considered important for PFCC in pediatric sedation. Twenty-five items were determined to be content valid and met statistical cut-offs during Phase 2 analyses. During Phase 3, expert review of the remaining items resulted in a final pediatric sedation scale of 15 items. In Phase 4, parental report of item relevancy suggested that all items were considered "Relevant" by at least 65% of parents, and 14 of the 15 items were reported to be "Relevant or Possibly Relevant" by at least 97% of parents. Ten of the 15 items were considered to be "Relevant" by at least 90% of parents.

### CONCLUSION:

These results suggest that, in the assessment of PFCC, the pediatric sedation scale is considered content valid by experts in pediatric sedation and highly relevant to parents of children undergoing sedation. Future work will examine the reliability and construct validity of this promising new instrument.

### REFERENCES:

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  3. Sikich N and Lerman J. Development and Psychometric Evaluation of the Pediatric Anesthesia Emergence Delirium Scale. *Anesthesiology* 2004; 100: 1138-45.
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