A Parental Self-Efficacy Tool in Tracheostomy Care: The Development and Validation of an Instrument

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4. Four Psychological Processes:

Theory:

- Knowledge (cognitive)
- Identifying emergencies (cognitive)
- Performing (cognitive)
- Situation (selection)
- Goals (motivational)
- Coping (affective)

Selection

- Career
- Choice of residence
- Family setup
- Use of time

Develop and validate a tool measuring parental self-efficacy in caring for children with tracheostomies.

Methods - Tool Development

- Develop and validate a tool to measure parental self-efficacy in a series of steps:
  - Identify six domains based on four psychological processes of self-efficacy
  - Create question bank with approximately 50 questions divided evenly among the six domains

- Domain:
  - Knowledge (cognitive)
  - Identifying emergencies (cognitive)
  - Performing (cognitive)
  - Situation (selection)
  - Goals (motivational)
  - Coping (affective)

- Validated Internal Structure by administering tool to Parent Advocates that have experience with neonatology and critical care with experience in tracheostomy education and care.

- Conducted focus group with Texas Children's Parent Advocates that have experience with tracheostomies to establish Response Process/Face Validity.

- Finalize tool with 26 questions over six domains

- Validate Internal Structure by administering tool to new and experienced (>6 months) parents

Methods - Tool Validation

- Content validity established using modified Delphi method of content experts to winnow questions over multiple rounds
  - Consisted of physicians and nurses from neonatology and critical care with experience in tracheostomy education and care

- There were significant differences between experienced and new parent groups in the domains of knowledge, emergency, performance, situation, coping, and total score

- Developed question set and administered tool to 60 participants in tracheostomy education and care.

- Additional studies to correlate tool scores with simulation outcomes will give further validation.

Conclusions

- We systematically developed a tool to measure parental self-efficacy for tracheostomy care. The tool possesses proper response process, content and construct validity.

- Additional studies to correlate tool scores with simulation outcomes will give further validation. This tool can be used to evaluate simulation efficacy in pre- and post-simulation scenarios.