

ORIGINAL ARTICLE

Validity of contents of a paediatric critical comfort scale using mixed methodology[☆]



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Abstract

Introduction: Critical illness in paediatric patients includes acute conditions in a healthy child as well as exacerbations of chronic disease, and therefore these situations must be clinically managed in Critical Care Units. The role of the paediatric nurse is to ensure the comfort of these critically ill patients. To that end, instruments are required that correctly assess critical comfort.

Objective: To describe the process for validating the content of a paediatric critical comfort scale using mixed-method research.

Material and methods: Initially, a cross-cultural adaptation of the Comfort Behaviour Scale from English to Spanish using the translation and back-translation method was made. After that, its content was evaluated using mixed method research. This second step was divided into a quantitative stage in which an *ad hoc* questionnaire was used in order to assess each scale's item relevance and wording and a qualitative stage with two meetings with health professionals, patients and a family member following the Delphi Method recommendations.

Results: All scale items obtained a content validity index >0.80, except physical movement in its relevance, which obtained 0.76. Global content scale validity was 0.87 (high).

During the qualitative stage, items from each of the scale domains were reformulated or eliminated in order to make the scale more comprehensible and applicable.

Conclusions: The use of a mixed-method research methodology during the scale content validity phase allows the design of a richer and more assessment-sensitive instrument.

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PALABRAS CLAVE

Unidad de Cuidados Intensivos;
Psicometría;
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Escala de Evaluación de la Conducta;
Técnica Delphi

Validez de contenido de una escala de confort crítico pediátrico mediante una metodología mixta**Resumen**

Introducción: La enfermedad crítica en el paciente pediátrico incluye desde una patología aguda en un niño sano a una agudización de una enfermedad crónica, hecho que ha conllevado centrar su atención clínica en las Unidades de Cuidados Intensivos Pediátricos. El rol del/la enfermero/a pediátrico/a se centra también en promover el confort en estos pacientes críticos. Por este motivo, es necesario disponer de instrumentos de medida que permitan un correcto sentido del grado de confort.

Objetivo: Describir el proceso de validación de contenido de una escala de confort crítico pediátrico mediante el empleo de una metodología mixta.

Material y métodos: Se realizó una adaptación transcultural del inglés al español mediante el método de traducción-retraducción de la Comfort Behavior Scale. Posteriormente, se validó el contenido de la misma mediante una metodología mixta. Esta segunda etapa se dividió en una fase cuantitativa empleando un cuestionario *ad hoc* donde se valoró la relevancia/pertinencia y el redactado de cada dominio/ítem de la escala y en una cualitativa donde se realizaron dos reuniones con profesionales sanitarios, pacientes y un familiar siguiendo las recomendaciones de la metodología Delphi.

Resultados: Todos los ítems y dominios obtuvieron un índice de validez de contenido $>0,80$, exceptuando el movimiento físico, en su relevancia, que obtuvo un 0,76. El índice global de validez de contenido de la escala fue de 0,87 (elevado).

Durante la fase cualitativa se reformularon y/o eliminaron ítems de cada uno de los dominios de la escala para hacerla más comprensible y aplicable.

Conclusiones: El empleo de una metodología mixta de validación de contenido otorga riqueza y sensibilidad evaluatoria al instrumento a diseñar.

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What is known/what is the contribution of this?

The creation of instruments requires the use of different processes that make it possible to obtain evidence of their validity and reliability for measuring phenomena. Quantitative methodology is usually used for this, by calculating the content validity index. The simultaneous combination of mixed qualitative and quantitative methodologies during the content validation process makes it possible to counterbalance the intrinsic weaknesses of each methodology and reduce the need to perform more than one test during the creation or adaptation of a questionnaire in the field of health.

In the specific case of the comfort phenomenon and its measurement in the context of critical patients, and most especially critical paediatric patients, no scale has been validated in Spanish that makes it possible to explore an aspect as subjective as comfort or discomfort. Nevertheless, this is necessary to the quality of the care given to patients.

Comfort is a fundamental aspect of establishing patient health and early recovery. The results of this study show that using mixed methodology in the validation of a paediatric critical comfort scale improves the instrument being designed, improving semantic comprehension and raising its evaluative sensitivity.

Implications of the study

Knowing the procedure that combines quantitative and qualitative methodologies to validate instruments allows professionals to acquire knowledge that they will be able to apply in similar contexts within their clinical practice.

Moreover, having a validated instrument for measuring and analysing comfort levels in critical paediatric patients offers more in-depth knowledge of the phenomenon. This permits correct comprehension of each part and dimension of the concept, thereby increasing exactitude in the determination of the degree of comfort in these patients.

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