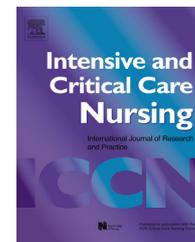




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Measurement of parent satisfaction in the paediatric intensive care unit – Translation, cultural adaptation and psychometric equivalence for the French-speaking version of the EMPATHIC-65 questionnaire

Chantal Grandjean^{a,*}, Jos M. Latour^b, Jacques Cotting^c,
Marie-Christine Fazan^c, Stéphane Leteurtre^d,
Anne-Sylvie Ramelet^a

^a Institute of Higher Education and Research in Healthcare, University of Lausanne, Medical and Surgical Department of Pediatrics, Lausanne University Hospital, Biopôle II, route de la Corniche 10, 1011 Lausanne, Switzerland

^b School of Nursing and Midwifery, Faculty of Health and Human Sciences, Plymouth University, 3 Portland Villas, Room 101, Drake Circus, Plymouth PL4 8AA, United Kingdom

^c Pediatric Intensive Care Unit, Medical and Surgical Department of Pediatrics, Lausanne University of Lausanne, rue du Bugnon 46, 1011 Lausanne, Switzerland

^d Pediatric Intensive Care Unit, University Lille, CHU Lille, EA 2694, Santé publique: épidémiologie et qualité des soins, F-59000 Lille, France

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Cultural adaptation;
Family satisfaction;
Patient reported
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Translation

Summary

Introduction: Within paediatric intensive care units (PICUs), only a few parent satisfaction instruments are validated and none are available for French-speaking parents. The aims of the study were to translate and culturally adapt the Dutch EMPATHIC-65 questionnaire into a French version and to test its psychometric equivalence.

Methods: Two French-speaking PICUs in Switzerland and France participated. The questionnaire was translated using a standardised method and parents with PICU experience were interviewed to assess clarity of the translated version. Secondly, parents of children hospitalised for at least

* Corresponding author.

E-mail addresses: Chantal.Grandjean@chuv.ch (C. Grandjean), Jos.latour@plymouth.ac.uk (J.M. Latour), Jacques.Cotting@chuv.ch (J. Cotting), Marie-Christine.Fazan@chuv.ch (M.-C. Fazan), stephane.leteurtre@chru-lille.fr (S. Leteurtre), Anne-Sylvie.Ramelet@unil.ch (A.-S. Ramelet).

24 hours and who were fluent in French, were invited to complete the French translated version of the EMPATHIC-65 questionnaire. Reliability and validity measures were used to examine its psychometric equivalence.

Results: The overall mean clarity agreement reached 90.2% by 17 French-speaking parents. Eight unclear items have subsequently been reworded. One hundred seventy-two parents completed the French version questionnaire. Reliability and convergent validity have been confirmed by an adequate internal consistency (0.59–0.89) and convergent validity (r_s 0.25–0.63, $p < 0.01$).

Conclusion: Psychometric equivalence of the French EMPATHIC-65 questionnaire highlights the appropriateness of relying on available valid instrument to expand the availability of health instrument measure in French.

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Implications for Clinical Practice

- A valid French version of the EMPATHIC-65 questionnaire is available to evaluate parental satisfaction in paediatric intensive care unit.
- The EMPATHIC-65 questionnaire strongly links parental satisfaction with family-centred care, which is a well-established standard of care, in the promotion of mutual relationship between professionals and families.
- The validated French EMPATHIC-65 questionnaire provides a basis for benchmarking PICU quality of care based on the experiences and satisfaction provided by the French-speaking parents.

Introduction

The admission of a critically ill child to a paediatric intensive care unit (PICU) does have an impact on parents and families. Many stressors specific to the context of PICU may affect physical and psychological health as well as family functioning (Shields, 2001; Shudy et al., 2006; Wasserfallen et al., 2006). Family centred-care (FCC) is an approach that aims to increase the quality of care and partnership with parents in order to decrease negative health outcomes for parents and family members (Institute of Medicine Committee on Quality of Health Care in America, 2001; Institute for Patient- and Family-centered Care, 2013). FCC promotes the mutuality of shared goals, through key elements, such as shared responsibility, parent autonomy and control, negotiation and support of family (Mikkelsen and Frederiksen, 2011) and is also adapted to the specific context of PICU (Latour et al., 2008). The evaluation of parental satisfaction with FCC in the PICU is considered today as one of the fundamental performance indicators in the evaluation of health care quality (Association nationale pour le développement de la qualité dans les hôpitaux et les cliniques, 2016; Institute for Patient- and Family-centered Care, 2016; Latour et al., 2008). Families in hospital have expectations concerning the care of their child and these expectations represent the link between their experiences and their assessment of the care provided and thus, influence their satisfaction (Dodek et al., 2004; Wagner and Bear, 2009).

A few instruments measuring parental satisfaction are validated and appropriate for the population of parents in PICU (Latour et al., 2005; Meert et al., 2011). The Family-Centred Care Scale and the EMpowerment of PArEnts in The Intensive Care (EMPATHIC-65) questionnaire were developed to fill this gap (Curley et al., 2013; Latour et al., 2011). The

latter has been widely introduced in many countries worldwide and is becoming a reference in European countries, allowing for benchmarking. Because such a tool is not available for French-speaking parents, it was appropriate to translate and adapt the EMPATHIC-65 questionnaire in order to measure their experiences and satisfaction. Transferability and applicability are both key concepts for the use of a health measurement scale in different cultures and settings other than the original ones in which the questionnaire was developed. Therefore, particular attention is needed with the cultural relevance of the questionnaire (Streiner and Norman, 2008; Wild et al., 2005).

Methods

Aims

The aims of this study were (1) to translate and culturally adapt the EMPATHIC-65 questionnaire in French and (2) to test psychometric equivalence of the French version of the EMPATHIC-65 questionnaire.

Settings, participants and data collection

Two French-speaking PICUs in Switzerland and in France participated. Both units were tertiary referral centres with similar a patient population. During the translation and cultural adaptation process of the EMPATHIC-65 questionnaire into French, parents who were French native speakers or whose French was their second language and were experiencing hospitalisation of their child in PICUs for at least 24 hours were invited to participate in the translation and cultural adaptation process of the EMPATHIC-65 questionnaire in French. These parents were invited to evaluate the clarity

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