

Parental Satisfaction, Service Quality and Outcomes

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• General considerations when thinking about satisfaction, quality and outcomes

 Specific details about a parent self report instrument

Some results



Why are we interested in this triad?

 We know early detection is not enough, we need quality early intervention – but what is quality?

- A shift from population level questions to context level concerns:
 - Not: does EHDI deliver gains for deaf children?
 - But: what works for which families in which circumstances?



Why are we interested in this triad?

As parents become a greater part of the intervention team

As practice shifts ever more to family centred concerns

- New questions arise about
 - What is success in families' terms?
 - What is a good outcome for whom?



But

 Understanding and measuring satisfaction, quality and outcome is a problem...

 Whether as practitioner, researcher, parent – or all three...



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Satisfaction

Satisfaction is constrained by

Knowledge

Expectations

Who we 'are'



Quality

Quality as structure

- Standards
- Training/skills
- Service elements
- Best practice

Quality as process

- How services are provided
- How professionals behave
- Preferred underpinning philosophies (FCP; IC)



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BUT...

- Subjective elements of appraisal will interact with both quality as structure and quality as process
- Beliefs, values, culture, priorities, previous life experience, expectations, social ecology
- They will cause us to vary in:
 - What we define as relevant, important, significant
 - How much we are satisfied
 - Perceived impact
 - How we interpret advice and support



Outcomes

- To be measured (providing we know the tool we measure with actually measures what we think it does...)
- But whose outcomes and what kind of outcomes are given importance?

 Can different sorts of outcome be correctly interpreted and recognised?



Developing a parent-report quality assessment instrument

- Allow us to have descriptions of input both structures and processes
- Allow us a window into the relevance/meaningfulness of the input
- Allow us to see how perception changes with time
- Allow us to take into consideration parents' personal dispositions



MVOS (Young, Gascon-Ramos, Campbell, Bamford, 2009)

- My Views on Services
- Written questionnaire
- 6 monthly repeat instrument
- 4 parts
- Designed for research but being adapted for practice
- Freely available



The 'who'

 a description of the structure of professional services (including the amount)

evaluated according to timeliness

and availability



Which professionals work with you?

 Have you, as a parent, months regarding your de 		•	ct conta	ct wit	n spec	ialised s	service	es in the pas	t 6	□ Yes	□ No
	and	o have I your d contact	hild	of s mon	support th or y /or you	many h per wed year do ir child g essional	ek, you get	Please, tick if you were offered this service	Please tick if offered BUT refused it at the time	Please, tick if you would like to have contact with this service	Please, tick if you feel it is/was hard to get this service
Audiologist	□ Ye	es 🗆	No	h	week	month	year				
ENT consultant	□ Ye	es 🗆	No	h	week	month	year				
Audiological physician	□ Ye	es 🗆	No	h	week	month	year				
Genetic counsellor	☐ Ye	es 🗖	No	h	week	month	year				
Health visitor	□ Ye	es 🗆	No	h	week	month	year				
Educational audiologist	□ Ye	es 🗆	No	h	week	month	year				
Teacher of the deaf	□ Ye	es 🗆	No	h	week	month	year				
Speech and language therapist	□ Ye	es 🗖	No	h	week	month	year				
Social worker	□ Ye	es 🗆	No	h	week	month	year				
Support worker who is deaf	□ Ye	es 🗆	No	h	week	month	year				
Deaf role model	□ Ye	es 🗆	No	h	week	month	year				
Signing support	□ Ye	es 🗖	No	h	week	month	year				



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The 'what'

the content of intervention

- evaluated according to
 - importance
 - quantity
 - satisfaction

Content of intervention (22 items)

What do services provide you with?

		How	How important is this for How much are you getting of you now? this?						sa No	How satisfied o you with this? Not at all					
1.	Information about available services	Not Important	Somewhat Important	Important	Very Important	Nothing	Not Enough	Enough	Too Much		1	2	3	4	5
2.	Information about deaf children's needs and potential	Not Important	Somewhat Important	Important	Very Important	Nothing	Not Enough	Enough	Too Much		1	2	3	4	5
3.	Information about deafness	Not Important	Somewhat Important	Important	Very Important	Nothing	Not Enough	Enough	Too Much		1	2	3	4	5
4.	Information about how to communicate with my deaf child	Not Important	Somewhat Important	Important	Very Important	Nothing	Not Enough	Enough	Too Much		1	2	3	4	5
5.	Knowledge about how to play with and enjoy my deaf child	Not Important	Somewhat Important	Important	Very Important	Nothing	Not Enough	Enough	Too Much		1	2	3	4	5
6.	Knowledge about how deaf children grow up	Not Important	Somewhat Important	Important	Very Important	Nothing	Not Enough	Enough	Too Much		1	2	3	4	5
7.	Help to encourage my child communication skills	Not Important	Somewhat Important	Important	Very Important	Nothing	Not Enough	Enough	Too Much		1	2	3	4	5
8.	Comprehensive assessments (e.g. language, development, hearing)	Not Important	Somewhat Important	Important	Very Important	Nothing	Not Enough	Enough	Too Much		1	2	3	4	5



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The 'how' of intervention

the process of the intervention

- evaluated according to
 - extent
 - and importance



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18 items

To what extent are professional services...

Not at all	To a very small extent	To a small extent	To a moderate extent	To a fairly great extent	To a great extent	To a very great extent
1	2	3	4	5	6	7

To what extent are professional services...

How important is this for

you now?

Flexible in arranging meetings that take into account your family's availability.	1	2	3	4	5	6	7	Not Important	Somewhat Important	Important	Very Important
Adapting to your needs (e.g. reconsidering what they had planned to do with you on a particular meeting to meet your needs).	1	2	3	4	5	6	7	Not Important	Somewhat Important	Important	Very Important
3. Trusting you as the 'expert' on your child.	1	2	3	4	5	6	7	Not Important	Somewhat Important	Important	Very Important
 Providing enough time to talk (so you don't feel rushed) 	1	2	3	4	5	6	7	Not Important	Somewhat Important	Important	Very Important
Working together with you in designing and deciding the support you want for your child and family.	1	2	3	4	5	6	7	Not Important	Somewhat Important	Important	Very Important
Taking into account your family's culture and lifestyle when working out support plans.	1	2	3	4	5	6	7	Not Important	Somewhat Important	Important	Very Important

The impact...

the overall impact of the intervention

- in terms of
 - child
 - family
 - and parent themselves



6 items

Has the support made a difference?

Overall,	how	much	have	professional	services	made	۵	difference '	for:

	Not at all				Very i	muc
Your child	1	2	3	4	5	
Your family (partner, siblings)	1	2	3	4	5	
Yourself as a person	1	2	3	4	5	
Has this difference been positive for:						
Your child		☐ Yes	3		No	
Your family (partner, siblings)		☐ Yes	6		No	
Your self as a person		☐ Yes	3		No	



Other instruments

 Short form TEIQue [Trait Emotional Intelligence Questionnaire] (Petrides and Furnham, 2001)

- Enables control for 'disposition' [not 'ability']
- Emotional self-efficacy
- Well being, emotionality, self control, sociability



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Examples from TEIQue

- 'I generally hope for the best'
- 'I can handle stress without getting too nervous'
- 'It's easy for me to adjust to new conditions'
- 'It's hard for me to enjoy life'

Instrument properties



Content of Intervention: Scale development

- Two subscales to measure content of support with good reliability were identified:
 - Supporting a deaf child (α =0.87)
 - Supporting parents (α =0.86)
- Inter-scale correlation was high (r=0.75)

- Test-retest correlations were also high after:
 - 6 month (rho=0.88; r= 0.682)
 - 12 months (rho=0.595; r=0.817)

Examples from sub scales

- "Supporting a deaf child"
 - Information about how to communicate with my deaf child
 - Confidence building in parenting a deaf child
 - Knowledge about how to play with and enjoy my deaf child
- "Supporting parents"
 - Help to understand how professional support systems work
 - Emotional support for you and your family
 - Advocacy (making my needs known)

Process of intervention: scale development

- Content validity based on review of Family Centred Practice
- Reliability: High internal consistency (α=0.93)
- All 18 statements necessary to achieve such a high level
- Reliability did not improve with deletion of any statements
- Suggests high construct validity for Family Centred Practice Scale

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Some results??

(Gascon-Ramos, Campbell and Young, 2010)



Questionnaire returns

At entry – 82 (82 mothers and 72 partners)

• 6 months later – 52

12 months later – 23



Demographic Data - Children

- Median age of ID: 1.9 months old
- Mean age entering the study: 11.7 months old
- 40% moderate; 21% severe; 39% profound
- Children with other needs: 23 (27.4%)

Perceived Importance of Content of El



- Ratings of importance for both sub scales were high
 - Supporting Deaf Child were rated as important or very important (mean 3.5; SD 0.52; n=73)
 - Supporting Parents took a second place (mean 2.95; SD 0.59; n=73)
- BUT Intervention that equips parents to support their deaf child is consistently rated as more important than content that addresses their personal support.
- Differences between ratings of importance in both subscales were statistically significant (paired t= 12.03; p< 0.001) and highly correlated (r=0.75; p< 0.001).



Did length of involvement with El change perceptions of importance?

- Comparisons made between:
 - At entry and 6 months later
 - 6 months and 12 months
- High importance persisted on both sub scales
- No statistically significant differences on either sub scale between ratings at different time points, or in the relationship between the 2 sub scales
- Initial appraisals of the importance of content of intervention at 6mths is best predictor of perceived importance subsequently, over and above any differences associated with child characteristics (e.g. degree of deafness).



Did trait emotional intelligence make a difference?

 Mothers' TEIQue did not correlate significantly with ratings of perceived importance of content of intervention (overall, nor on either sub scale)

	SI	C	SP			
	r	р	r	р		
Global Trait El	0.05	0.62	0.11	0.34		
Well being	0.07	0.49	0.13	0.24		
Self-control	0.14	0.20	0.15	0.18		
Emotionality	-0.01	0.92	0.04	0.69		
Sociability	-0.03	0.73	-0.02	0.86		

Disposition does not mediate appraisals of importance of content



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Did educational background matter?

 YES: Mothers with fewer qualifications rated the importance of content relating to supporting them more highly than those with higher qualifications. [Supporting Parents sub scale (F=4.23; p=0.008)

	SD)C	SP			
	<u> </u>			<u> </u>		
	Median	SD	Mean	SD		
No qualifications	3.8	0.2	3.3.	0.7		
High school	3.6	0.2	3.1	0.5		
Higher education certificate	3.7	0.3	3.2	0.4		
Higher education degree, NVQ 6 +	3.7	0.5	2.7	0.5		

 Ratings on the SDC sub scale not affected by education



Parents' Satisfaction with Content of El



- Parents' satisfaction scores on the Supporting a Deaf Child subscale were higher (mean 3.4, SD 0.9) than on the Supporting Parents subscale (mean 3.1, SD 0.8)
- The difference is statistically significant (t =3.24, df= 55, p = 0.002).
- Result not affected by age of child, degree of hearing loss, disability.



Does length of involvement make a difference?

- Comparing at entry with 6 mths later and 12 months later
- Satisfaction scores do increase over time
 - Not statistically significant for the SDC subscale
 - Is statistically significant for the SP subscale

SDC	r	р	Т	df	р
At entry *6 m	0.68	0.001*	1.35	41	0.185
At entry *12 m	0.64	0.006*	-0.82	16	0.425

At entry (mean 3.5; SD 1.0)

6 months (mean 3.3; SD 0.9)

12 months (mean 3.5; SD 0.9)

SP	r	р	t	df	р
At entry *6 m	0.68	0.001*	-0.39	33	0.699
At entry *12 m	0.57	0.028*	-3.44	14	0.004*

At entry (mean 3.1; SD 0.8)

6 months (mean 3.1; SD 0.8)

12 months (mean 3.5; SD 0.7)





The impact of well being

Mother's selfperceived wellbeing is correlated with satisfaction scores on both subscales

 Factor analysis demonstrating a statistically significant association with content

	SD	C	SP			
	r	p	r	p		
Global Trait El	0.125	0.30	0.197	0.13		
Well being	0.243	0.04*	0.300	0.01*		
Self-control	0.171	0.15	0.185	0.15		
Emotionality	0.130	0.27	0.153	0.23		
Sociability	-0.08	0.51	0.086	0.51		

[But mother's educational background does not affect satisfaction scores on either sub scale nor globally].



Conclusions - results

- All content is important and its perceived importance increases over time
- But that which is perceived to be specific to the 'difference' of the deaf child is more significant in the early stages regardless of maternal disposition and child specific characteristics
- initial appraisals of the importance of content of intervention were the best predictor of appraisals 6 months later, over an above any differences associated with child characteristics (e.g. degree of deafness).
- Importance attributed to 'specialist content' not affected by maternal education.
- But importance attributed to personal support was affected by maternal education – those with fewer qualifications attributed greater importance.



Conclusions cont.

- Significant higher satisfaction ratings were associated with content of intervention linked to supporting a deaf child, in comparison with that supporting parents.
- Satisfaction with content associated with supporting parents did increase with length of involvement in intervention
- Unlike in ratings of the importance of content of intervention, maternal well being is consistently associated with satisfaction of content of intervention



Take home messages...

Beware of satisfaction?

 Quality is a dynamic concept – as much about uptake as input

 Build in the 'problems' and the 'messiness' when designing parent report measures



Collaborators

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- Dr Malcolm Campbell
- Professor John Bamford

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http://www.nursing.manchester.ac.uk/research/researchgroups/socialwork/sord/