

# Engaging with Parents to Develop Innovative e-tools that Merge Research & Story

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## ----- Background -----

With increasing demands for family-centered care and patient-oriented health research, strategies are needed for meaningful engagement between researchers, practitioners and health consumers to effectively bridge the research-practice gap in pediatric acute care.



With more than 2.3 million visits annually in the Canada, the emergency department (ED) care of children results in considerable financial, emotional and resource implications for families, health systems and society. Many visits are for minor conditions that could be more aptly treated in other settings or at home. Furthermore, 1 in 5 non-admitted ED visits could be avoided.

Knowledge translation for health consumers (i.e., patients, parents, caregivers) is a vital next step to resolve the challenges posed by acute childhood conditions presenting to emergency departments (EDs). KT efforts emphasize parents' role as a partner in health, can inform parental decisions, shape treatment expectations and influence healthcare utilization.

The purpose of this poster is to: 1) demonstrate our model of engaging parents in developing, evaluating and disseminating KT e-tools, and 2) demonstrate examples of KT e-tools.

## ----- Our Research Process-----

Parents are integrated into our research at key time points:

**1. Determining the acute condition of interest** (completed through TREKK)

- A national needs assessment survey was conducted with parents and healthcare professionals and parents in general EDs in 9 provinces & 1 territory across Canada.
- 897 parents participated, for instance,
  - **Gastroenteritis:** 49% of parents brought their child to the ED due to vomiting, diarrhea, fever, stomach pain, not eating/drinking
  - **Croup:** 15% of parents brought their child to the ED due to difficulty breathing, cough/cold, sore throat

**2. Shaping the storyline and content of the knowledge translation tools** (completed)

- Qualitative interviews are conducted with parents seeking care for their child in pediatric ED
- Unique composite narratives were created for each tool based on thematic analysis findings
- We engage graphic designers, writers, artists and videographers in this process.
- We share KT tool prototypes with parents and get feedback to refine the tools
- The content is vetted by pediatric ED health care professionals

**3. Usability testing**

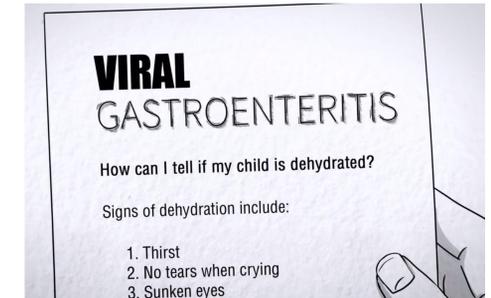
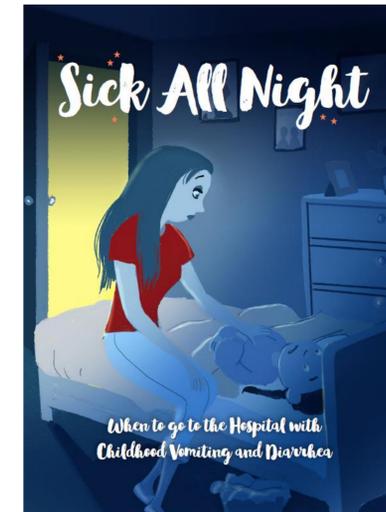
- 10 item electronic surveys are conducted with parents in ED waiting rooms to assess usability, understandability, functionality

**4. Effectiveness evaluation**

- Conduct effectiveness evaluation of KT tools (e.g., RCTs)

**5. Implementation**

- Tools are shared on [www.trekk.ca](http://www.trekk.ca). We measure post-implementation using Google analytics (downloads, views, etc.)



## ----- Significance -----

1. Our KT tools engage parents throughout the development and evaluation process and merge the best available research with the power of art and story. This process ensures parents have access to high quality evidence in pediatric emergency medicine.
2. Understanding and incorporating parents' needs, perspectives, and preferences into the development of knowledge translation tools ensures that critical child health information is communicated in a meaningful, engaging, and effective manner to the people who need it.
3. Our goal is to demonstrate impact and sustainability using this research approach, as there is great potential to use this method to develop a number of knowledge translation products focused on different conditions and/or interactions with between patients/families and the healthcare system.