Validation of the Pediatric Family Needs Questionnaire for Pediatric Rehab [FNQ-PR]
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Background
- Families of children with disabilities experience a large variety of needs over and above those of families with typically developing children.
- Lack of validated tools to assess family needs makes it challenging for clinicians to know what is important to families in the rehabilitation process.
- The Family Needs Questionnaire – Pediatric Version (FNQ-P) was developed to enable a family whose child has sustained an ABI to identify their needs and the extent to which each need is currently met.
- In collaboration with 12 family leaders and 9 clinicians, we adapted the well-validated FNQ-P to make it suitable for children across a wider range of disabilities (Family Needs Questionnaire – Pediatric Rehabilitation Version [FNQ-PR]).

Objectives
1. To conduct reliability and validity testing of the new co-created FNQ-PR
2. Prepare for solution implementation of this newly validated tool with families and into clinical care.

Family Needs Questionnaire – Pediatric Rehabilitation Version

How are you doing at addressing the needs that are important to families of children with disabilities?

Methods
- Study sample: ~100 caregivers of children with disabilities, 2-19 years of age inclusive receiving care from one of the five hospital clinical areas:
  - Inpatient Complex Continuing Care and Specialized Orthopedic and Developmental Rehab
  - Outpatient Spina Bifida Transition, Neuroromotor, and Autism clinics.
- Reliability: Test-retest reliability evaluation of the FNQ-PR.
- Data Analysis: Test-retest reliability evaluated via intra-class correlation coefficients (ICCs). Pearson correlations (r) for validity evaluations.

Reliability and Evaluation Methods:
- The FNQ-PR will be completed at two time points (baseline and retest) – 7-10 days retest interval
- The IFS-15 and MPOC-20 will be completed after the FNQ-PR at the baseline assessment.

Measure Platform:

Anticipated Impact on Clients and Families
The project aims to lead and model social change by enabling:
1. Caregivers to become more knowledgeable about and empowered to identify and advocate for their needs.
2. Clinicians to personalize pathways for families of children and disabilities through clinical adoption of the FNQ-PR.
3. Mobilization of people and clinical teams around center-wide FNQ-PR implementation using guidelines from the FNQ-P Implementation Roadmap
4. Long-term monitoring of family needs for program planning and quality improvement
5. System connection through multi-center use in pediatric rehabilitation research
6. Discovery for action by leveraging existing FNQ-P international links to enhance capacity and supports for families of children with disabilities

Project Collaborators
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