Background
• Mother’s own milk (MOM) provides optimal infant nutrition
• Ill infants requiring hospitalization in the pediatric acute care setting (general pediatric wards and pediatric critical care units) often lack support to continue MOM
• Pediatric acute care providers caring for critically ill infants often not prepared to support MOM
• Prior to developing interventions to support MOM in pediatric acute care an understanding of pediatric acute care providers’ MOM attitudes, skills, and knowledge is needed
• Six measures of providers’ MOM attitudes, skills and knowledge published since 2010 are:
  - Not based on the 2010 US Breast Feeding committee (USBC) Core Competencies in Breastfeeding Care and Services for All Health Professional
  - Focused only on maternal-child and primary care settings

Purpose
• Develop a measure of MOM attitudes, skills, and knowledge based on the 2010 USBC Core Competencies for use in the pediatric acute care setting
• Determine the content validity of newly developed measure

Methods
Measurement Development
• Three domains (attitudes, skills, knowledge) and 42 competencies (27 for all providers, 15 for women/children providers) from the 2010 USBC Core Competencies lay the foundation for instrument development:
  - Domains were matched to competencies for all providers and women/children by two researchers and compared
  - Items from the 6 measures published since 2010 were matched to a competency within each domain by 2 researchers and compared
  - Resulted in: 58-item measure of MOM for Pediatric Acute Care Provider
• Instruction for content experts:
  - Rated each item representativeness of pediatric acute care practice on a 4-point Likert scale (1=not representative, 2=requires major revision, 3=requires minor revision, 4=representative)
  - Each item clarity (yes/no)
  - Provided write-in suggestions for revisions for all items rated 1 or 2 on representativeness or rated “no” for clarity

Scoring and analysis
• Content validity index (I-CVI) calculation:
  - I-CVI=N experts rating item as 3 or 4/total number of items
• Consider revision:
  - (I-CVI > 0.79), 7 retained as written (6 skill and 1 knowledge)
  - (I-CVI between 0.70 and 0.79), 5 items revised and retained (3 attitude and 2 knowledge)
  - (I-CVI < 0.70), 6 items related to early initiation of MOM eliminated (1 attitude and 5 knowledge)
  - 1 item revised (1 skill)

Protocol
• Providers who agreed to participate moved to a REDCap link within introductory email
• Asked to respond within 2 weeks, reminder sent after 2 weeks and 4 weeks to non-responders
• Responders entered in a drawing for a $25 gift card

Results
• Of 31 content experts, 6 (19%) responded

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Content Expert (n=6)</th>
<th>n (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td>Female</td>
<td>6 (100)</td>
</tr>
<tr>
<td>Profession</td>
<td>Nursing leadership</td>
<td>2 (33.3)</td>
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<tr>
<td></td>
<td>APRN</td>
<td>2 (33.3)</td>
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<tr>
<td></td>
<td>Attending Physicians</td>
<td>0 (0)</td>
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<tr>
<td></td>
<td>RN</td>
<td>2 (33.3)</td>
</tr>
<tr>
<td>Years of practice</td>
<td>3 to 5</td>
<td>1 (16.6)</td>
</tr>
<tr>
<td></td>
<td>16 or greater</td>
<td>5 (83.3)</td>
</tr>
</tbody>
</table>

Item I-CVI Thresholds by Domain

- Consider Revision:
  - 1 item revised (1 skill)
- Consider Elimination:
  - 6 items related to early initiation of MOM eliminated (1 attitude and 5 knowledge)
  - 5 items revised and retained (3 attitude and 2 knowledge)
  - 7 retained as written (6 skill and 1 knowledge)

- New 52-item ASK MOM for PAC measure was re-reviewed by 2 researchers, and 6 items were reclassified by domain for: 21 attitude, 12 skill, and 19 knowledge items

Conclusion
• Identification of attitudes, skills, and knowledge in pediatric acute care health providers can inform the development of interventions to support MOM in the pediatric acute care setting
• Further psychometric testing of the ASK MOM for PAC measure is needed to refine those items relating to the acute care setting