

## Family Perception of Care Tool (FPCT)

### Description

The FPCT is 51 item self-report tool measuring family member perceptions of care for institutionalized AD patients. Satisfaction is measured in four areas:

- 1) staff consideration of family and resident,
- 2) management effectiveness,
- 3) physical care, and
- 4) activities

### Sources

The scale was developed by Meridean Maas, Elizabeth Swanson and Kathleen Buckwalter.

### Validity

Content validity was established by a panel of gerontological nurses and social workers who reviewed and revised the instrument. A review of the literature revealed only instruments for measuring family caregiver perceptions for the non-institutionalized patient, so no comparable instrument was available for construct validation.

### Reliability

The most recent psychometric data is from Phase III of a research program to study the effects of Special Care Units for persons with Alzheimer's Disease and related disorders. This represents the first reliability estimates for the 51-item version (See Developmental History below for results from previous analyses.)

Based on a factor analysis of the baseline data from the Phase III research, the instrument subscale structure was revised to have the following four subscales: 1) staff consideration of family and resident, 2) management effectiveness, 3) physical care, and 4) activities. For this version of the tool, Cronbach's alphas figured on the baseline data were .95 for the Total, .97 for Physical Care, .87 for Activities, .88 for Management, and .85 for Consideration.

Items in the subscale structure we are currently using are\*:

consideration (for resident and family member by staff)	Items 2, 8, 10, 11, 28, 35
management effectiveness	Items 7, 12, 47, 50, 51
physical care	Items 37 to 44
activities	Items 14 to 16, 31 to 33

### Development History

A 36 item instrument was developed in the Phase I study. This version measured seven areas: 1) satisfaction with care of the AD patient; 2) appropriateness of the patient unit environment; 3) staff knowledge regarding care of patients with AD; 4) quality of staff relationships with family members; 5) quality of staff relationships with the AD patient; and 6) the family member's relationship with the AD patient; and 7) the family member's feelings about institutionalization of the AD patient. The instrument was increased to 48 items and open-ended questions were added requesting other comments or concerns the family member's might have. Fourteen family member's (20% of sample) wrote about specific concerns including relationships with staff and feeling left out of the AD relative's care, proper care, and concern that the patient did not have enough social and recreational diversions, leading to the addition of 3 more items.

**IMPORTANT NOTE:** Some items must be reverse coded (1=7, 2=6, 3=5, etc.) before calculating individual scores. Reversed items are 2, 7, 12, 15, 37 through 44, and 47 through 51.

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