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Frequently Asked Questions Quick Parenting Assessment (QPA)

What is the QPA?

The QPA is a parent-support tool that integrates healthy discipline education into the pediatric primary care visit. The QPA is designed to improve children's socioemotional health, improve parent/child relationships, and prevent disease (Figure, page 5). Exposure to unhealthy discipline is associated with many physical and mental health problems including child abuse, violence, depression, drug use, suicide attempts, heart disease, lung disease, and obesity. An important step to improve children's health is to support parents' use of healthy discipline strategies.

What does the QPA measure?

The QPA assesses for a child's recent exposure to five unhealthy discipline strategies that are associated with adverse outcomes (questions 2-6, 8-12): 1) overuse of punitive discipline, 2) speaking angrily/yelling, 3) threatening, 4) physical punishment, and 5) humiliating language. The QPA also screens for two positive discipline questions (questions 1 and 7): 1) redirecting and 2) spend-ing more time with the child to explain expectations. When discussing results with parents, health care providers should consider starting the conversation with what parents are doing well (questions 1 and 7).

Who should be screened and when?

The QPA is designed for parents of young children, ages 1-10. Studies demonstrate that parents begin using unhealthy discipline early in a child's life. We recommend screening every couple of years, starting when children are young. In our clinic, we administer the QPA to parents at the 15 month, 30 month, 5 year, and 8 year well visit.

How does the QPA work?

Parents answer 12 "Yes/No" questions that assess how their child has been disciplined in the previous month. Seven questions ask about the discipline practices of the presenting parent. Five questions ask about the discipline practices of other caregivers, giving health care providers valuable insight on the discipline practices of caregivers who do not attend the clinic visit. During the well child visit, health care providers review the survey and respond with an appropriate level of intervention using an algorithm with suggested scripts, resources, and discharge instructions.

Frequently Asked Questions cont.

Quick Parenting Assessment (QPA)

Does the QPA require a lot of time?

Compared to other parenting assessment tools, the QPA is a time-saver. In a survey of U.S. pediatricians, "lack of time" was the most frequently reported barrier to educating parents about healthy discipline strategies. The QPA takes about 1 minute to complete. We present one evidence-based method in which clinicians can respond to low QPA scores in 15-20 seconds and elevated scores in 1-2 minutes (see Appendix).

Don't health care providers currently address discipline in primary care?

The American Academy of Pediatrics recommends that health care providers address discipline, but many parents report that they receive no information about parenting. Some health care providers do provide education about healthy discipline; however, without a parenting assessment, it may be challenging to determine the right level of support needed for an individual parent.

Has the QPA been tested/validated?

Yes. <u>The QPA has been tested and validated.</u> Compared to children with low QPA scores, children with high QPA scores are more likely to have behavior problems and to have been referred for mental health services.

How can health providers avoid emotional conversations?

Sometimes, discussions about parenting can become emotional. This does not mean that discussions should not happen. There are many ways to keep emotions low. Here are some tips:

• **Explain why:** "Thank you for completing this form. We want all parents to know about healthy discipline strategies. This is because we know that how parents discipline their children can affect children's behavioral, emotional, and physical health. Also, how you discipline can affect your relationship with your child."

• Inject humility: "Parenting can be humbling, and no parent does it right 100% of the time."

• **Build strengths and assets:** "When I review your form, I see that you are using some of the best strategies to discipline your child – redirecting (q 1), spending more time with your child and setting expectations (q 7)."

• **Be flexible and patient:** For example, if the parent is using unhealthy discipline options but responded that they did not want to discuss discipline, you might say, "We have learned a lot over the years about many healthy discipline strategies such as redirecting. From the form you filled out, it looks like you are not ready to discuss these great discipline options today, but, in the future, I would be happy to discuss these with you. I am convinced it could help your family."

Frequently Asked Questions cont.

Quick Parenting Assessment (QPA)

Are parents reported for child abuse if they screen positive?

Absolutely not. The QPA may identify a child who is at increased risk of child abuse, but it does not diagnose child abuse. The questions in the QPA were carefully developed such that no response or set of responses result in a report of child abuse. All parents use unhealthy discipline strategies from time to time. The QPA is not designed to identify "bad" parents or child abuse; rather, it is designed to be supportive and non-stigmatizing.

What about social desirability bias?

Some parents may not answer QPA questions accurately because of social desirability bias or another reason. However, this is not too concerning because, even if the QPA is not answered accurately, parents receive the message that parenting is important for their child's health and are reminded of parenting behaviors that they should, and shouldn't use, at home. The QPA is both an assessment and educational tool.

What about assessing exposure to other adverse childhood experiences?

Other childhood stressors include exposure to divorce, mental illness, incarceration, poverty, and bullying. The QPA is designed to be used alone or incorporated into the Pediatric ACEs Algorithm, a more comprehensive ACEs assessment tool that includes other childhood stressors and parents' current and past stressors. The QPA was developed as a stand-alone tool because time constraints may prohibit health care providers from using more comprehensive ACEs assessment tools and to facilitate the completion of follow up QPAs.

Is there a cost to use the QPA?

See copyright disclaimer on page 1.

How can I access forms and learn more about how to use the QPA?

www.QuickParentingAssessment.org

Whom can I contact to learn more about the QPA?

For inquiries about using the QPA, research, or collaboration, please email: <u>seth.scholer@vumc.org</u>

The Potential for the Quick Parenting Assessment (QPA) to Impact Public Health and Improve Pediatric Primary Care Services

Child abuse	Unhealthy parenting	Healthy parenting	
No QPA items diagnose child abuse	 Yelling Threatening Spanking Humiliating language Punitive 	 Redirecting Spending more time with child and setting expectations 	
Rates of child a	buse and associated diseases	Support and education for all parents	
		ents who shift from using ine strategies to healthy ones	

Figure: The potential for the QPA to impact health. In theory, a parenting assessment, integrated into pediatrics and linked with effective interventions, could 1) reduce rates of child abuse and diseases associated with child abuse, 2) increase the proportion of parents who shift from using unhealthy discipline practices toward healthy ones, and 3) improve support and education for all parents by including positive discipline strategies. [Notes: Blurry lines separate child abuse, unhealthy parenting, and healthy parenting. The QPA is not a child abuse screening tool - no QPA items diagnose child abuse. The QPA's five unhealthy parenting items and two healthy parenting items are listed. Punitive discipline, straddling the line, is sometimes recommended but can be unhealthy if overused.]*

*Sausen K.A., Randolph J.W., Casciato A.N., Dietrich M.S., Scholer S.J. <u>The Development, Preliminary Validation, and Clinical Application of the Quick</u> <u>Parenting Assessment</u>, Prev Sci. 2021 Nov 15. doi: 10.1007/s11121-021-01320-w. Epub ahead of print. PMID: 34780005.

Date:				
Name of your child:		Age of your child:		
What is your relationship with your child?	Mother	Father	Grandparent	Other

Parents use many options to discipline their children and no parent does it right 100% of the time. To support you and your child, please let us know what you and other caregivers **do**, not what you **think** you should do.

In the past month, what have YOU done when your child needed to be disciplined?

1. You redirected your child toward a good behavior. For example, you said something like: "Don't bite people, use your teeth to eat food" or "Don't kick the dog, let's go kick a ball".	Yes	No
2. In general, more than once per day, you used time-out or took away privilege.	Yes	No
3. In general, more than once per day, you spoke angrily or raised your voice.	Yes	No
4. You told your child that he/she is going to be spanked, smacked, popped, or slapped.	Yes	No
5. You gave your child a spanking, smack, pop, or slap.	Yes	No
6. You told your child something like "You are a bad boy" or "You are a naughty girl".	Yes	No
You spent more time with your child to talk about or show them how to improve behavior.	Yes	No

In the past month, what have your child's OTHER CAREGIVERS done when your child needed to be disciplined? SKIP questions 8-12 if you are the only caregiver.

8. In general, more than once per day, they used time-out or took away privilege.	Yes
9. In general, more than once per day, they spoke angrily or raised their voice.	Yes No
10. They told your child that they are going to be spanked, smacked, popped, or slapped.	Yes No
11. They gave your child a spanking, smack, pop, or slap.	Yes No
12. They told your child something like "You are a bad boy" or "You are a naughty girl".	Yes No

Your health care provider wants to support you.

Yes No

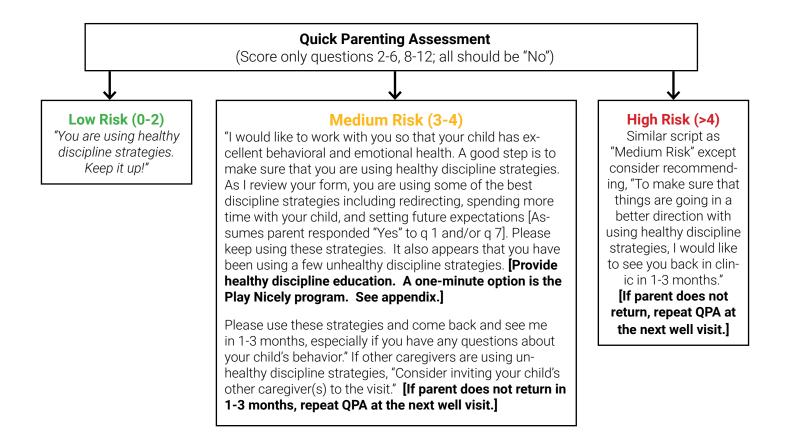
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Assessment: The QPA for this child is 0, low risk.

Algorithm for Health Care Providers Quick Parenting Assessment (QPA)

Scoring: Questions 2-6 and 8-12 should be "No". Score 1 point for each at risk response. Questions 1 and 7, both positive parenting behaviors, can be reviewed but should not be scored. If a parent answers "No" to all questions, consider literacy issues and/or whether the survey was completed accurately. Question 13 gauges a parent's interest in receiving education about discipline.

Script for health care provider: "Thank you for completing the form about how you discipline your child. Discipline is a very important issue for your child's emotional, behavioral, and physical health. It is also important for your relationship with your child. Realize that parenting is challenging, and no parent does it right 100% of the time."



Health care providers usually give written discharge instructions to patients. Below are examples of text that could be provided to parents as part of the QPA. At Vanderbilt University Medical Center, our electronic health record, EPIC, uses Smart Phrases in the After Visit Summary (AVS) Text [i.e. discharge instructions for parent]

.QPALOW:

Healthy Discipline: Our goal is for your child to have excellent emotional and behavioral health. A first step is for parents to use healthy discipline strategies. You are doing it! Keep it up!

Healthy discipline resources:

www.playnicely.org www.cdc.gov/parents www.zerotothree.org

.QPAMEDIUM

Healthy Discipline: We want to support you to help your child have excellent emotional and behavioral health. A first step is for parents to use healthy discipline strategies. Your child will likely have better behavioral health if you and your child's other caregivers use the best discipline strategies to respond to behavior problems.

Although there is no one right way to respond to behavior problems, some discipline strategies work better than others. Try to avoid spanking, yelling, or threatening or saying "No" too much because these do not teach children what they are supposed to do, and these strategies can be unhealthy for your child. First, take the time to explain the rules, using good eye contact. Then, one of the best discipline strategies is to redirect a child toward a more positive behavior. For example, if your child hits another, redirect your child to go build blocks, throw a ball, or help you around the house. If your child kicks, have them go kick a soccer ball or run up and down the hall with their feet. Redirecting works great because you give your child attention, and at the same time, you teach them what they can do, not what they can't.

To learn about healthy ways to discipline, please view the Play Nicely multimedia program at home on your computer or smart phone (see www.playnicely.org). You can check out the Play Nicely Healthy Discipline Handbook from the Family Resource Center on the 2nd Floor of the Doctor's Office Tower. Show the program to everyone who takes care of your child. Your child will behave better if everyone is consistent with discipline. Please use the strategies in the program and come back to see me in 1-3 months, especially if you have any questions about healthy discipline options or your child's behavior.

Healthy discipline resources:

www.playnicely.org www.cdc.gov/parents www.zerotothree.org

Discharge Instructions cont.

Quick Parenting Assessment (QPA)

.QPAHIGH:

Healthy Discipline: We want to support you to help your child have excellent emotional and behavioral health. A first step is for parents to use healthy discipline strategies. Your child will likely have better behavioral health if you and your child's other caregivers use healthy discipline strategies to respond to behavior problems. Although there is no one right way to respond to behavior problems, some discipline strategies work better than others. Try to avoid spanking, yelling, or threatening or saying "No" too much because these do not teach children what they are supposed to do, and these strategies can be unhealthy for your child.

First, take the time to explain the rules, using good eye contact. Then, one of the best discipline strategies is to redirect a child toward a more positive behavior. For example, if your child hits another, redirect your child to go build blocks, throw a ball, or help you around the house. If your child kicks, have them go kick a soccer ball or run up and down the hall with their feet. Redirecting works great because you give your child attention, and at the same time, you teach them what they can do, not what they can't.

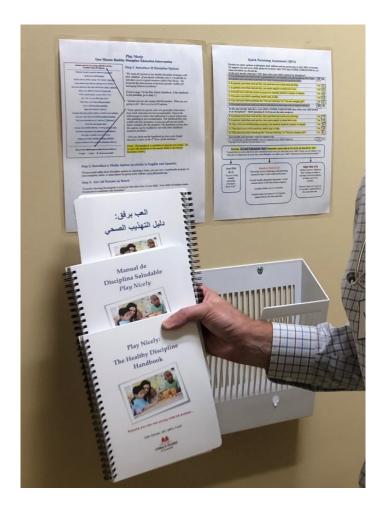
To learn about lots of other healthy ways to discipline, please consider viewing the Play Nicely multimedia program at home on your computer or smart phone (see <u>www.playnicely.org</u>). You can check out the Play Nicely Healthy Discipline Handbook from the Family Resource Center on the 2nd Floor of the Doctor's Office Tower. Show the program to everyone who takes care of your child. Your child will behave better if everyone is consistent with discipline. Please use the strategies in the program and come back to see me in 1-3 months.

Healthy discipline resources:

www.playnicely.org www.cdc.gov/parents www.zerotothree.org

If available, consider including a list of community parenting classes and support groups.

Appendix QPA Resource Station



QPA Resource Station:

Clinicians need training to use the QPA and to respond to positive screens. A QPA Resource Station, created on a wall in clinic, can help with both. At Vanderbilt, parents can check out the Play Nicely handbook from the Family Resource Center. We have found it helpful to clinicians to have the following two pages laminated and placed above a bin containing the handbooks.

Parents use many options to discipline their children and no parent does it right 100% of the time. To support you and your child, please let us know what you and other caregivers **do**, not what you **think** you should do.

In the past month, what have YOU done when your child needed to be disciplined?

1. You redirected your child toward a good behavior. For example, you said something like: "Don't bite people, use your teeth to eat food" or "Don't kick the dog, let's go kick a ball".	Yes	No
2. In general, more than once per day, you used time-out or took away privilege.	Yes (No
3. In general, more than once per day, you spoke angrily or raised your voice.	Yes (No
4. You told your child that he/she is going to be spanked, smacked, popped, or slapped.	Yes	(No [*])
5. You gave your child a spanking, smack, pop, or slap.	Yes	No
6. You told your child something like "You are a bad boy" or "You are a naughty girl".	Yes	No)
7. You spent more time with your child to talk about or show them how to improve behavior.	Yes	No

In the past month, what have your child's OTHER CAREGIVERS done when your child needed to be disciplined? Skip questions 8-12 if you are the only caregiver.

8. In general, more than once per day, they used time-out or took away privilege.	Yes No
9. In general, more than once per day, they spoke angrily or raised their voice.	Yes No
10. They told your child that they are going to be spanked, smacked, popped, or slapped.	Yes NO
11. They gave your child a spanking, smack, pop, or slap.	Yes No
12. They told your child something like "You are a bad boy" or "You are a naughty girl".	Yes No

Your health care provider wants to support you.

13. I would like to discuss healthy ways to respond to my child's behavior. Yes No

Scoring: Q 1 and 7 should be "Yes". However, score only q 2-6, 8-12; all should be "No". "Thank you for filling it out the form about how you discipline. This form is important because how you discipline can affect your child's emotional, behavioral, and physical health."

Low Risk (0-2) "You are using healthy discipline strategies. Keep it up!"

Medium Risk (3-4)

"Parenting can be challenging and humbling. No parent does it right 100% of the time."

Provide healthy discipline education, first building on strengths (q 1 and 7). A one-minute option is the Play Nicely program.

Consider follow up in 1-3 months. If parent does not return in 1-3 months, repeat QPA at the next well visit.

High Risk (>4)

Similar script as "Medium Risk" except consider a stronger recommendation to follow-up in 1-3 months.

If parent does not return in 1-3 months, repeat QPA at the next well visit.

One-Minute Healthy Discipline Education Intervention

Step 1: Introduce 20 Discipline Options

"We want all parents to use healthy discipline strategies with their children. If you haven't already seen it, I would like to introduce you to a great resource called Play Nicely. The program has been proven to increase parents' toolkits for managing behavior problems." [Turn to page 7 in the Play Nicely Handbook. If the handbook is not available, go to Step 2.]

"Assume you see one young child hit </

Here is a list of 20 options."

"Some options are great, some are good after others have been tried, and some are not recommended. Turn to the tabbed pages to learn why redirecting is a great option and why spanking is not recommended. The handbook fills your toolkit with lots of options, so you can pull out one of the better strategies for the situation. The handbook reviews how the options can be modified to use with other childhood behavior problems."

"You can check out the handbook..." [Note: if the handbook is not available to check out in your clinic or resource center, parents can purchase the handbook online or view the free multimedia program.] Assume you see one young child hit another. Consider these 20 options.

Redirect toward a positive behavior (Redirect) Spank your child (Spank) Set the rule by firmly saying "No Hitting" (Set rule) Later, praise your child for playing nicely (Praise) Ask your child how the other child feels (Other's feelings) Place your child in Time-Out (Time-out) Yell or speak angrily at your child (Yell) Say "No" to your child (Say "No") Take away a privilege (Take privilege) Give a warning (Give warning) Ignore the behavior (Ignore) Consider physical activity, sports, or martial arts (Activity) Ask your child about his feelings (Child's feelings) Tell your child that he is a "bad boy" ("Bad boy") Leave the area (Leave area) Discuss why hurtful behavior is wrong (Discuss why) Set future expectations for behavior (Expectations) Role play at another time (Role play) Change your daily schedule (Change schedule) Redirect behavior with a question (Redirect with a ?) Turn to the tabbed page to learn if your choice is: ✓ Great ✓ Good X Not recommended

Image: Page 7 of the Play Nicely Healthy Discipline Handbook

Step 2: Introduce a Media Option (Available in English and Spanish)

"If you would rather learn discipline options by watching a video, you can view a multimedia program on your computer, tablet, or smart phone by going to the website, <u>www.playnicely.org</u>."

Step 3: Get All Parents on Board

"Consider showing the program to everyone who takes care of your child. Your child will behave better if everyone is consistent with discipline."

Step 4: Follow up

"If you have any ongoing concerns about your child's behavior or about how to discipline your child, please come back and see me in 1-3 months."