

Development and Psychometric Assessment of The Collaborative Care for Attention Deficit Disorders Scale

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OBJECTIVE: To describe the development and assess the validity and reliability of the Collaborative Care for Attention Deficit Disorders Scale (CCADDS), a measure of collaborative care processes for children with ADHD who attend primary care practices.

METHODS: Collaborative care was conceptualized as a multidimensional construct. The 41-item CCADDS was developed from an existing instrument, review of the literature, focus groups, and an expert panel. The CCADDS was field tested in a national mail survey of 600 stratified and randomly selected practicing general pediatricians. Psychometric analysis included assessments of factor structure, construct validity, and internal consistency.

RESULTS: The overall response rate was 51%. The majority of respondents were male (56%), age 46 years old and above (59%), and white (69%). Common factor analysis identified 3 subscales: beliefs, collaborative activities, and connectedness. Internal consistency reliability (coefficient α) for the overall scale was 0.91, and subscale scores ranged from 0.80 to 0.89. The CCADDS correlated with a validated measure of provider psychosocial orientation ($r = -0.36$, $p < 0.001$) and with self-reported frequency of mental health referrals or consultations ($r = -0.24$ to $r = -0.42$, $p < 0.001$). CCADD scores were similar among physicians by race/ethnicity, gender, age group, and practice location.

CONCLUSIONS: Scores on the CCADDS were reliable for measuring collaborative care processes in this sample of primary care clinicians who provide treatment for children with ADHD. Evidence for validity of scores was limited. Future research is needed to confirm its psychometric properties and factor structure and provide guidance on score interpretation.

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