Measuring and Understanding the Patient Experience

There is increasing recognition of the valuable perspective patients, residents and family members have about their healthcare experiences, and the input of this into immediate care delivery as well as system planning. Soliciting the perspective of those we serve is a cornerstone in values-based, responsive and safe healthcare delivery.

Patient Satisfaction and Experience Research

Key domains of positive patient experience have been identified by the research of organizations such as the Picker Institute (UK) and the Institute for Patient and Family Centered Care (USA). The Institute of Health Care Improvement (USA) has added to this body of work to identify primary drivers of achieving exceptional patient and family inpatient care experience. Accreditation Canada has embedded these concepts by requiring client experience measurement in the following domains:

- Respecting client values, expressed needs and preferences
- Sharing information, communication and education
- Coordinating and integrating services across boundaries
- Enhancing quality of life, in the care environment and in activities of daily living

AHS and HQCA have designed provincial surveys around the key drivers (domains) of patient, resident and family satisfaction.

ABOUT THIS GUIDE

This guide has been developed to provide basic information for those developing or selecting survey instruments for the purpose of descriptive analysis. Please consult with an expert if there is a need to explore cause and effect relationships or make generalizations about a specific population.

* The term patient includes residents, family members and caregivers.
The Benefits of Surveys

Surveys are one of the important tools that can be used to measure the experience including satisfaction of all stakeholders in the healthcare system. Survey data has become a required source of evidence within the healthcare industry. They are frequently used to solicit information regarding satisfaction and experience but should be used in combination of with other methods of obtaining data. Surveys should not be used as a sole source of information.

Examples of satisfaction, experience and outcome questions:

- **Satisfaction:**
  Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible... What number would you use to rate this hospital during your stay?

- **Experience:**
  Were you involved in decisions about your care as much as you wanted to be?
What Information Do You Already Have?

Before you embark on developing a survey, review the source of information you already have about the patient experience and/or satisfaction. This may help you target your questions and provided basis of comparison.

- Alberta Health Services (AHS) Provincial Survey; i.e., CHCAHPS (Canadian Hospital Consumer Assessment of Health Care Providers and Systems)
- Average Length of Stay (ALS)
- Benchmark data
- Health Quality Council of Alberta (HQCA) Surveys; i.e., Emergency Department, Satisfaction with the Healthcare system
- Health Service Planning documentation
- Initiative specific surveys; i.e., Covenant Health (COV) Path to Home Survey
- Leader Rounding (structured or informal)
- National Surveys; i.e., Visiting Policies (Canadian Foundation for Healthcare Improvement)
- Program based surveys
- Patient Relations feedback data (commendations and concerns)
- Patient, Resident and Family Satisfaction Surveys
- Reporting and Learning System (RLS)
- Site level surveys
Key Drivers of Positive Experience

Surveys in acute care should have questions related to the key drivers of satisfaction (as a minimum). Consider using questions contained in *The Voice of Patients*, as this resource contains reliable and valid tested questions. You can also use questions from the Canadian Hospital Consumer Assessment of Healthcare Providers and Systems Survey or the *HQCA Long Term Care Survey*.

Helpful Links
- [The Voice of Patients: Patient Experience/Satisfaction Surveys Core Questions](http://www.thevoiceofpatients.com/corequestions)
- [HQCA Long Term Care Family Experience 2014-15 Survey Results](http://hqca.ca/surveys/continuing-care-experience/)

Key Drivers of Patient and Family Satisfaction in Acute Care Settings

**Question examples**

- **Respectful Communication**
  - How often did nurses treat you with courtesy and respect?

- **Effective Information Sharing**
  - How often did doctors explain things in a way you could understand?

- **Effective Service Coordination**
  - Do you feel there was good communication about your care between doctors, nurses and other hospital staff?

- **Patient and Family Participation**
  - Were your family or friends involved as much as you wanted in decisions about your care and treatment?

- **Patient Comfort (Pain Control)**
  - How often did the staff do everything they could to help you with your pain?

- **Cleanliness**
  - How often were your room and bathroom kept clean?

- **Overall Rating: Acute Care**
  - Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what would you use to rate this hospital during your stay?
Key Drivers of Resident and Family Satisfaction in Continuing Care

- **Staffing levels**
  - In the last 6 months, how often were you able to find a nurse or aide when you wanted one? *(HQCA)*
  - The staff answers calls for assistance in a reasonable amount of time. *(COV)*

- **Care and security of resident’s belongings**
  - Personal belongs are things like hearing aids, eye glasses and dentures. In the last 6 months, how often were your family member’s personal medical belongings damaged or lost? *(HQCA)*
  - In the last 6 months, when your family member used the laundry service, how often were clothes damaged or lost? *(HQCA)*
  - The facility offers satisfactory personal laundry services *(COV)*

- **Food quality**
  - Using any number from 0 to 10, where 0 is the worst food possible and 10 is the best food possible, what number would you use to rate the food at this nursing home? *(HQCA)*
  - The variety of food on the residents’ menu is good. *(COV)*
  - The facility provides tasty meals for all diet types. *(COV)*

- **Kindness and respect**
  - In the last 6 months, how often did you see the nurses and aides treat your family member with kindness? *(HQCA)*
  - Staff are friendly and courteous. *(COV)*

- **Assistance with activities of daily living – toileting, drinking and eating**
  - Did you help your family member with eating because the nurses or aides didn’t help or made him or her wait too long? *(HQCA)*
  - Personal care and grooming meets resident’ needs. *(COV)*

- **Overall Rating: Continuing Care**
  - Using any number from 0 to 10, where 0 is the worst and 10 is the best care possible, what number would you use to rate the care at the nursing home? *(HQCA)*
  - This is a good place to live and I would recommend it to others. *(COV)*

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Comparison of Canadian Patient Experience and Satisfaction Survey Tools
- Prepared by Patient Relations and Data and Decision Support
Considerations

Well-constructed and administered surveys can be a vital source of information. Questions in these surveys are linked directly to the key drivers of patient satisfaction or in continuing care surveys, resident and family satisfaction.

One of the most important factors to maximize the benefits from survey activity is having the structures in place for discussion of survey results and accountability for taking action. A word of caution, before making substantial changes based on the results of a single survey, consult with an expert in metrics. Survey data can be compromised by a variety of issues including sample size, non-representative participation, survey design, and survey collection methods.

Lastly, whether through numbers or narrative responses, survey data can tell stories we need to hear and explore.

6-Step Process

- **Step 1:** Survey Planning and Design
- **Step 2:** Data Collection
- **Step 3:** Data Analysis
- **Step 4:** Reporting Results
- **Step 5:** Taking Action
- **Step 6:** Post-Survey Evaluation
STEP 1. Survey Planning and Design

Survey Planning

Define your objective

- Determine your goals, purpose for doing a survey, target demographic, sample size, data management and analysis, etc.

Determine your target audience (Sampling Techniques)

- **Convenience Sampling**
  - Convenience Sampling as the name suggests is selecting your sample based on convenience—this may be convenience of available respondents. This kind of sampling is generally used to obtain preliminary data prior to more comprehensive studies.

- **Judgment Sampling**
  - Judgment Sampling techniques rely on adequate population data and a good understanding of your population profile. The surveyor’s judgment is used to select respondents that appropriately represent the population being studied.

Determine your Survey Methods

- Questionnaire
  - Online, self completion (e.g., Survey Monkey)
  - Provided at point of care, posted back
  - Telephone
- Interviews
- Combination of methods
- Caution: avoid over use of open ended questions

Identify resources for data management

- Secure resources for data collection, storage and analysis
- Create plan data analysis plan

Helpful Links

- Setting Yourself Up for Survey Success
  - https://www.surveymonkey.com/mp/how-to-conduct-surveys/
- A brief guide for best practices in survey design: NAIT
  - https://www.google.ca/webhp?sourceid=chrome-instant&ion=1&espv=2&ie=UTF-8&q=nait%20a%20brief%20guide%20for%20best%20practices%20in%20survey%20design
- Sampling Techniques
  - http://www.statpac.com/surveys/sampling.htm
- Survey Methods
- Setting up a Survey Goal
- Examples of language that would be helpful to include in a starting blurb
  - http://www.qualtrics.com/blog/creating-surveys/
- Sample ethics statement:
  - http://nsse.info.yorku.ca/privacy-ethics-statement/
Survey Design

**Ethical Considerations & Consent**

Blurb should be included on all survey instruments at the start (whether paper, online, telephone script, etc.) that includes the following elements:

- Brief introduction identifying who is conducting the survey and explaining how feedback the respondents provide will be used
- Voluntary participation (e.g., your participation in this survey is voluntary and in no way influences your care)
- Privacy and Confidentiality (e.g., your responses remain anonymous and cannot be used to identify you)
- Appreciation for respondent participation

**Formulating survey questions**

- Start by exploring the scope of the information that you need and existing surveys, e.g., CHCHAPS Survey questions
- Outline the flow of your survey
- How you ask a question and your wording affects the answer you will get (e.g. how great were the nurses on a scale of 1 to 10, vs. how would you rate the nursing care you received on a scale of 1 to 10).
- Remember to use plain language and make the questions tailored to your audience.
- Frame the questions in a neutral manner
- Ask only one question at a time, avoid double barrel questions, e.g. rate the menu selection and parking

**Question sequence**

- Questions should flow from the more general to the more specific, from the least sensitive to the most sensitive
- From factual and behavioural questions to attitudinal and opinion questions
- In the last stage, ask demographic questions

**Helpful Links**

- Likert Scale: [https://en.wikipedia.org/wiki/Likert_scale](https://en.wikipedia.org/wiki/Likert_scale)
- The Nuts and Bolts of Survey Construction: [https://www.surveymonkey.com/mp/how-to-create-surveys/](https://www.surveymonkey.com/mp/how-to-create-surveys/)
Select type of response scale

- Use a scale suitable to the amount of information you need, e.g. yes/no questions will yield much different information than a Likert scale (i.e., rate 1 – 5 or ‘never’ to ‘always’)
- Be consistent in the scale selected throughout the survey, don’t use both a 5 point and 7 point Likert scale in the same survey

Closing, Contact Info, Version Control

- Include a short statement thanking the respondent for their participation and letting them know you value their feedback
- Provide contact information to return paper survey, or who to contact for comments/questions/concerns for any survey type
- Ensure the survey has a version date or version number listed at the bottom.

Testing and modifying

- Pilot test all aspects of the survey with individuals of your targeted population if possible. As a minimum, a small-scale pre-test of questionnaires can reveal problems with question wording, layout, understanding or respondent reaction
- Analyze test results (completed questionnaires, response/consent rate etc.). Obtain feedback from respondents and/or interviewers
- Modify procedures, questionnaires and documentation according to test evaluation

STEP 2. Data Collection

Conducting the survey

- Finalize questionnaires, documentation and procedures including contact person for survey
- Prepare for the collection of surveys
- Make survey available
- Train interviewers (if interviewer-based).
- Within 6 weeks from discharge, conduct the survey (that is, mail out questionnaires or commence interviewing) including follow-up of refusals and non-contacts, supervision and checks of interviewers’ work
STEP 3. Data Analysis

Easy-to-Use Tools

- Excel (Resource: Excel and Questionnaires: How to enter the data and create the charts https://www.youtube.com/watch?v=uVGD_5Tk6ao)
- Online Survey Tools (e.g., Survey Monkey)

Helpful Links


Processing & Analyzing Data

- Prepare data; code, enter and edit data
- Tabulate survey results; generally descriptive statistics such as calculating averages or developing narrative responses

Interpreting Your Data

- What are all of the sources of information telling you?
- What surprised you?
- Is there any data that suggests urgent action is needed?
- What do you need to work on?
- Who should be aware of this data?
- What can you celebrate?
Interpreting Survey Data

How is survey data reported?

Basic ways of describing survey results include:

- **Description of respondent group** (e.g., age demographics of respondent group or other variables)
- **Comparison to past results**, **comparison to others**, **comparison to predetermined targets**
  - Ordinal ranking (rank compared to others)
  - Quartile ranking (lower, lower-middle, upper-middle, upper)
  - Percentile ranking
- **Frequency statistics**
- **Trend analysis**
- **Thematic summary for open ended questions**

Applying the results to your service?

- By the impact on individual patient’s that the data reflects, e.g., falls with injury, HAI
- Importance determined by use of statistical analysis to detect statistically significant changes in data and non-random variation in the data
- Comparison to predetermined targets
- By risk analysis

How do we better understand the needs of subpopulation groups or domains of care?

- Categorical data (respondent characteristics, i.e., patient or family member, inpatient/outpatient, age demographics, procedure type, diagnosis)
- Thematic analysis of open ended questions
- Use of composite scoring (scoring of specific domains within the survey tool)
- Consider other sources of information in your action planning
STEP 4. Reporting Results

Discussing the Results

Where were our highest scores?

What are our opportunities for improvement?

What opportunities should we pursue now?

Reporting the key findings and engaging your audience

Use Real Examples from Real People

Emergency: Caller, wife of the patient, stated from the time they came into the ER, "everybody was absolutely wonderful". Caller stated the ER physicians, the Geriatrician in the ER, the Social Worker, the nursing staff were so helpful. Caller stated she was a nurse and was becoming cynical about health care but this experience has been much more positive than she anticipated.
STEP 5. Taking Action

- Who do you need to share the information with (stakeholders)?
- What will you do next? Priorities? Strategic alignment?
- What are the resources that can support you?
- Have you shared your plan with patients, residents and family members? Have you involved them in analysis of the data and action planning?
- Who will be accountable for implementation and supporting the action plans informed by survey data?

STEP 6. Post-Survey Evaluation

Evaluate all aspects of the survey including method and processes after you have completed your survey activity.
Covenant Health Resources

- Ethics Service: 780-735-2055
- Information and Privacy: 1-866-254-8181
- Library Services: See site directory
- Patient Relations: 780-735-7494
- Professional Practice: 780-735-2508
- Quality and Patient Safety: 780-735-2284

External Resources & References

- Accreditation Canada Client and Family Centered Care Webinar: https://www3.accreditation.ca/OrgPortal/Documents/Resources/AddResources/Client%20and%20Family-centred%20Care%20with%20Qmentum/story.html
- ARECCI Ethics Screening Tool: http://www.aihealthsolutions.ca/arecci/screening/87810/020ca21262a146ed6a52fe0d42b7f992
- Assessing survey data: https://www.google.ca/webhp?sourceid=chrome-instant&ion=1&espv=2&ie=UTF-8&q=assessing+survey+data+queensland+treasury
- Ethics, confidentiality, voluntary participation: http://www.ijoa.org/imta96/paper64.html
- Presenting survey results – report writing: https://www.google.ca/webhp?sourceid=chrome-instant&ion=1&espv=2&ie=UTF-8&q=Presenting+survey+results+%E2%80%93+report+writing+queensland+treasury