Mental Health and Substance Use Mini-Survey Pilot Project

Project Team
Steven Hirsche, Kevin Hornbrook, Hanna Perry
Background of the Project

- **Founders of the Project:** Jennifer May and Lillian Parsons
- **Developed project under the direction of the BC Patient Reported Experience Measures Steering Committee, a partnership between the 6 health authorities and the Ministry of Health**
- **Assessing the feasibility of collecting real time data at the unit level to complement the rigorous measurement program at the provincial level**
  - Provincial survey require an external party to administer and collect the data.
  - Survey results provided to all participating sites one year later.
- **Identified need for a way of surveying at the unit level specific to quality improvement**
  - This would inform them of changes that needed to be implemented based on their clients’ responses to the surveys.
  - Action plans for changes could be made quickly and efficiently
Purpose of the Project

Purpose:

- To develop, administer, and frequently report the results of a mini patient experience of care survey for the Mental Health and Substance Use short-stay in-patient population in 4 short-stay in-patient psychiatric units in VCH.
- The project is to support continual quality improvement efforts at the unit level by collecting feedback from recipients of health care and services and appropriately circulating the data to staff and leaders within a time frame appropriate to quality improvement cycles.
- To find out what the patients want, need, and experience in our health care system.

Rationale for Project:

- Enhance the public accountability of BC’s health system.
- Support quality improvement initiatives of health care providers and health authorities at point of care.
- Obtain experience measures used to track changes and trends over time
- Use the identified strengths and areas for improvement to continually guide QI initiatives at the unit level.
- Include information from the perspectives of MHSU patients/clients as a balancing measure.
Student Role

- Manage one survey site per student.
  - Steven: 2 West, VGH
  - Kevin: PASU, St. Paul’s
  - Hanna: R2W, Richmond
- Collect and collate data.
- Communicate with survey team to ensure processes are working, and trouble shoot if not.
- Report all changes or feedback in a “Tracker” document for each site, updated Monthly.
- Provide regular and frequent updates to the project team about the happenings at individual sites.
- Create reports using established reporting framework and template.
- Work with the project team and unit team to facilitate actioning of the survey data.
- Partner with the individual unit teams to transition the survey, data and reporting processes entirely to the unit staff.
- Participate in the evaluation of feasibility project.
Survey Example

• Your Care Experience at Richmond Hospital’s R2W Inpatient Unit
  • Taking part in this survey is completely voluntary and anonymous. Please do not provide any personal information on this survey. After completing this survey, please return it to the dropbox located next to the air hockey table.
  • Please fill in the circle that best reflects your opinions about your recent stay.

1. Overall, how would you rate the quality of care and services you received at this facility?
   O Poor O Fair O Good O Very Good O Excellent

2. Overall, were you helped by your facility stay?
   O Not at all O Somewhat O For the most part O Definitely

3. Were you able to see the staff as often as you wanted?
   O Never O Sometimes O Usually O Always

4. Were your individual needs, preferences, and values respected in your treatment?
   O Never O Sometimes O Usually O Always

5. Did you understand your treatment plan?
   O Never O Sometimes O Usually O Always

6. Were you involved as much as you wanted in decisions about your treatment?
   O Never O Sometimes O Usually O Always  O Someone else makes my decisions for me

7. Were you given reassurance about your ability to recover?
   O Never O Sometimes O Usually O Always

8. As a person living with a mental illness and/or addiction, were you treated with dignity and respect in this facility?
   O Never O Sometimes O Usually O Always

9. Did the staff help you feel like there is nothing shameful about having problems with mental health and/or addiction?
   O Never O Sometimes O Usually O Always

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Data Reporting

Example of results summary for one question.

"Overall how would you rate the quality of care and services you received at this facility?"

<table>
<thead>
<tr>
<th>Period</th>
<th>% of ALL responses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baseline from 2010-11</td>
<td>Overall</td>
</tr>
<tr>
<td>Period 1 (Oct 1 to 15, 2013)</td>
<td>Excellent 40.0%</td>
</tr>
<tr>
<td></td>
<td>Very Good 50.0%</td>
</tr>
<tr>
<td></td>
<td>Good 10.0%</td>
</tr>
<tr>
<td></td>
<td>Fair 10.0%</td>
</tr>
<tr>
<td></td>
<td>Poor 3.0%</td>
</tr>
<tr>
<td>Period 2 (Oct 16 to 31, 2013)</td>
<td>Excellent 40.0%</td>
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<tr>
<td></td>
<td>Very Good 20.0%</td>
</tr>
<tr>
<td></td>
<td>Good 30.0%</td>
</tr>
<tr>
<td></td>
<td>Fair 10.0%</td>
</tr>
<tr>
<td>Period 3 (Nov 1 to 15, 2013)</td>
<td>Very Good 16.7%</td>
</tr>
<tr>
<td></td>
<td>Good 33.3%</td>
</tr>
<tr>
<td>Period 4 (Nov 16 to 30, 2013)</td>
<td>Very Good 33.3%</td>
</tr>
<tr>
<td></td>
<td>Good 33.3%</td>
</tr>
<tr>
<td>Period 5 (Dec 1 to 20, 2013)</td>
<td>Very Good 28.6%</td>
</tr>
<tr>
<td></td>
<td>Good 21.4%</td>
</tr>
<tr>
<td></td>
<td>Poor 14.3%</td>
</tr>
</tbody>
</table>
Current Status: February 2014

- Data reported and presented.
- Positive feedback from all sites.
  - Survey process deemed feasible on the unit level.
  - Desire to continue survey administration.
  - Discussing ways to “action” survey results.

- Transition of survey, data, and reporting processes to unit staff, currently underway.
Next Steps

- This pilot project will serve as a feasibility study for determining the capacity of individual mental health and substance use units to collect and analyze patient satisfaction data at the point of care.
- Cost analysis of implementation and sustainability of a unit specific “patient experience of care” quality improvement protocol.
- At the unit level, data collected will be used to direct change in the delivery of care on the unit.
- Adapt and expand the “patient experience of care” survey process to other units and health authorities.
- Replicate the tools and protocols of this pilot project in other mental health and substance use patient care settings.
UBC Nursing Students:

Hanna, Kevin & Steven