National Patient Experience Survey Programme - the Partnership Approach

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National Patient Experience Survey Programme

Partnership Approach

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Discussion

- Benefits
- International Findings / National Model
- Governance
- Project Overview
a near fatal car accident changed everything...

while I may have been the patient lying in the hospital bed, I was not the only one in that Room who was suffering. The observations that I made truly inspired me and helped me understand how important the role of communication is among the patient, family, and health care provider. When I was able to learn how to talk again, I soon discovered that the power of the voice is amplified when the message is of gratitude, that a simple smile cannot be underestimated, and that body language and tone of voice are critical components within the Hospital room.
Patient Satisfaction vs. Patient Experience

Patient experience is more than satisfaction alone.

Embedded within patient experience is:
- a focus on individualised care
- tailoring of services to meet patient needs and
- engage them as partners in their care.
Why Bother?

Research has consistently demonstrated that patient experience correlates with better health outcomes. For example, patients hospitalized for acute myocardial infarction (AMI) who reported more problems with care had poorer outcomes both one month and twelve months after discharge.

Patient experience is also positively correlated with:
- key financial indicators
- patient loyalty and retention
- reduced medical malpractice risk
- and increased employee Satisfaction.

Benefits

- Holistic way of hearing patients voice
- Internationally: Best practice
- Excellent proxy for quality and safety
Benefit – Patient

- Engaged
- Active
- Informed
Benefit – Service Provider

- Identify areas for improvement of patient care in individual units
- Provides assurance
- Benchmark care provided
Benefit – Regulator

- Informs quality and safety of care
- Informs risk analysis
- Drive Accountability
Benefit – Policy Developer

- National Policy and planning
- National Healthcare Quality Reporting System Service Plan

Currently there are no standardised comparable patient experience surveys applied across the health sector; \textit{if you don't measure it, you cannot improve it.}
Ireland

Currently there is no standardised national comparable patient experience survey applied across the health sector.

This is recognised as a significant gap.
International Findings

- **Model**: Partnership model adopted
- **Governance**: Strong Governance arrangements
- **Scope**: Scope of the Survey must be clear
- **Survey Tool**: Internationally recognised questions
- **Data Protection**: Not an issue internationally
- **Communication**: Robust
- **Commitment**: Capital and Operations, Financial, HR
Project Outline

1. Establish Governance Structure
2. Develop Survey Tool
3. Communication Tools / Guidance / Information Governance documentation
4. Stakeholder Engagement
5. Managed Service
6. Outputs
# Partnership Model

## National Patient Experience Programme

<table>
<thead>
<tr>
<th>Department of Health</th>
<th>Health Information and Quality Authority (LP)</th>
<th>Health Service Executive</th>
<th>Patient Representative</th>
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Formal Partnership - MoU
Roles and Responsibilities

Department of Health
- Direction in terms of policy and legislative requirements
- Promotes capture of patient experience data across the healthcare sector
- Use data to inform national health policy and legislation

Health Information and Quality Authority
- As lead partner, coordinate and manage the project
- Develop survey model
- Develop survey methodology
- Implement the Survey with all partners
- Oversight and produce benchmarking reports

Health Service Executive
- At national level
- Coordinate and communicate with hospitals and hospital groups
- Embed learnings to improve quality of care for the acute care sector
- At Hospital Level
- Collate sample group
- Conduct data quality checks, death checks

Patient Representative
- Represent the patient throughout the programme development and implementation
Governance Structure

NPE Steering Group

NPE Delivery Group

NPE Advisory Group
Scope of NPE Survey

- Adult Acute Care
- 18+
- Minimum stay = 1 night
Survey Tool Development

1. International Questions Set currently purchased from Picker Institute Europe

2. Tested library of questions with 8 NPE Focus Groups
   - 6 with patients in: Galway, Limerick, Tralee, Mater, St. James and Connolly
   - 2 with Data Users: Dublin and Cork

3. Delphi Study: 48 Participants

4. Consultation with International Experts: Picker Institute Europe
Examples of Questions

Did the staff treating and examining you introduce themselves?
- Yes, all of the staff introduced themselves
- Some of the staff introduced themselves
- Very few or none of the staff introduced themselves
- Don’t know / can’t remember

Did you feel you were involved in decisions about your discharge from hospital?
- Yes, definitely
- Yes, to some extent
- No
- I did not want to be involved
Communication

1. Branding

2. Guidance: FAQ for Patients

3. Website:  http://www.patientexperience.ie

4. NPE Survey Pack
What is measured must be reported on and the findings must be used to improve the services, quality and safety of care provided.
Managed Service

- Software: Business Processes, RFT, Define Requirements
- Website: Devoted to NPE: Section for Patients and Section for Service Providers
Key Points

- Partnership Approach
- Governance Structure
- Survey tool ready for finalisation
- Communicate tools
- Managed Service
MCG’s Neuroscience Center of Excellence adult inpatient unit

- Length of stay in the neurosurgical unit decreased by 50%.
- Discharges (volume) increased 15.5%.
- The nursing staff vacancy rate fell from 7.5% to 0%
- Positive change in perceptions of the unit by faculty, staff
In Conclusion

“If patient engagement were a drug, it would be the blockbuster drug of the century and malpractice not to use it.”
Leonard Kish on August 28, 2012
www.hl7standards.com/blog/2012/08/28/drug-of-the-century/

To be successful in the new era of health reform, organizations will have to take engagement to a new level and consider patients central to the care Team.
Questions