National Healthcare Charter

your service, your say

Get involved!
Find out about how you can involve patients in your local health service
contact:
National Advocacy Unit, HSE, Quality & Patient Safety Directorate, Health Service Executive, Oak House, Millennium Park, Naas, Co. Kildare
Tel: (045) 880 400
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www.hse.ie

Staff Guide

Using patient feedback to improve healthcare services

people caring for people
FOREWORD

Following extensive work carried out by the National Advocacy Unit, HSE, we are pleased to introduce this staff guide which is entitled “Using patient feedback to improve healthcare services”.

The purpose of this guide is to assist service providers with the effective capturing, understanding, analysis and use of feedback from service users. It aims to highlight the need for patient involvement to be meaningful and embedded in each service. It complements the work and guidance which we have already developed in patient involvement and healthcare.

A key policy driver for the development of the guide was the recent introduction of the National Standards for Safer, Better Healthcare (Health Information and Quality Authority, 2012).

The Standards have identified person-centred care as a central theme of service delivery and commit to ensuring that the views of key stakeholders, and in particular the perspectives of service users are at the heart of the decision making process.

This staff guide is consistent with health service national priorities and the commitment to effective engagement with people as a fundamental component of accountability for the public health service.

However, ensuring the different views of service users and the public are collected appropriately and used effectively to drive service improvement is a considerable challenge for service providers.

Evidence based methods and processes outlined in this guide have been utilised by service providers throughout the public health service and I wish to thank staff and service users who have contributed to the development of this document throughout the consultation process. I hope that this resource will help you to move forward in ensuring continuous service improvement by being more responsive to your service users in a creative, systematic and sustainable way.

The National Advocacy Unit, HSE will support you to measure patient experience at local level and to use this information to improve healthcare services.

Dr. Philip Crowley
National Director of Quality and Patient Safety Directorate

Greg Price
Director of Advocacy, HSE
"If quality and safety is to be at the heart of everything that we do, we must understand it from the perspective of patients."

KEY POINTS

- For many patients, their experience of care is a powerful determinant of their view of the quality of care.
- Patient experience is a valid indicator of quality in its own right.
- The National Healthcare Charter – You and your health service describes what is important to patients.
- Collecting useful data on patient experience requires effective instruments to be developed.
- For many patients, being treated with dignity and respect and being fully involved in the decision making about their care are key factors for a positive experience.
- Appropriate measurement of patient experience, rather than patient satisfaction, is important for improving healthcare as it allows targeted intervention where necessary.
- A combination of feedback methods is required to get a full picture of patient experience for your organisation.
- Newer methods of measurement, such as gathering real-time patient feedback, enable low-cost, convenient, repeated measurement of patient experience, thereby optimising patient care.
- Patient experience may vary between ward, department and team. Therefore, routine measurement of patient experience at the different levels of the organisation, including clinical teams, is a very important activity alongside the measurement of clinical outcomes which assures patients and the public of the quality of healthcare delivery.
- Involve staff at every level of your organisation in assessing and improving patients experience of care. Staff who work directly with patients can offer a useful perspective on patient experience and should be involved in the development and implementation of quality improvement plans for their organisation.
- Patient feedback should be used as part of a systematic approach to improving healthcare services for patients.
- Work in partnership with patients at local level to measure patient experience, interpret patient feedback and develop quality improvement initiatives.
Using patient feedback
to improve healthcare services

How patients experience healthcare depends on what healthcare professionals and staff do and say, what patients themselves say and do, the physical environment, and the rules and customs that characterise healthcare settings. We all review, judge and respond to what happens to us. This is especially true of patients who are intensely aware of their predicament and of their dependence on staff. Staff too, ask themselves how they handled different situations.

Patients’ judgements about what happened to them and how they reacted to it can be heard at the bus-stop outside the hospital, read in their published accounts of the care they received or did not receive, found in their complaints, and elicited through various forms of feedback.

Patients can judge the same event differently. For example, to some patients, being addressed by their first name is friendly, to others, it is insulting. Underlying the two different judgements, lies a common, if scarcely articulated concern of patients: a wish to be treated as other adults are treated, to be respected and valued as a fellow human being. When healthcare professionals respect patients, they respect their autonomy, support their freedom-of-choice and protect them from coercion. When health professionals value patients, they try to ensure their safety and to secure effective clinical care with a good outcome for them.

We sometimes look at patients as if they were entirely different from people who are well. But patients, are people who happen to be in clinical relationships with healthcare professionals, seeking their help for some unwanted predicament. That predicament may be serious and cause them great anxiety. But they want everyday things as well as the particular knowledge and skills of their doctors and the special care that modern medicine requires. They want to be in clean surroundings, be comfortable and free from pain, treated with dignity, respect and with honesty. They want to be involved in the decision making about their healthcare and to be treated with compassion and skill. These qualities are extremely important in healthcare and are described in the National Healthcare Charter – You and your health service.
The National Healthcare Charter – *You and your health service*, describes what a patient can expect to experience when using health services in Ireland. When we measure patient experience, we measure the principles of care as described in the Charter below.

<table>
<thead>
<tr>
<th>PRINCIPLE</th>
<th>WHAT DO WE NEED TO MEASURE?</th>
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<tbody>
<tr>
<td>ACCESS</td>
<td>Are healthcare services organised to ensure equity of access to public health and social care services?</td>
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<tr>
<td>DIGNITY AND RESPECT</td>
<td>Do we treat people with dignity, respect and compassion?</td>
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<tr>
<td>SAFE AND EFFECTIVE CARE</td>
<td>Do we provide services for patients with competence, skill and care in safe environments by trusted professionals?</td>
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<tr>
<td>COMMUNICATION AND INFORMATION</td>
<td>Do we listen carefully and communicate openly and honestly? Do we provide comprehensive and understandable health information and advice?</td>
</tr>
<tr>
<td>PARTICIPATION</td>
<td>Do we involve people, their families and their carers’ in shared decision making about their health? Do we take account of peoples’ preferences and values?</td>
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<tr>
<td>PRIVACY</td>
<td>Do we do our best to ensure that people have adequate personal space and privacy when they use healthcare services?</td>
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<tr>
<td>IMPROVING HEALTH</td>
<td>Do we promote health? Do we prevent disease and support and empower those with long-term health conditions to manage their conditions?</td>
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<tr>
<td>ACCOUNTABILITY</td>
<td>Do we welcome feedback from people about their experience of health care services? Do we investigate peoples complaints properly and work to address their concerns?</td>
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*For a full list of survey questions that are applicable to your service - contact the National Advocacy Unit.*
Gathering patient feedback about their experience
The diagram above highlights that patient feedback is part of a continuous quality and improvement cycle. A combination of patient feedback methods are required to get a full picture of patient experience for your organisation.

Patient experience surveys
Patient experience surveys help to monitor performance and assess quality. If used amongst a representative sample of service users, this information provides a very good overview of patient experience. The survey instruments should measure what actually happened during the patient’s encounter with health services. International validated tools are available and can be used by your service to help you measure patient experience. Advice on survey tools, sampling, technology, analysis and understanding patient feedback is available from the National Advocacy Unit, HSE.

Analysis of complaints feedback
Analysis of complaints feedback gives you detailed information about the negative experiences that some patients might have when using health services. This analysis should be used in conjunction with the results of your surveys to inform you where problems lie and where you should concentrate efforts, improve patient experience, engage with staff and improve services. To support you to understand your complaints more thoroughly, the National Advocacy unit, HSE, has set-up a categorisation system which captures complaints under the principles of the National Healthcare Charter. Contact the National Advocacy Unit, for more information about complaints analysis.

Other methods of gathering feedback
Other methods of gathering feedback, such as focus groups or observation can be used amongst a small number of patients who may have experience of a particular unit or care. This feedback can be used in conjunction with the results of surveys and complaints analysis to gain an in-depth understanding of peoples experiences, attitudes and ideas for improving healthcare.
Gathering patient feedback – choose the right method

<table>
<thead>
<tr>
<th>Method</th>
<th>Task</th>
<th>Where do you get support to do this?</th>
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<tbody>
<tr>
<td>• Quantitative Patient experience survey</td>
<td>Support quality assessment and demonstrate that you are achieving national standards</td>
<td>Contact the National Advocacy Unit, Q&amp;PSD, HSE for information and support with the following:</td>
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<tr>
<td>carried out amongst a representative sample</td>
<td></td>
<td>• access to validated survey tools to measure patient experience (free of charge)</td>
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<tr>
<td>of service users</td>
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<td>• information on sampling</td>
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<td></td>
<td></td>
<td>• data analysis</td>
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<td>• understanding your results</td>
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<td></td>
<td></td>
<td>• categorising complaints</td>
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<td></td>
<td></td>
<td>• how to conduct a focus group</td>
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<td></td>
<td></td>
<td>• setting up a patient panel</td>
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<tr>
<td>• Detailed analysis of complaints</td>
<td>Identify trends in patient experience, identify areas for improvement</td>
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<tr>
<td>• Population survey</td>
<td>Identify needs in your community</td>
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<tr>
<td>complemented with focus groups and more</td>
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<td></td>
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<tr>
<td>qualitative methods</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Patient panel</td>
<td>Ongoing involvement and engagement with service users</td>
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<tr>
<td>• Patient forum</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Focus groups</td>
<td>In-depth investigation of attitudes, beliefs and peoples experience of services</td>
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<tr>
<td>• One to one interviews</td>
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</table>

Improved patient feedback leaflet available for all locations

The improved patient feedback leaflet is suitable for all healthcare locations. It seeks balanced feedback about patients’ experience. Patients often say that they do not feel comfortable about making a complaint, but they would like to make a suggestion to improve services. A leaflet was developed by a patient working group, who recommended the use of three simple clear questions, which are now incorporated in this leaflet.

1. Name one good thing about your experience/or the service you received?
2. Name one thing that we could improve on?
3. Name one thing that should always happen every time you or others use this service?

Leaflets are available from:
National Advocacy Unit, HSE.
Feedback methods

Patient experience surveys

Measuring patient experience, not satisfaction

The use of measures of patient satisfaction is not recommended as they tend to generate highly subjective responses. Information gathered in this manner has proven to be very unreliable and does not provide the practical, factual information that can be used to improve quality.

Questions about what actually happened during the patient’s journey or encounter with health services, by contrast, ask patients to give factual responses about what happened during an episode of care. By examining particular issues these questions provide services with better information on what is working well and what needs to be improved.

Tailored surveys – enable specific areas of care to be examined in greater depth and can be used as an opportunity to gather information on patient needs, experience and outcomes of care.

Examples of these types of surveys include:

- Condition specific surveys – including coronary heart disease, stroke, COPD, cancer, diabetes and mental health.
- Community services – such as physiotherapy, podiatry and speech and language therapy, general practice.
- Care settings – including emergency, inpatient, out-patient.
- Patient specific – including young people, maternity.

The National Advocacy Unit, HSE has obtained permission to use international validated patient experience tools for all of the above purposes. Contact the National Advocacy Unit, for more information and support with same.

Alternatives to paper – based surveys

Many people are very familiar with paper based surveys. However, there are a number of ways of conducting surveys, which are more cost effective and will help you obtain real-time information about patient experience for your service.

- Online surveys – allow patients to complete the survey from an electronic device, this is very cost effective.
- Telephone surveys – are completed with a researcher talking to the participant through each question, issues can be explored in greater depth. This method is suitable for participants who may have low literacy levels.
- Hand-held devices – can be used for short tailored surveys in a wide variety of settings, including wards, in clinics or following consultations. Volunteer patient advocates are conducting surveys in some locations using hand-held devices.

Qualitative research

Surveys highlight key areas of improvement. While they tell you about what patients think and what their experience was, they do not necessarily tell you why they feel that way. To get a full picture of patient experience in your setting, use a combination of methods. Qualitative feedback, obtained from conducting a focus group or one to one interview, can provide you with additional information to explore the issues raised in surveys in greater depth, and help explain the reasons behind peoples experiences and behaviours.

Focus groups

Gathering small groups of people together to discuss and explore their views in detail provides the opportunity to listen to a range of opinions and experiences. Topics for discussion are identified in advance and a facilitator enables the group to debate them constructively.

One-to-one interviews

Conversations with individual patients or users, whether by phone or face-to-face, provide detailed insights into specific issues or problems.

Observation in healthcare settings

This technique involves a researcher unobtrusively watching and recording behaviour and interactions as they happen. It is a useful approach to investigating patient journeys, activities and processes without interfering with care and treatment. Volunteer advocates carry out observation research in hospitals in Ireland.

Patient panels

 Recruiting a panel of people from the local community provides a sounding board for new ideas and an opportunity to debate and test opinions on an ongoing basis. Views can be sought using online, postal or face-to-face methods.
You said, we did
(demonstrating that you are listening, responding and improving)

Gathering patient feedback is a limited exercise unless something constructive is done with the findings to bring about improvements. Having analysed the results of your surveys and your complaints, and complemented this information with more detailed feedback from focus groups or your patient panel, you then need to decide what to do with this information and where to focus your efforts. A good place to start is by writing an action plan in partnership with your local patient forum. It is better to prioritise areas for action to keep momentum going and to encourage continuous improvement.

Getting started: an action planning workshop

A workshop is a good way to kickstart the action planning process. This allows participants to explore the issues, agree on the resulting priorities and focus on the resources, time and information required to deliver the plan.

Sample Action Plan – responding to the results of patient feedback

<table>
<thead>
<tr>
<th>Identified issue</th>
<th>Objective goal</th>
<th>Work required</th>
<th>Timescale</th>
<th>Responsibility</th>
<th>Monitoring</th>
<th>Link with other work</th>
</tr>
</thead>
<tbody>
<tr>
<td>What issue has the survey identified?</td>
<td>What do you hope to achieve?</td>
<td>• Implement the National Consent Policy</td>
<td>When will this work be done?</td>
<td>Staff responsible for involving patients in shared decision making about their health</td>
<td>Monitored through patient feedback</td>
<td>What initiatives link with this work?</td>
</tr>
<tr>
<td>eg. 25% of patients felt that they were not involved as much as they would like in the decision making about their healthcare</td>
<td>What measurable difference will you make?</td>
<td>• Provide training and information sessions for staff on informed consent and shared decision making in healthcare</td>
<td>What are the major milestones along the way?</td>
<td>Managers responsible for supporting staff to implement National Consent Policy</td>
<td>• Analysis of complaints</td>
<td>Standards for Safer, Better Healthcare</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Make available leaflets for patients “its safer to ask” to encourage patients to become more involved in the decision making about their health</td>
<td></td>
<td></td>
<td>• Results of surveys</td>
<td>Implementation of the National Healthcare Charter</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Discuss patient involvement and informed consent in team meetings</td>
<td></td>
<td></td>
<td>• Feedback from staff</td>
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<tr>
<td></td>
<td></td>
<td>• Ask patients about their experience</td>
<td></td>
<td></td>
<td>• Documented evidence</td>
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</tbody>
</table>

You said, we did (demonstrating that you are listening, responding and improving)
Sharing results
We are continuously making improvements in healthcare. All of these improvements are implemented to improve patients experience and their outcomes of care, however we do not tell people about these changes and what improvements have been made.

Why not let people know that we are listening, responding and improving healthcare in Ireland. Let patients know that their feedback makes a difference and how their feedback has influenced decision making and quality improvement initiatives at local level.

Who should you share your feedback and quality improvement plan with?
Communicating the results of your feedback – and what you plan to do with it – should be communicated with both internal and external audiences. Internal audiences include: board managers, senior managers, staff at all levels, in both clinical and support roles, volunteers and your patient forum. External audiences include: patients, members of the public, local community groups and the media.

A web page called You said, we did has been developed as part of the HSE website. This is an example of how you can profile quality improvement initiatives at local level and demonstrate that patient feedback is being taken seriously in your service. If you would like to demonstrate how you have listened to patients and the improvements which you have made you can post your changes on www.hse.ie/yousaidwedid. Contact the National Advocacy Unit, HSE for further details.

A patient working group for the clinical programmes recommended that an information and awareness campaign aimed at patients be developed on the National Early Warning Score System. This initiative is now underway and will be implemented across all acute hospitals in Ireland. A patient information resource was developed as shown below.
A systematic approach

The National Advocacy Unit, HSE, recommends taking a systematic approach to gathering patient feedback:

Gathering patient feedback is a limited exercise unless something constructive is done with the findings to bring about improvements for patients. This guide outlines the importance of gathering patient feedback as part of a systematic approach to improving healthcare services in Ireland.

Set clear goals – be clear about the information you want, whether it be examining the experiences of people with long term conditions, understanding the needs of minority groups or other objectives.

Identify relevant stakeholders – be clear about who will have an interest and be affected by your plans, how you will involve your patient representatives at local level. How will you engage your staff in quality improvements. Be clear about the governance and monitoring of your work.

Decide who you want to gather feedback from – identify the groups of patients or users you want to reach.

Identify the resources and the expertise that you have access to locally to do this work – what is the most cost effective and sustainable way of doing this work?

Choose the most appropriate methods – be clear which techniques are right for your task, eg. patient surveys, focus groups, analysis of complaints data or other activities.

What additional expertise or resources do you need? – support with developing survey tools, administering surveys, facilitating focus groups, analyzing patient feedback, interpreting results, prioritizing an action plan for improvement, other?

Consider how you will act on the feedback gathered – define ‘before and after’ measures to evaluate the impact of any changes made.

Let everyone know what changes you have made – to improve patient experience and outcomes of care, profile how you have listened to patient feedback, responded to the important issues identified by patients and the improvement you have made at local level. Profile your improvements on You said…we did, www.hse.ie

Contact the National Advocacy Unit, HSE for more information and support and examples of patient experience surveys which you can use at local level.

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