Mental Health and Addictions
Patient and Family Experience Survey Results
Halifax Area, Eastern Shore, West Hants
October 2014 – March 2016

The Feedback and Experience Action Team (FEAT)

This committee gathers feedback from Mental Health and Addiction patients and their family and friends, and is made up of patients, family members, providers/managers, and community support groups. This report is based on the inpatient, outpatient, and family and friends experience surveys. FEAT will use this information to provide recommendations to leadership to help improve services across Mental Health and Addictions. Individual services will receive results specific to their service to evaluate and make improvements in their area.

Survey Tools

<table>
<thead>
<tr>
<th>Method</th>
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<tbody>
<tr>
<td>The Mental Health and Addictions Inpatient and Outpatient Experience Surveys were developed by Accreditation Canada and adopted by the health authority, with permission. The Family and Friends Experience Survey was developed in-house to gather information on the experience of care specifically from family and friends.</td>
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<tr>
<td>All surveys are confidential and anonymous. They are available on-line and in all service areas year-round. There are bi-annual “blitz” weeks, where all patients, family and friends are offered an opportunity to complete a survey. The surveys can be completed on-line, returned to a staff member, or returned by mail using the pre-paid return envelope. This report covers an 18 month period. Typically, this information will be reported on an annual basis.</td>
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What Was Measured

The surveys look at the experience of mental health and addictions care from the perspective of inpatients, outpatients and their family and friends across the following eight dimensions of care:

- Access
- Collaboration
- Dignity and Respect
- Effectiveness
- Environment
- Information
- Rights
- Overall Experience

Additional questions are asked about demographics and space is provided for comments on what went well and what could have been improved.

What These Results Mean

The target (or goal) is to achieve a 90% positive response rate or higher. Positive response rates between 70% and 89% indicate work is required to meet target. Positive response rates below 70% are not meeting target.
**What We Found**

Over the 18 month period 1000 outpatient, 312 inpatient and 121 family and friends experience surveys were returned\(^1\). The following is a summary of results by care dimension. The percentage indicates the average positive response in each dimension.

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Outpatient (% positive results(^*))</th>
<th>Inpatient (% positive results(^*))</th>
<th>Family and Friends (% positive results(^*))</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Access</strong></td>
<td></td>
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<tr>
<td>The length of time waiting for services to start, time for staff to return phone calls, time spent waiting for appointments, time spent waiting to get to a hospital room, and the availability of activities when in hospital.</td>
<td>90%</td>
<td>63%</td>
<td>77%</td>
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<tr>
<td><strong>Collaboration</strong></td>
<td></td>
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<td>Being involved in decisions about treatment, understanding the care plan, feeling supported for improvement and recovery, support for having family and friends involved in care, and involvement in planning for discharge from hospital.</td>
<td>84%</td>
<td>69%</td>
<td>88%</td>
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<tr>
<td><strong>Dignity and Respect</strong></td>
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<tr>
<td>Having individual needs, preferences and values taken into account in treatment, being treated with respect, being treated unfairly for any reason, care regarding physical health problems, and receiving a special diet in hospital (if required).</td>
<td>87%</td>
<td>75%</td>
<td>89%</td>
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<tr>
<td><strong>Effectiveness</strong></td>
<td></td>
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<td>The results of care such as feeling better prepared to deal with daily problems, accomplishing the things you want to do, and being helped by the program or service.</td>
<td>72%</td>
<td>64%</td>
<td>73%</td>
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<tr>
<td><strong>Environment</strong></td>
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<tr>
<td>The cleanliness of the facility, feeling safe, having enough privacy, the quality of hospital food, and if the area around hospital room is quiet at night.</td>
<td>95%</td>
<td>80%</td>
<td>-**</td>
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<tr>
<td><strong>Information</strong></td>
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<tr>
<td>Staff explaining the purpose of medication and possible side effects, being informed about other services and supports available in the community, and the daily routine when arriving for a hospital stay.</td>
<td>78%</td>
<td>71%</td>
<td>73%</td>
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<tr>
<td><strong>Rights</strong></td>
<td></td>
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<tr>
<td>Feeling able to refuse treatment, and knowing how to make a complaint.</td>
<td>49%</td>
<td>45%</td>
<td>-**</td>
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<tr>
<td><strong>Overall Experience</strong></td>
<td></td>
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<td></td>
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<tr>
<td>Overall rating of the services and if the same service would be chosen if treatment was needed again.</td>
<td>91%</td>
<td>73%</td>
<td>80%</td>
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</table>

\(^*\)Positive Score

- 90-100%: Meeting Target
- 70-89%: Needs Work
- <70%: Not Meeting Target

\(^**\)There were no questions corresponding to this domain in the Family and Friends Survey

\(^1\)These numbers represent approximately 6% of outpatients and 15% of inpatients in this time period.
Top Strengths and Top Areas for Improvement

Outpatient Experience Survey Results

Top Strengths
- Cleanliness of areas where service is received: 97%
- Cleanliness of common areas: 95%
- Feeling safe at the program or service: 95%
- Feeling treated with respect by staff: 95%
- Time waiting when you have an appointment: 94%

Top Areas for Improvement
- Knowing how to make a complaint: 26%
- Feeling more ready to accomplish things you want to do: 64%
- Feeling better prepared to deal with daily problems: 70%
- Being informed about other services and supports in the community: 74%
- Consideration of physical health problems: 74%

Inpatient Experience Survey Results

Top Strengths
- Wait time to get to room: 94%
- Cleanliness of common areas: 93%
- Feeling treated with respect by staff: 86%
- Cleanliness of your room: 86%
- Cleanliness of your washroom: 82%

Top Areas for Improvement
- Knowing how to make a complaint: 41%
- Availability of activities on evenings and weekends: 41%
- Availability of activities of interest: 52%
- Feeling treatment can be refused: 52%
- Talking about discharge with staff: 54%

Family and Friends Experience Survey Results

Top Strengths
- Being treated with courtesy and respect: 95%
- Being acknowledged and welcomed by staff and clinicians: 93%
- Feeling safe leaving family/friend in the care of clinicians: 90%
- Knowledge and concerns valued and taken into consideration: 89%
- Comfort with sharing information with clinicians: 88%

Top Areas for Improvement
- Given or informed of the Family Handbook “Living with Mental Illness”: 41%
- Help and support for own health and wellbeing: 49%
- Information about community supports for self and others: 62%
- Information about community supports for the patient: 71%
- Enough information about signs and symptoms of relapse: 74%

“Once I was referred by [ ], I began receiving services, fairly quickly... but prior to that I had been unable to obtain adequate referral, service, or information through my current doctor... I wish I could have regular therapy sessions with my psychiatrist”
– Outpatient Comment

“I truly value the professionalism, understanding and respect shown by this team. I trust this staff... I have a lot of work to do but I feel less alone... The staff, everyone has a great attitude... my voice was valued here.”
– Inpatient Comment

“All staff that worked with [us] were very kind, professional and caring. All our concerns and question were addressed and staff members definitely went out of their way to assist us and our patient. Thank you!!”
– Family/Friend Comment
Recommendations for Improvement

The following recommendations were developed by FEAT based on these results and presented to the leadership of Mental Health and Addictions:

It is recommended that...

1) Staff improve skills and competency to support the involvement of family and friends in care.

2) All patients have a care plan in place, developed in collaboration with the patient, family and provider. The care plan is to follow the guidelines established by Accreditation Canada.

3) More information is made readily available for patients on their rights and how to make a complaint.

4) Goals and expected results are identified in collaboration with the patient and their family and these are monitored regularly in accordance with the care plan.

5) Relevant and easily accessible information is made available for patients and families on topics such as medication (the purpose and potential side effects), supports available in the community, and the signs and symptoms of relapse.

6) Collaboration is improved with the client and family on inpatient units, particularly in making decisions about treatment, talking about and planning for discharge.

7) Activities currently available to inpatients are evaluated to determine, in consultation with patients, how they can be improved.

8) The duty of care to families is clarified to help in the planning and development of supports necessary for the health and wellbeing of families, and to ensure they get the help and support they need to manage day to day situations with their family member or friend.

Thank you very much for taking the time to complete a survey and provide this valuable feedback

We need your input to know what we are doing well and what needs improvement

We appreciate your ongoing feedback to see if our efforts are making a difference

Other ways to provide us feedback include:

- Filling out a comment card available in all service areas
- Speaking with the service manager (please ask a staff member for their contact information)
- Contacting a patient relations representative at (902)473-2133; toll free at 1-855-799-0990; or by email at healthcareexperience@cdha.nshealth.ca

For more information on the surveys or providing feedback, please contact Laura Ankcorn at laura.ankcorn@nshealth.ca or by phone at (902)464-3445