



Commission

Using your survey results for quality improvement

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AGENDA

- Survey development
- The national report
- Using home and community support services experience survey data for quality improvement





He ratonga tautoko, he aroha tangata

Home and community support services experience survey

Using home and community support services experience survey data for quality improvement

Home and Community Support Services experience survey

- A partnership between Te Tāhū Hauora Health Quality & Safety Commission, the Home and Community Health Association, the New Zealand Health Group and Home and Community Support Services (HCSS) providers who opted to participate. Additional funding was provided by Te Whatu Ora Health New Zealand.
- This is the first time we have run a large survey of HCSS clients across Aotearoa New Zealand.
- The questionnaire was developed with consumers and providers. Themes for the questionnaire were informed by the Ngā Paerewa Health and Disability Support Services Standard, the National Framework for Home and Community Support Services and the principles of Enabling Good Lives.
- The survey will be run annually for three years, starting in 2024.



The national survey results – high scores

- The three highest-scoring questions show the support workers' respect for their clients, their culture, spirituality and beliefs, and this should be recognised and celebrated.
- This is directly related to Right 1 of the Code of Health and Disability Consumers' Rights, the 'Right to be treated with respect' and criteria 1.1.1, 1.1.2 and 1.2.1 of the Ngā Paerewa Health and Disability Sector Standards from O Tātou Motika – Our Rights.
- The qualitative comments reflect the high scores received and provide deeper insight into the service user experience:

'Treat us like their treasured kaumatua with respect even in sometimes difficult circumstances. In general, we are more than just a job.'

"....These ladies should be commended for their hard work day in, day out. My mum's face lights up whenever they come over as they make her feel at ease."



During the visits from the support worker(s) was your culture respected?



0% 20% 40% 60% 80% 100% Confidence Interval Indicator An asterisk appears when the rate is significantly different to the National rate

During the visits from the support worker(s) were your spirituality and beliefs respected?



80%

100%

0% 20% 40% 60%

An asterisk appears when the rate is significantly different to the National rate

Did the support worker(s) treat you with respect and kindness?



0% 20% 40% 60% 80% 100% Confidence Interval Indicator

An asterisk appears when the rate is significantly different to the National rate



The national survey results – low scores

- The three lowest-scoring questions are also directly related to the Code of Health and Disability Consumers' Rights, specifically: Right 6, the 'Right to be fully informed'; and Right 10, the 'Right to complain'. This means that Ngā Paerewa Health and Disability Services Standard 'Section 1.6: Effective communication occurs' also applies.
- Effective communication was a common theme in response to the open-ended questions, eliciting both positive and negative comments:

'The staff work hard to try and get cover whenever someone is not available. They will call and keep me updated and I appreciate that. Our new coordinator is very good...He is very efficient and understanding. He will reply to our emails if we have any concerns. We appreciate the staff for being patient and communicating with us.'

'I don't like the fact that we no longer get a roster. I really liked the fact that I had been able to detect irregularities and then correct it before it became a problem.'



If there were changes to your support arrangements, did someone from your provider let you know in advance?



0% 20% 40% 60% 80% 100% Confidence Interval Indicator An asterisk appears when the rate is significantly different to the

National rate

Did your provider take your concern or complaint seriously?



0% 20% 40% 60% 80% 100% Confidence Interval Indicator An asterisk appears when the rate is significantly different to the National rate

Did you know in advance what time to expect your support worker(s)?



0% 20% 40% 60% 80% 100% Confidence Interval Indicator An asterisk appears when the rate is significantly different to the

National rate



Using your results for quality improvement



Watch: Model for Improvement

Video: Model for Improvement (2.54 min) https://www.youtube.com/watch?v=SCYghxtioIY



The Model for Improvement was developed by Associates in Process Improvement (<u>http://www.apiweb.org</u>)



Project plan



The **project plan** is the first step in providing answers to the three questions in the Model for Improvement.



Stakeholders

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Describe the problem or improvement opportunity







Problem analysis tools

- Consumer experience, for example, patient experience survey
- Brainstorming
- Process mapping
- Cause and effect (Fishbone) diagrams
- Five 'whys'

For further information, see Institute for Healthcare Improvement, Quality Improvement Essentials Toolkit, <u>https://www.ihi.org/resources/tools/quality-improvement-essentials-toolkit</u>

For further information, see Te Tāhū Hauora Health Quality & Safety Commission, Quality improvement toolkit for use in age related residential care, https://www.hqsc.govt.nz/resources/resource-library/quality-improvement-toolkit-for-use-in-age-related-residential-care/



Why do we need a problem statement?

Problem analysis to problem statement

- Problems are often described in vague terms with emotion but no magnitude or importance.
- People have many opinions about what the 'cause' of a problem is and often know what the 'solution' is as well.
- For these reasons, many problems continue to exist for many years.
- It is important to start an improvement project correctly to fix the exact problem.



The problem statement is...

• Not a cause	We have poor communication about changes because client information is not up to date.
 Not a solution 	We will improve communication of changes, if we keep client information up to date.
• Factual?	Last-minute changes are responsible for all of our problems around here!
Understandable?	Seven reports indicate that three clients out of four identify 2% of one-third of nearly half of all problems.
• In scope?	The equipment used by the district nursing team is ordered through a new supplier.

Understand the problem – Provider A

National comparisons

The lowest scoring of the national HCSS experience survey results showed problems with communication and the timeliness of service provision.



Local analysis

Provider A looked at their three lowest-scoring questions. Their worst result was the same as the national results. Despite scoring above the national average, this result was below the best practice standard. They reviewed their data and gathered a team together to brainstorm ideas.



Provider A: Problem statement

Provider A's HCSS survey results indicate that only **60% of service users** were informed in advance when their support arrangements changed. This means **40% of whānau experienced unexpected disruptions** in their care, affecting their ability to plan and maintain their routines. Poor communication around changes can lead to distress, loss of trust and a breakdown in whanaungatanga (relationships).



Formulating your problem statement – Provider A

Consider	Example
What is the problem, how big is it?	Forty percent of service users were not notified in advance of changes in support arrangements.
Who does it affect? What's the scope?	Service users, whānau, care staff, administrators.
How does it make them feel?	Anxiety, stress, affects mana and dignity.
When is it a problem?	Every time whānau are not informed of changes.
Why should I care, why is it important?	This can lead to distress. Loss of trust and a breakdown in whanaungatanga.
How does it affect clients?	Te Whare Tapa Whā: Lack of stability, certainty, anxiety, distress, possibility of missed medications, meals, personal care, impact on family members.



The aim statement must relate directly to the problem statement.

Aim:

Ensure that **95% or more** of service users receive timely and clear communication about any changes to their support arrangements by **[target date]**, using a kaupapa Māori approach that upholds manaakitanga (respect and care).

Problem statement:

Provider A's HCSS survey results indicate that only **60% of service users** were informed in advance when their support arrangements changed. This means **40% of whānau experienced unexpected disruptions** in their care, affecting their ability to plan and maintain their routines. Poor communication around changes can lead to distress, loss of trust, and a breakdown in whanaungatanga (relationships).

Developing an aim statement



Element	Description – Provider A
What? (What is it about?)	Changes to support arrangements
Where? (Location, service, team)	Provider A
Who? (Population)	Service users
Baseline (How good?)	60%
Target/goal (By how much?)	95% (25% improvement)
Metric used (eg, percentage, average, etc)	Percentage
By when (Timeliness)	[target date not set, yet]

Provider A aim statement

Ensure that **95% or more** of **service users** receive timely and clear communication about any changes to their support arrangements by **[target date]**, using a kaupapa Māori approach that upholds manaakitanga (respect and care).



Measures



Equity and quality

It is counter-intuitive to think that quality improvement initiatives can improve health overall but make inequities worse, but unfortunately this does occur. Health outcomes may improve overall, **but does the difference in outcome remain?**



More of the same

Shows improvement

Gap worsens

Lion KC, Raphael JL. 2015; Weinick RM, Hasnain-Wynia R. 2011.



Equity versus equality



Robert Wood Johnson Foundation: https://www.rwjf.org/en/insights/blog/2022/11/we-used-your-insights-to-update-our-graphic-on-equity.html

Type of measure

(Provost and Murray 2011)

Measure type	Description	Example			
Outcome	 The voice of the consumer or service user. How is the system performing? What is the result? 	• The percentage of service users who report being notified any changes in advance of any support arrangement changes.			
Process	 The voice of the workings of the process. Logically linked to obtaining the outcomes. Address how key parts of the system are performing. 	 The percentage of changes logged with confirmation timestamp. Percentage of whānau members included in communication, where applicable. 			
Balancing	 What happened to the system as we improved the outcome and process measures? Are there any unintended consequences or competing explanations for the changes occurring? 	 The number of staff complaints regarding the change notification communications. 			
Equity	 Based on identification of those with less power, privilege, economic advantage and poorer outcomes. Consider the family of measures through the lens of identified inequity. 	 The outcome and second process measure stratified by population demographics. 			

Creating operational definitions

Repeatability

Can you, who created the definition, understand it and repeat it?

Reproducibility

After repeatability, can the definition that you have created be reproduced by other people?

Data collection plan – example

Measure	Туре	Definition	Data source	What	How	When	Who
Measure name	Outcome Process Balancing Equity	Definition of words used, any formula or calculations	What is the source of the data?	What will be collected?	How will data be collected?	How frequently and/or when will the data be collected?	Who is responsible for data collection and analysis?
Support arrangement change notification satisfaction	Outcome	Numerator: Service users who agree or strongly agree that they are notified before a change occurs (stratified by key demographics to measure equity). Denominator: All service users	_	All valid survey responses.	Service user experience survey file downloaded.	Internal survey – monthly in the first week of every month.	Lead administrator
		who responded to this survey question (stratified by key demographics to measure equity).				National survey annually.	



Change ideas



Provider A change ideas (Mahi Tai – Collaborative solutions)

- 1. Kanohi-ki-te-kanohi (face-to-face or direct contact first)
 - a. Prioritise **personal phone calls or video calls** for significant changes, rather than just emails or texts.
 - b. Where possible, involve a **trusted whānau member** in communication.
- 2. Whānau-centred notification system
 - a. Introduce **text, email and phone alerts** to notify service users immediately when changes occur.
 - b. Provide bilingual communication (te reo Māori and English), where needed.

Provider A change ideas (Mahi Tai – Collaborative Solutions)

- 3. Kaitiakitanga (guardianship and responsibility for information)
 - a. Implement a **real-time communication tracking system** to ensure every user receives timely updates.
 - b. Staff should have **clear protocols** on when and how to notify users of changes.
- 4. Manaakitanga (enhancing care and dignity through communication)
 - a. Ensure changes are communicated in a **mana-enhancing** way, with reassurance and support offered.
 - b. If a change is unexpected, offer **solutions first** (eg, replacement caregivers, alternative timing).

Change ideas

		Low impact	High impact	
Hig	h effort	Thankless tasks	Major projects	3a 2a
Lov	w effort	Fill-ins	Quick wins 1b 3k 1a 4a 4b	2b


Plan-Do-Study-Act (PDSA)





The PDSA cycle for learning and improvement





Plan



What is/are the objective(s)? What do you want to produce or achieve?

What are the questions? What do you want to learn? What are your predictions? What do you think and/or hope will happen?



Plan data collection to answer the questions from 1 and 2.

- Plan what data will be collected.
- **How** data will be collected.
- When data will be collected.
- Who will collect and analyse data.



PDSA cycle – 1



Cycle 1 objective	Test consumer survey process
Question:	How many surveys will be completed?
Prediction:	At least 25 completed surveys during the survey week.





Plan



Steps to carry out the plan

- 1. One week in every month a random sample of 100 clients will be sent an SMS (text message) survey. Randomisation to ensure that all clients receive a survey twice per year but no more.
- 2. The kaiāwhina will let patients know that there is a possibility of a survey being sent to them in that week. Ensuring they know that the survey is anonymous and the data will be used to guide improvements.
- 3. We will try this commencing Monday.





Plan – data collection



• The survey administrator will download the completed surveys on the Monday following survey week.







Do



What did you observe?

- We noticed that kaiāwhina felt uncomfortable talking to their clients about the survey.
- Kaiāwhina often forgot to mention that the survey week was in progress and clients may receive a survey.





Study



What did you learn?

Did you meet your measurement goal?

• We only had 15 surveys returned at the end of the survey week. This process did not work well.





Act



What did you conclude from this cycle?

- Asking the kaiāwhina to speak to their clients about the survey put them in a potentially compromising position and it was difficult for them to remember to speak to each client about the survey.
- Not enough clients completed the survey, we did not meet our goal.
- Central office will communicate the survey week to clients so that staff are not caused any discomfort or required to remember.



PDSA cycle - 2



Cycle 2 objective	Test changes to the consumer survey process
Question:	How many more surveys will be completed with the new changes to the system?
Prediction:	At least 25 surveys completed in the survey week. An increase of at least 10 from the 15 completed surveys in Cycle 1.





Plan



Steps to carry out the plan

- 1. One week in every month a random sample of 100 clients will be sent an SMS (text message) survey. Randomisation to ensure that all clients receive a survey twice per year but no more.
- 2. Central administration will notify all clients (and staff) a week before survey week that the following week is survey week, ensuring they know that the survey is anonymous and the data will be used to guide improvements.
- 3. We will try this commencing Monday next week with notification for the survey week in the week following.



Questions and discussion







National survey feedback







Main points

- The national home and community support services experience survey provides valuable quantitative and qualitative service user centred data and information that can be used to drive service improvement.
- Given that service users have taken the time to complete the survey, there is a responsibility to use that data to guide service improvement.
- Te Tāhū Hauora Health Quality & Safety Commission is publishing a guide to support teams to use their survey data for improvement. <u>https://www.hqsc.govt.nz/resources/resource-</u> <u>library/using-hcss-survey-data-for-quality-improvement/</u>



Closing



