Evaluation Findings 15 months post-implementation

The Provincial Rollout of the

Family Satisfaction Survey

Background & Context

Each year approximately 144,000 adult patients are admitted to Intensive Care Units (ICU) in acute care hospitals across Ontario. Critical care is often an unfamiliar and stressful experience for patients and their family members. Family members play a key role in the delivery of critical care services as critically ill patients are often so ill they are not able to speak for themselves. Family members are relied upon to provide information such as the patient's medical history, basic likes and dislikes, and to participate in treatment decisions and in some aspects of care provision. As many patients are not able to recall the events of their admission to a critical care unit, understanding the experiences of family members is essential to providing patient-centered care in the ICU.

In 2017-2018, Critical Care Services Ontario (CCSO) partnered with The Ottawa Hospital to develop and implement the Provincial Rollout of the Electronic Family Satisfaction Survey (PREF). This is a large scale initiative, which for the first time will provide a standardized mechanism to capture detailed feedback from patients' families regarding satisfaction of care across all critical care units in Ontario. The success to date on this large scale initiative is due in part to the extensive partnerships CCSO has with the critical care providers in Ontario's health care system (Figure 1).

Objectives Of This Evaluation

(1) Assess whether the goals of the PREF initiative were achieved;

(2) Explore the perceived benefits and user satisfaction;(3) Assess family satisfaction based on the first 15 months of data collected.

The findings of the evaluation will inform future expansion of the initiative.

Evaluation Methodology

This evaluation utilizes multiple data sources and builds on the qualitative research conducted in the previous evaluation study. The data sources were: FS-ICU, online survey of ICU managers, online survey of ICU frontline staff, and discharge data from Critical Care Information System.

From the 18 pilot sites, 3, 780 FS-ICU surveys were received. Surveys were checked for completeness. Those with at least 70% of responses completed were included in the final analysis. The final sample size used for analysis was 3,451. The online survey was completed by 79 ICU staff: 57 frontline; 22 management.

Descriptive statistics were generated for FS-ICU and online survey variables. For the FS-ICU dataset, summary scores were calculated for the two domains (satisfaction with care, and satisfaction with decision making), as well as the total score, by averaging the items within that domain. Internal consistency was calculated for the total score as well as two domain scores using Cronbach's alpha. Item-to-total correlations were generated as part of the internal consistency procedure. The item-to-total correlation coefficients and frequency data were used to construct the performance-importance plots to identify high priority areas that sites may target for quality improvement (Figure 2).

Key Findings

◆ The overall response rate was 15.5% based on all ICU discharges in the same reporting period.

• On a scale between 0 and 100, the average total satisfaction score reported by patient's families was 85.6, ranging from 81.1 to 89.5.

Figure 1: PREF Program Successes To Date

Q1 2018/19	Q1 2019/20	Q2 2019/20	Q3 2019/20	Q4 2019/20
 PREF Pilot at 18 adult Level 3 ICUs 90 Adult Level 3 ICUs in total for Ontario 	Adult Level 3 ICUs Implementation Progress: ✓82 (91%) implemented ✓2 to implement in Q4 ✓6 ICUs' enrollment pending	 ✓ Initiated development of web analytics component 	 Development of web analytics component in progress Planning for implementation in adult Level 2, paediatric and neonatal ICUs 	Rollout implementation in: • Adult Level 2, • Paediatric, and • Neonatal ICUs



Key Findings (cont'd)

• The average satisfaction score for the <u>Decision making</u> domain was 85.7.

• The average satisfaction score for the Care domain was 85.6.

 The most endorsed benefits among ICU frontline and management staff were that FS-ICU provides patients and family members with a voice, and that it is more efficient than paper-based surveys.

♦ ICU management reported the main reasons for participating in the PREF initiative were:

- 1) provides ICU specific patient/family experience data (83%),
- monitoring patient/family experience is a strategic goal of the organization (83%).

♦ From the perspective of ICU management, ongoing areas for improvement for further implementation was building and maintaining buy-in among ICU frontline staff. There is stronger buy-in and support by ICU managers for the initiative, compared to frontline staff, likely owing to their view on opportunties to utilize the feedback data.

A **performance importance plot** (Fig 2) was created to help managers and decision makers to identify and determine what areas need improvement relative to the patients' rating of performance and importance. The highest priority quality improvement targets identified by the performance-importance quadrant plot were the completeness of information, consistency of information, and staff's consideration of the family member's needs.

0.80 FSQUES FSINFO -0 PSEXPL ESCONSIS 0.75 FSHON FSCAREF ۵ FSRNCOM FSCOOR FSNEEDS 0.70 DMSUPP FSRNCARE FSEMOT FSMDCOM 0 ۵ FSMDCARE 0.65 ò 0.60 DMCONTRL **S**FSPAIN 0.55 ۲ DMINC FSAGIT 0.50 FSICUWR FSBREAT 0.45 DMANSW 0.40 65.0 75.0 90.0 95.0 100.0 70.0 80.0 85.0 Performance (% of good/excellent responses)

Conclusions

The evaluation findings are very positive and indicate that the PREF initiative has successfully met its stated goals within 15 months of pilot implementation. The PREF achievements to date include:

 Implemented an electronic format of FS-ICU across Ontario's critical care units, which is superior to paper-based methods;

 Generated valid and reliable satisfaction data encompassing all facets of patient/family voices specific to the ICU;

 Provided centralized data for use in CCSO's performance reporting tools such as existing scorecards; ◆ Participation of 82 adult Level 3 sites in the brief 15 months of implementation, which is remarkable for representing critical care units across Ontario;

 Established monthly meetings for participating ICUs to share experiences and best practices to facilitate sustainability of the initiative;

 Initiated the development of a web analytics platform for participating ICUs to be able to generate customized unit-, LHIN-, and provincial-level reports.

The PREF initiative has clearly demonstrated its viability for providing valid and reliable patient experience data which is more efficient than previous paper-based methods.

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"When the first end results had come back... we distributed that to the staff. Three of the staff were identified by name with positive comments so you saw the whole front-line staff attitude towards the survey kind of shift, and it became more positively received.." [Management Staff]

> "As far as the tablet [iPad] goes, I think that's been certainly the most effective way to do the questionnaire." [Administrative Staff]

