



Patient/Client & Family Council



Waypoint Centre for Mental Health Care

Second Annual Inpatient and Community Client Experience Survey Results Fall 2013



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Second Annual Inpatient and Community Client Experience Survey Results Fall 2013

Background

Patient experience survey is a joint initiative with the Patient/Client & Family Council (PCFC) and Waypoint Centre for Mental Health Care.

Annual Client Experience Surveys (CES) are an invaluable method of gathering information and showing our patient/client base that we are interested in providing quality care and are actively looking for ways to improve. Client Experience Surveys can assist Waypoint in identifying ways of improving our services, which ultimately translates into better care and happier patients/clients. We measure to improve. Without measuring, we have no way of evaluating quality improvement from the patient/client perspective.

Introduction

The Excellent Care for All Act (ECFAA) requires documented continuous improvement. To meet this requirement, Waypoint Centre for Mental Health Care (Waypoint), Royal Ottawa Hospital (The Royal), Centre for Addiction & Mental Health (CAMH), and Ontario Shores Centre for Mental Health Sciences (Ontario Shores) has agreed to conduct a standardized annual Patient/Client Experience Survey. It was decided that the surveying tool used in acute care hospitals was not appropriate for the mental health environment. Therefore, CAMH and Accreditation Canada (AC) undertook the development of a mental health specific survey tool.

Waypoint's Client Experience Survey was conducted in an ethical manner and the results have been reviewed to ensure that no patient(s)/client(s) can be identified. In the event that fewer than five respondents answered the question; the information was added to another program to protect the patient's identity. This ensured patient confidentiality and that no patient could be identified.

All inpatient units/programs will have their own data this survey. In the case of the community survey, the primary programs Outpatients and programs within the HERO Centre will have their own data. Some patients responded for programs not being surveyed this cycle. In order not to lose this valuable information, it has also been analyzed if the response rate was five or above.

The report that follows will compare the data from the Pilot Survey February 2012, the 1st Annual Survey October/November 2012 to the data from the 2nd Annual Survey September/October 2013.



Listen to **Me**,
I am a **person**
Respect Me
Include Me
keep **Me Safe**

Waypoint's Response Rate

The Inpatient Experience Survey and Community Experience Survey were conducted to assess patients'/clients' experiences with mental health services at Waypoint. The inpatient and community surveys were conducted from September 23 – October 11, 2013.

The main criterion for response inclusion in the standardized Accreditation Canada Survey is that each respondent must be a Waypoint patient/client. For Waypoint's Modified Survey, it is allowable to have a family member assist the inpatient with survey completion.

All inpatient and modified survey respondents qualified to have their surveys analyzed and included in the survey count. The respondent rate for the inpatient survey was **148**, modified **36**, and outpatients **135** for a total of **319**.

Patients and Clients Message to Waypoint

Waypoint patients/clients have clearly communicated the importance of participating in the Client Experience Survey with 97% of “able” inpatients completing a survey. Since the Pilot Survey patients/clients continue to provide feedback and this is what they continue to say to Waypoint.

Waypoint’s Definition of the Client Experience Survey

Patients/clients told us that it was important to have their VOICE heard and to be included in developing the Action Plans this was demonstrated by having 97% of able patients completing an inpatient survey. The acronym “voice” means:

Patients’ Voice

Our patients spoke - we listened

| | | |
|--|--|---|
| Values How patients see our hospital’s values | Opinions What is important to our patients | Insight Suggestions on how to improve healthcare they are receiving |
| Collaboration Patients want to be partners in care | Engagement Patients and front-line staff are key in developing quality improvement plans |  |

Why Survey

The power of the Client Experience Survey is to hear the patients' voice and to include their voice in the improvement planning. After the Pilot Client Experience Survey, each program developed Client Experience Action Plan(s) with the assistance of staff, patients/clients and Patient Client & Family Council (PCFC). It is important for the annual survey information to be shared with staff, patients/clients and PCFC so they can evaluate how the action plan(s) have impacted patients on each program. In some cases the action plans listed started after the Pilot Survey and others started after the First Annual Survey. Many of the action plans will take time to implement. The survey over survey comparison now allows Waypoint to view three separate survey cycles prior to the action plans, post the action plan and measure for sustainability.

Each program section below will identify the Client Experience Action Plan and compare the survey data against their area of improvement.

Client Experience Action Plan Results

Our patients identified areas for Waypoint to focus on. Below is how we improved in the following areas:

| Items | Inpatients | Community |
|---|------------------|------------------|
| Food | Increased by 14% | NA |
| Activities | Increased by 9% | NA |
| Respect | Increased by 6% | Increased by 8% |
| Overall, how would you rate the care you are receiving? | Increased by 10% | Increased by 8% |
| If you needed treatment again would you choose to come back to this hospital? | Increased by 12% | Increased by 8% |
| Do you understand your care plan? | Increased by 10% | Increased by 10% |

Clinical Services Plan

Waypoint clinical programs are embracing the Clinical Services Plan (CSP) which includes a Philosophy of Recovery, Culturally Competent Care (responsive care) and Trauma-Informed Care in a Culture of Least Restraint. The Clinical Services Plan started April 2012; therefore the Pilot survey is pre-implementation score and the First and Second Annual Surveys shows the patients’ and clients’ perception of the Clinical Services Plan to date.

To support the CSP vision the following training has occurred: Recovery training, Cultural Competent Care training, and some Trauma Informed Care in a Culture of Least Restraints embedding in the Crisis Prevention and Intervention (CPI) training.

To support this vision the following initiatives have occurred: the introduction of security levels in the provincial programs and the implementation of the new policy on emergency use of restraints – physical, chemical, mechanical and seclusion.

The following survey questions helped Waypoint to evaluate these three foundational themes of the Clinical Services Plan. There is an increase of between 2%-15% in these areas with only one area where the rating decreased by three percent.

Clinical Service Plan Comparison Table Inpatient Data

How to read this table

In the event that the experience has increased, the result is shown in green. If the result has decreased, it is shown in blue.

(N) is the number of patients answering the survey.

The % represents the patients that responded to the question in a positive manner.

| Pre and post implementation of Clinical Services Plan | Pre Implementation | Post Implementation | Post Implementation |
|---|--------------------------------|--|---|
| | Pilot Waypoint 2012 (N=144) | 1 st Annual Waypoint 2012 (N =127) | 2 nd Annual Waypoint 2013 (N=148) |
| 9. Is the area around your room quiet at night? | 63% | 61% | 76% |
| 10. Do you feel safe on your unit? | 74% | 77% | 81% |

| Pre and post implementation of Clinical Services Plan | Pre Implementation | Post Implementation | Post Implementation |
|---|--------------------------------|--|---|
| | Pilot Waypoint 2012 (N=144) | 1 st Annual Waypoint 2012 (N =127) | 2 nd Annual Waypoint 2013 (N=148) |
| 12. How would you rate the overall quality of the hospital food? | 42% | 34% | 47% |
| 14. Are you involved as much as you want in decisions about your treatment? | 56% | 52% | 56% |
| 18. Were your individual needs, preferences and values respected in your treatment? | 53% | 55% | 57% |
| 19. Do you feel that you are treated with respect by hospital staff? | 55% | 63% | 69% |
| 20. Do you feel that you have been treated unfairly at this hospital for any of the following reasons? <i>(The positive response - I was not treated unfairly)</i> | 57% | 58% | 55% |
| 22. Do you feel that staff support your improvement and recovery? | 62% | 62% | 71% |
| 26. Are there enough activities (group therapy, organized activities, etc.) for you to do at this hospital during the day on weekdays (Monday to Friday)? | 56% | 54% | 63% |
| 27. Are there enough activities (group therapy, organized activities, etc.) for you to do at this hospital on evenings and weekends? | 41% | 39% | 52% |
| 28. Are the activities available of interest to you? | 48% | 47% | 53% |
| 31. As a result of this hospital stay do you feel better prepared to deal with daily problems? | 46% | 51% | 59% |
| 32. As a result of this hospital stay do you feel more ready to accomplish the things you want to do? | 55% | 46% | 61% |

| Pre and post implementation of Clinical Services Plan | Pre Implementation | Post Implementation | Post Implementation |
|---|--------------------------------|--|---|
| | Pilot Waypoint 2012 (N=144) | 1 st Annual Waypoint 2012 (N =127) | 2 nd Annual Waypoint 2013 (N=148) |
| 33. Overall, are you being helped by your hospital stay? | 48% | 53% | 65% |
| 34. Overall, how would you rate the care you are receiving? | 55% | 56% | 65% |
| 35. If you needed treatment again would you choose to come back to this hospital? | 39% | 41% | 43% |

Clinical Service Plan Comparison Table Community Data

How to read this table

In the event that the experience has increased, the result is shown in green. If the result has decreased, it is shown in blue.

(N) is the number of patients answering the survey.

The % represents the patients that responded to the question in a positive manner.

| Pre and post implementation of Clinical Services Plan | Pre Implementation | Post Implementation | Post Implementation |
|--|--------------------------------|--|---|
| | Pilot Waypoint 2012 (N=107) | 1 st Annual Waypoint 2012 (N =267) | 2 nd Annual Waypoint 2013 (N=135) |
| Is the area around your room quiet at night? | NA | | |
| 8. Do you feel safe when you are at this program or service? | 83% | 86% | 98% |
| 12. How would you rate the overall quality of the hospital food? | NA | | |

| Pre and post implementation of Clinical Services Plan | Pre Implementation | Post Implementation | Post Implementation |
|--|---------------------------------------|---|--|
| | Pilot Waypoint 2012 (N=107) | 1 st Annual Waypoint 2012 (N =267) | 2 nd Annual Waypoint 2013 (N=135) |
| 10. Are you involved as much as you want in decisions about your treatment? | 77% | 76% | 82% |
| 14. Were your individual needs, preferences and values respected in your treatment? | 85% | 79% | 91% |
| 15. Do you feel that you are treated with respect by hospital staff? | 80% | 82% | 90% |
| 16. Do you feel that you have been treated unfairly at this hospital for any of the following reasons? (The positive response - I was not treated unfairly) | 75% | 70% | 85% |
| 18. Do you feel that staff support your improvement and recovery? | 87% | 85% | 87% |
| 23. As a result of your care with this program or service do you feel better prepared to deal with daily problems? | 62% | 74% | 69% |
| 24. As a result of your care with this program or service do you feel more ready to accomplish the things you want to do? | 64% | 65% | 62% |
| 25. Overall, are you being helped by your care with this program or service? | 83% | 81% | 75% |
| 26. Overall, how would you rate the care you are receiving? | 86% | 82% | 90% |
| 27. If you needed treatment again would you choose to come back to this program or service? | 81% | 80% | 88% |

Inpatients

How to read this table

In the event that the experience has increased, the result is shown in green. If the result has decreased, it is shown in blue. If the result is unchanged it is shown in black.

(N) is the number of patients answering the survey.

The % represents the patients that responded to the question in a positive manner.

| Overall Comparison Inpatient Programs | | % Desired Responses | |
|---|--|--|--|
| Questions | | 1 st Annual Survey (N=127) | 2 nd Annual Survey (N=148) |
| Arrival Dimension | | | |
| 4. | When you arrived on the unit, or soon afterwards, did a staff member tell you about the daily routine of the unit such as meal times and visiting hours? | 65% | 71% |
| 5. | When you arrived on the unit, did you have to wait a long time to get to your room? | 86% | 89% |
| Experience on the unit/program | | | |
| The following questions are about your experiences on the unit and around the hospital... How often are the following areas clean? | | | |
| 6. | Your room | 78% | 86% |
| 7. | Your washroom | 80% | 86% |
| 8. | Common areas (hallway, lobby, cafeteria, etc.) | 85% | 89% |
| 9. | Is the area around your room quiet at night? | 61% | 76% |
| 10. | Do you feel safe on your unit? | 77% | 81% |
| 11. | Are you given enough privacy when discussing your issues or treatment with staff? | 66% | 74% |
| 12. | How would you rate the overall quality of the hospital food? | 34% | 48% |
| 13. | If you require a special diet (for health, personal, or religious reasons) do you receive it? | 65% | 75% |
| Participation in care | | | |
| The following questions are about your participation in your care... | | | |
| 14. | Are you involved as much as you want in decisions about your treatment? | 52% | 56% |

| Overall Comparison Inpatient Programs | | % Desired Responses | |
|---|--|--|--|
| Questions | | 1st Annual Survey (N=127) | 2nd Annual Survey (N=148) |
| 15. | Do you understand your care plan? | 53% | 63% |
| 16. | Do staff clearly explain the purpose of medication? | 58% | 61% |
| 17. | Do staff clearly explain possible medication side effects? | 44% | 44% |
| Respect & Recovery | | | |
| The following questions are about respect, recovery and meeting your needs... | | | |
| 18. | Were your individual needs, preferences and values respected in your treatment? | 55% | 57% |
| 19. | Do you feel that you are treated with respect by hospital staff? | 63% | 69% |
| 20. | Do you feel that you have been treated unfairly at this hospital for any of the following reasons? (The positive response - I was not treated unfairly) | 58% | 55% |
| 21. | Do you feel that enough care is taken of any physical health problems you have (for example diabetes, weight gain, heart disease)? | 54% | 64% |
| 22. | Do you feel that staff support your improvement and recovery? | 62% | 71% |
| Client's Rights | | | |
| The following questions are about your rights as a client... | | | |
| 23. | Do you feel that you can refuse treatment (for example medications)? | 59% | 49% |
| 24. | Apart from talking to your nurse, doctor or treatment team do you know how to make a complaint at this hospital? | 61% | 63% |
| 25. | If yes, to whom would you make a complaint? | | |
| Treatment & Rehabilitation | | | |
| The following questions are about the treatment and rehabilitation activities at this hospital... | | | |
| 26. | Are there enough activities (group therapy, organized activities, etc.) for you to do at this hospital during the day on weekdays (Monday to Friday)? | 54% | 63% |
| 27. | Are there enough activities (group therapy, organized activities, etc.) for you to do at this hospital on evenings and weekends? | 39% | 52% |

| Overall Comparison Inpatient Programs | % Desired Responses | |
|---|---------------------------------------|---------------------------------------|
| Questions | 1 st Annual Survey (N=127) | 2 nd Annual Survey (N=148) |
| 28. Are the activities available of interest to you? | 47% | 53% |
| Discharge | | |
| The following questions are about discharge... | | |
| 29. Have staff talked to you about your discharge? | 48% | 38% |
| 30. If yes, have you been involved as much as you want in planning for your discharge? | 56% | 41% |
| Overall Experience | | |
| The following questions are about your overall experiences at this hospital... | | |
| 31. As a result of this hospital stay do you feel better prepared to deal with daily problems? | 51% | 59% |
| 32. As a result of this hospital stay do you feel more ready to accomplish the things you want to do? | 46% | 61% |
| 33. Overall, are you being helped by your hospital stay? | 53% | 65% |
| 34. Overall, how would you rate the care you are receiving? | 56% | 66% |
| 35. If you needed treatment again would you choose to come back to this hospital? | 41% | 43% |

Community

During the First Annual Survey great effort was put forward to ensure that all outpatient programs had the opportunity to survey their clients. Clients were surveyed across the LHIN and coordination was set-up by the programs to increase client awareness and ability to participate.

During the Second Annual Survey only two service locations were surveyed; the Outpatient Services and the programs at the HERO Centre.

Overall Comparison Community Programs

How to read this table

In the event that the experience has increased, the result is shown in green. If the result has decreased, it is shown in blue. If the result is unchanged it is shown in black.

(N) is the number of patients answering the survey.

The % represents the patients that responded to the question in a positive manner.

| Overall Comparison Community Programs Questions | % Desired Responses | |
|--|---|---|
| | 1 st Annual Survey Outpatients (N=267) | 2 nd Annual Survey Outpatients (N=135) |
| Accessing Services and Staff | | |
| The first few questions are about accessing services and staff... | | |
| 3. After you were referred, did you have to wait a long time for service to start? (The positive response is "NOT AT ALL or SOMEWHAT") | 90% | 92% |
| 4. Do staff return your phone calls within a reasonable amount of time? (The positive response is "USUALLY and ALWAYS -never called removed from count) | 80% | 91% |
| 5. Are you kept waiting a long time when you have appointments? (The positive response is "NEVER and SOMETIMES") | 92% | 93% |
| Experience on the program/service | | |
| The following questions are about your experiences around the program or service... | | |
| How often are the following areas clean? | | |
| 6. Areas where you receive services or meet with staff: | 89% | 95% |
| 7. Common areas (hallway, lobby, cafeteria, etc. | 89% | 92% |
| 8. Do you feel safe when you are at this program or service? | 86% | 98% |
| 9. Are you given enough privacy when discussing your issues or treatment with staff? | 83% | 92% |
| Participation in care | | |
| The following questions are about your participation in your care... | | |
| 10. Are you involved as much as you want in decisions about your treatment? | 76% | 82% |
| 11. Do you understand your care plan? | 77% | 87% |
| 12. Do staff clearly explain the purpose of medication? | 80% | 78% |

| Overall Comparison Community Programs Questions | % Desired Responses | |
|--|---|---|
| | 1 st Annual Survey Outpatients (N=267) | 2 nd Annual Survey Outpatients (N=135) |
| 13. Do staff clearly explain possible medication side effects? | 57% | 63% |
| Respect & Recovery | | |
| The following question is about respect, recovery and meeting your needs... | | |
| 14. Were your individual needs, preferences and values respected in your treatment? | 79% | 91% |
| 15. Do you feel that you are treated with respect by hospital staff? | 82% | 90% |
| 16. Do you feel that you have been treated unfairly at this hospital for any of the following reasons? (I was not treated unfairly – positive response) | 70% | 85% |
| 17. Do you feel that enough care is taken of any physical health problems you have (for example diabetes, weight gain, heart disease)? | 76% | 77% |
| 18. Do you feel that staff support your improvement and recovery? | 85% | 87% |
| 19. Do staff tell you about other services and supports available in the community? | 71% | 70% |
| Client's Rights | | |
| The following questions are about your rights as a client... | | |
| 20. Do you feel that you can refuse treatment (for example medications)? | 55% | 73% |
| 21. Apart from talking to your nurse, doctor or treatment team do you know how to make a complaint at this hospital? | 57% | 42% |
| 22. If yes, to whom would you make a complaint? | | |
| Overall Experience | | |
| The following questions are about your overall experiences at this hospital... | | |
| 23. As a result of your care with this program or service do you feel better prepared to deal with daily problems? | 74% | 69% |
| 24. As a result of your care with this program or service do you feel more ready to accomplish the things you want to do? | 65% | 62% |
| 25. Overall, are you being helped by your care with this program or service? | 81% | 75% |
| 26. Overall, how would you rate the services you are receiving? | 82% | 90% |

| Overall Comparison Community Programs | % Desired Responses | |
|---|---|---|
| | 1 st Annual Survey Outpatients (N=267) | 2 nd Annual Survey Outpatients (N=135) |
| 27. If you needed treatment again would you choose to come back to this program or service? | 80% | 88% |

Inpatient Data Broken Down by Strengths Comparison

| Inpatient Top Five Areas of Strength | % Desired Responses | |
|--|--------------------------------------|-------------------------------------|
| | 1st Annual Survey Fall 2012 (N= 127) | 2nd Annual Survey Fall 2013 (N=148) |
| 5. When you arrived on the unit, did you have to wait a long time to get to your room? | 86% | 89% |
| 6, 7 and 8 Cleanliness of hospital common areas (hallways, lobby, cafeteria, etc.) | 81% | 87% |
| 10. Do you feel safe? | 77% | 81% |
| 9. Is the area around your room quiet at night? | 61% | 76% |
| 11. Are you given enough privacy when discussing your issues or treatment with staff? | 66% | 74% |

Inpatient Data Broken Down By Areas of Improvements Comparison

| Inpatient Top Five Areas of Improvement | % Desired Responses | |
|---|--------------------------------------|-------------------------------------|
| | 1st Annual Survey Fall 2012 (N= 127) | 2nd Annual Survey Fall 2013 (N=148) |
| 29. Have staff talked to you about your discharge? | 48% | 38% |
| 4. If yes, have you been involved as much as you want in planning your discharge? | 56% | 41% |
| 4. If you needed treatment again would you choose to come back to this hospital? | 41% | 43% |

| Inpatient Top Five Areas of Improvement | % Desired Responses | |
|--|--------------------------------------|-------------------------------------|
| Questions | 1st Annual Survey Fall 2012 (N= 127) | 2nd Annual Survey Fall 2013 (N=148) |
| 17. Do staff clearly explain possible medication side effects? | 44% | 44% |
| 12. How would you rate the overall quality of the hospital food? | 34% | 47% |

Community Data Broken Down By Strengths Comparison

| Community Top Five Areas of Strength | % Desired Responses | |
|---|--------------------------------------|--------------------------------------|
| | 1st Annual Survey Fall 2012 (N= 267) | 2nd Annual Survey Fall 2013 (N= 135) |
| Questions | | |
| 8. Do you feel safe on your unit? | 86% | 98% |
| 6. & 7. Cleanliness of hospital common areas (hallways, lobby, cafeteria, etc.) | 89% | 94% |
| 5. Are you kept waiting a long time when you have appointments? (The positive response was "NEVER or SOMETIMES") | 92% | 93% |
| 9. Are you given enough privacy when discussing your issues or treatment with staff? | 83% | 92% |
| 1. After you were referred, did you have to wait a long time for service to start? (The positive response was "SOMEWHAT or NOT AT ALL") | 90% | 92% |

Community Data Broken Down By Areas of Improvements Comparison

| Top Five Areas for Improvement | % Desired Responses | |
|---|--------------------------------------|--------------------------------------|
| | 1st Annual Survey Fall 2012 (N= 267) | 2nd Annual Survey Fall 2013 (N= 135) |
| Questions | | |
| 21. Apart from talking to your nurse, doctor or treatment team do you know how to make a complaint at this hospital? | 57% | 42% |
| 24. As a result of your care with this program or service do you feel more ready to accomplish the things you want to do? | 65% | 62% |
| 13. Do staff clearly explain possible medication side effects? | 57% | 63% |

| Top Five Areas for Improvement | % Desired Responses | |
|--|--------------------------------------|--------------------------------------|
| | 1st Annual Survey Fall 2012 (N= 267) | 2nd Annual Survey Fall 2013 (N= 135) |
| Questions | | |
| 23. As a result of your care with this program or service do you feel better prepared to deal with daily problems? | 74% | 69% |
| 19. Do staff tell you about other services and supports available in the community? | 71% | 70% |

Next Survey

Waypoint will be conducting its next inpatient and community Client Experience Surveys September/October 2014.

Contact Information

If you have questions or comments about this report; please direct any of the above to Communications and Fund Development. Inquiries will be responded to during business hours, 8 a.m. to 4:30 p.m. Monday to Friday. 705 549-3181, ext. 2073 or info@waypointcentre.ca.