

An Evaluation of a Near Real-Time Survey for Improving Patients' Experiences of the Relational Aspects of Care

Mr Chris Graham <sup>1</sup>

Dr Susanne Käsbauer <sup>2</sup>

Ms Robyn Cooper <sup>3</sup>

Ms Jenny King <sup>4</sup>

Dr Steve Sizmur <sup>5</sup>

Prof Crispin Jenkinson <sup>6</sup>

Dr Laura Kelly <sup>7</sup>

<sup>1-5</sup> Picker, Oxford, UK

<sup>6,7</sup> Nuffield Department of Population Health, University of Oxford, Oxford, UK

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## **Scientific Summary**

### **Background**

The Francis Report (2013) outlined several guidelines for NHS organisations, including the need to improve relational care and a more wide-spread use of real-time feedback (RTF) to collect patient experience data. This research directly addressed these areas and aimed to provide evidence-based recommendations to support NHS quality improvements.

### **Objectives**

This research looked to evaluate the effectiveness of real-time data collection for driving improvement in patients' experiences of relational aspects of care in NHS acute hospitals.

Aims of this research were to:

1. Explore and understand the processes and impacts of near real-time feedback (NRTF) data collections in the NHS, as reflected in patient experience data, and as understood by NHS frontline staff, service leads and managers.
2. To identify the key drivers and determinants of 'success'.
3. To develop and disseminate evidence-based recommendations to support the implementation of NRTF data collection on patient experience in the NHS.

### **Methods**

A developmental research design was used combining quantitative, qualitative and participatory research approaches.

In the first phase we developed, via factor analysis of national patient experience survey data, composite indicators that were used to measure Trusts' performance on the relational aspects of care. With this, six case-study Trusts that differed in terms of their patient experience survey results (relational care) and other key characteristics were recruited to participate in the research. As part of recruitment, the project registered on the Clinical Research Network portfolio under the primary trial ID number 18449. A real-time survey tool was also developed through a review of existing instruments, patient focus groups and

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interviews, and factor analysis carried out to identify the best performing existing survey items measuring relational aspects of care.

In the second phase, participatory research was undertaken with staff in the six case-study Trusts to understand and inform the implementation of real-time data collection. This was achieved by:

1. Conducting semi-structured interviews with frontline, senior and administrative staff.
2. Implementing a RTF survey which focussed on the relational aspects of care for elderly and A&E patients. The survey was administered by trained volunteers at the point of care over a ten month period.
3. Running an online staff survey before and after the introduction of the real-time data collection.
4. Delivering two participatory workshops for front-line staff, service leads and managers at each case-study Trust. The first workshop was held after three months of data collection with the overall objective to identify 'what needs to change, and how' for real-time data to drive improvements. The second workshop was held at the end of data collection, to evaluate the processes and impacts of implementing real-time data collection. This included identifying why patients' experiences improved or did not improve over the course of the data collection period.
5. Conducting 'evaluation' interviews with staff and volunteers to assess both the impact of the survey on staff behaviours/organisational change and the process of using volunteers to administer the survey.

## **Results**

Using existing and newly developed questions which measure relational aspects of care across 22 themes, a survey tool was developed specifically for use with a near real-time

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approach. This survey instrument comprised of 20 closed-ended, one open-ended, and seven demographic questions.

Over a ten month data collection period, 3928 responses to the survey were received across 6 case study sites. Analyses of responses identified a small but statistically significant improvement in overall patient experiences of relational care.

Data collected from staff and volunteers highlighted several factors which influenced the use of near real-time feedback (NRTF) to improve relational care within the Trusts. Specifically, the reporting format, free text comments, buy-in from senior staff, volunteer engagement, and initial start-up challenges were seen to be key factors which influenced the collection and use of NRTF to improve patient experiences of relational care.

Based on the barriers and facilitators which influenced the collection and use of data on relational aspects of care, practice recommendations were developed to assist other Trusts in implementing a similar approach to improvements. These focused on planning for survey implementation, working with volunteers, reporting findings to staff on a regular basis and evaluating the success of the NRTF approach.

Practice recommendations were shared alongside the survey instrument and case studies as part of a toolkit to assist NHS Trusts in improving compassionate care using the NRTF approach.

## **Conclusions**

This research provides evidence on how patient experience feedback can be collected in NRTF and used to improve the relational aspects of care. It offers insight on how to improve performance on key patient experience indicators, and communicate improvements to key stakeholders. The research also identifies what the necessary conditions are for the successful implementation of a NRTF approach for improving patients' experiences of compassionate care.

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