## Client and Caregiver Experience Evaluation

## 2019-20 Annual Results

For External Stakeholders



Local Health Integration Network









**Survey** 

#### Time Frame

#### **Target Respondents**

Telephone phone survey administered by a third party on behalf of the LHIN

Each survey lasts on average 14-15 minutes

Asks about in home care services, care coordination, overall experience, and clinic and LTC placement experience. Survey calls are made each quarter to patients who received service in the previous quarter (both active and discharged patients)

(e.g. patient received service in Q1, would be called first month of Q2) Patients (and caregivers) who received in home, clinic or LTC placement service from Home and Community Care. Surveys Completed (NSM overall)

## 1625



KPI 1 – Overall Experience
KPI 2 – Client Centered Care
KPI 3 – Client Centered Care Appts.
KPI 4 – Quality of Care
KPI 5 – Building Relationships and Trust

KPI 6 – Linking to Other Services KPI 7 – Willingness to Recommend KPI 8 – Expectations of Quality KPI 9 – Safety

## Overall NSM Overall Summary 2019-20

NSM overall scores have **increased on 8 of 9 Key Performance Indicators (KPIs)** over previous year; majority of scores over 90%

• Largest increase for KPI 8 – Expectations of Quality (3.7%)

**KPI 1- Overall Experience** has shown an **upward trend** over the last 3 years with highest score since 2014/15; higher than the provincial average on two of the 3 KPI questions

**KPI 2 – Client Centred Care** has continued to see **year over year improvement** from 2017/18 to present; focus of quality improvement initiative – Coordinated Care Plan



**KPI 6 – Linking to Other Services** was identified as a top area for focus in 2018/19; NSM has continued to sustain the improvements made last year on this KPI

Personal Support was higher than provincial PS average on all KPIs and improved on all over previous year Nursing was higher than provincial NUR average on all KPIs and improved on 7 of 9

#### **Key Performance Indicators NSM Overall - Year over Year Comparison** Improvement on 8 out of 9 measures 2019-20 2018-19 ■ 2017-18 93.5 Highest score (1)<sup>1</sup> **KPI 1 - Overall Experience** 91.9 K since 2014/15 91.6 89.9 **KPI 2 - Client Centered Care** 88.4 87.0 91.3 **KPI 3 - Client Centered Care f** 90.4 **Appointments** 91.0 92.8 KPI 4 - Quality of Care 93.4 93.9 95.4 KPI 5 - Building Relationships & Trust **F** 93.1 92.5 82.3 KPI 6 - Linked to Other Services 80.9 76.7 96.7 KPI 7 - Willingness to Recommend 96.2 60.6 Greatest **KPI 8 - Expectations of Quality** 56.9 Improvement 57.1 91.0 KPI 9 - Safety 90.9

91.9

\*\*Data for 2019-20 is unweighted; Comparisons should be made with caution



## KPI 1 – Overall Experience KPI 2 – Client Centered Care KPI 3 – Client Centered Care Appts. KPI 4 – Quality of Care KPI 5 – Building Relationships and Trust

#### KPI 6 – Linking to Other Services KPI 7 – Willingness to Recommend KPI 8 – Expectations of Quality KPI 9 – Safety

## 2019/20 Q1-Q3 CCEE Summary By Service Type

Nursing • Improved

- Improved on 7 of 9 KPIs; scoring above provincial average for 8 of 9 KPIs and 0.2% below province on KPI 4
   Largest increase (+2.2%) for KPI 5
- Only minor decreases on KPIs 2 (-0.5%) and 4 (-0.8%)



#### Personal Support

- Improved on all KPIs compared to 2018/19
- Largest improvement (+6.8%) for KPI 6
- Scored above provincial PS average for 9 out of 9 KPIs



#### All Therapies (OT, PT, SW, NUT)

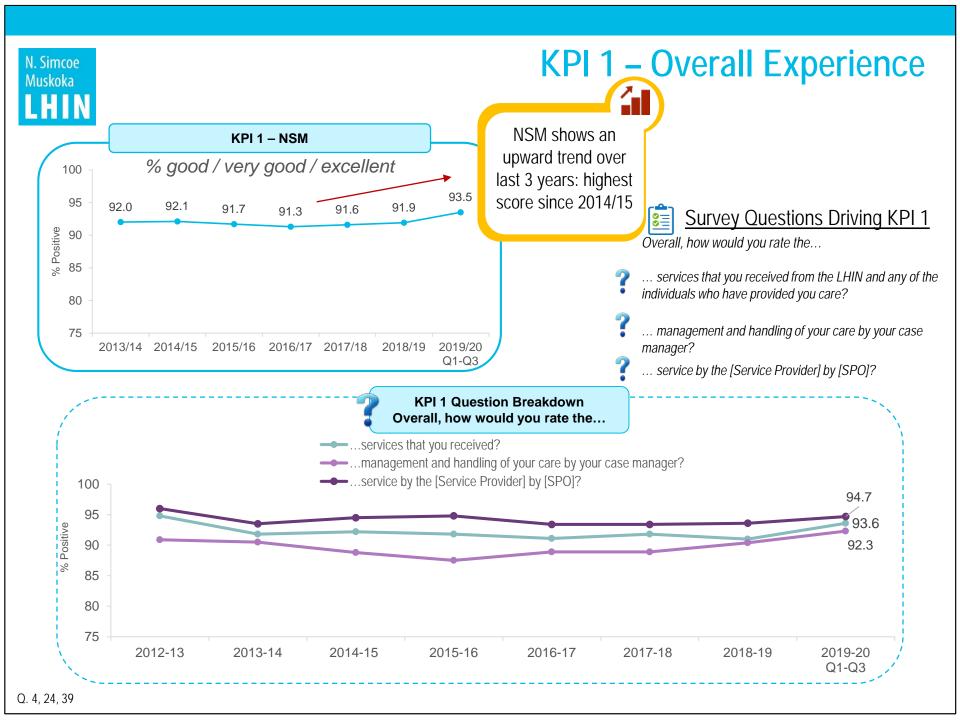
- Compared to province therapies were the same (1) or above (7) on 8 out of 9 KPIs
- Highest scoring KPI's were 3 (94.6%) and 7 (97.0%)

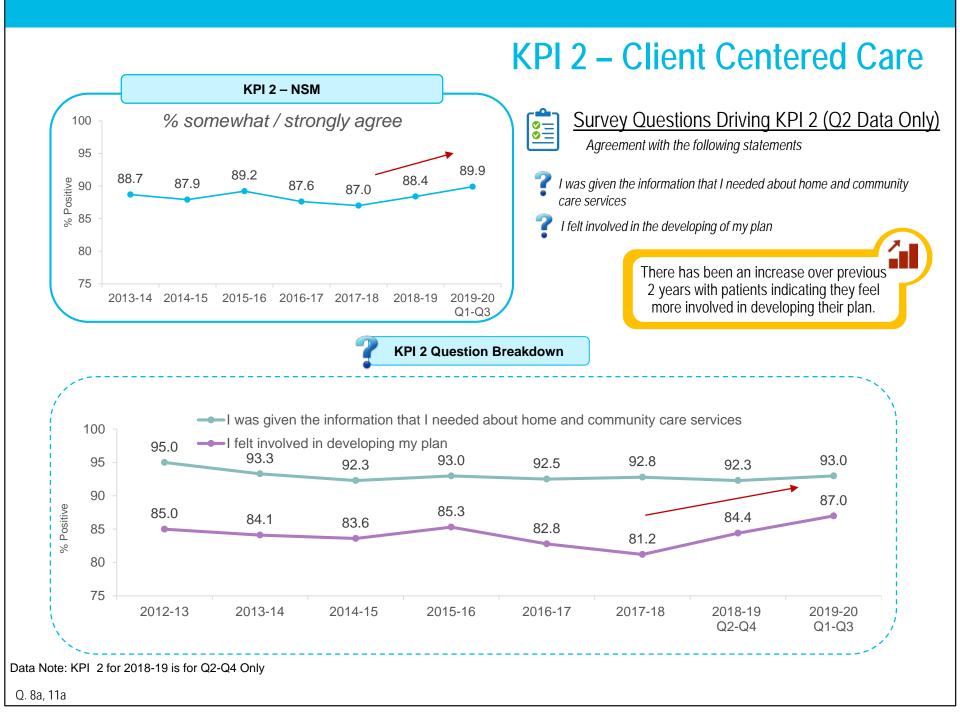


#### Speech-Language Pathology

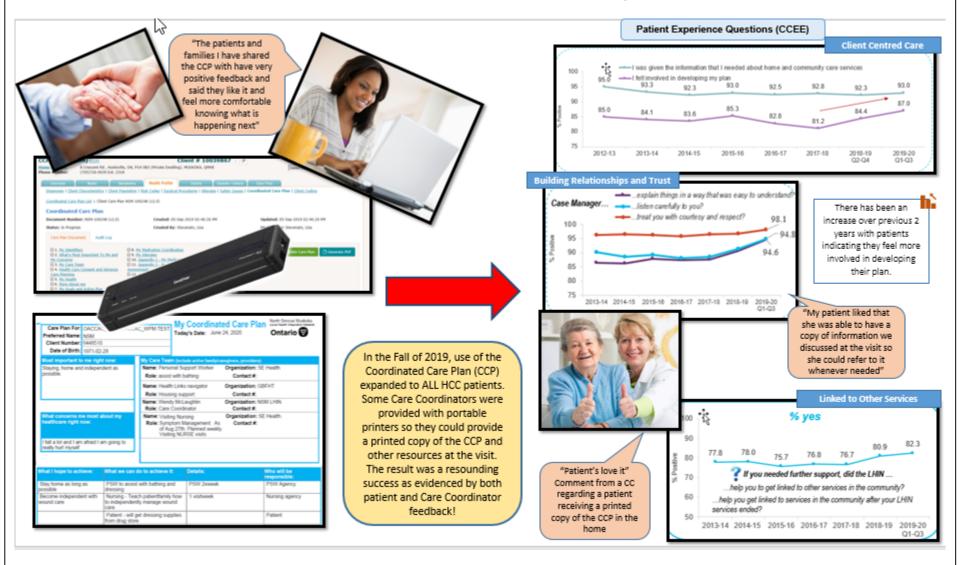
- Improved on 4 KPIs and scoring above provincial average on 4
- Largest improvement for KPI 8 (+10.2%)
- KPI 9 has been trending downwards since 2016/17

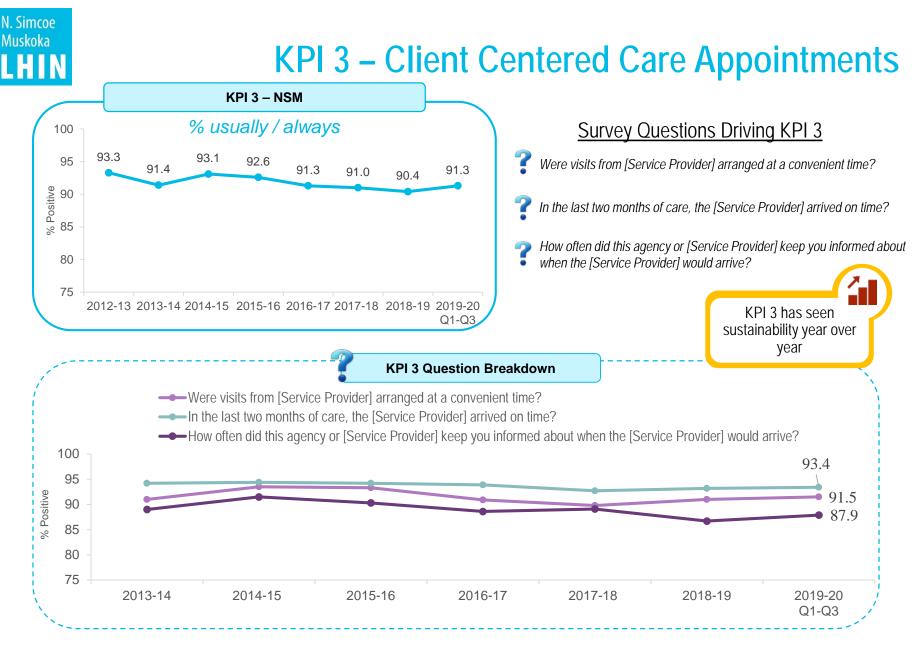
\*No annual report provided so information for services was pulled from SPO reports and was limited \*Only SLP was broken out for therapy due to single provider





### Quality Improvement Initiative Coordinated Care Plan (CCP) Implementation

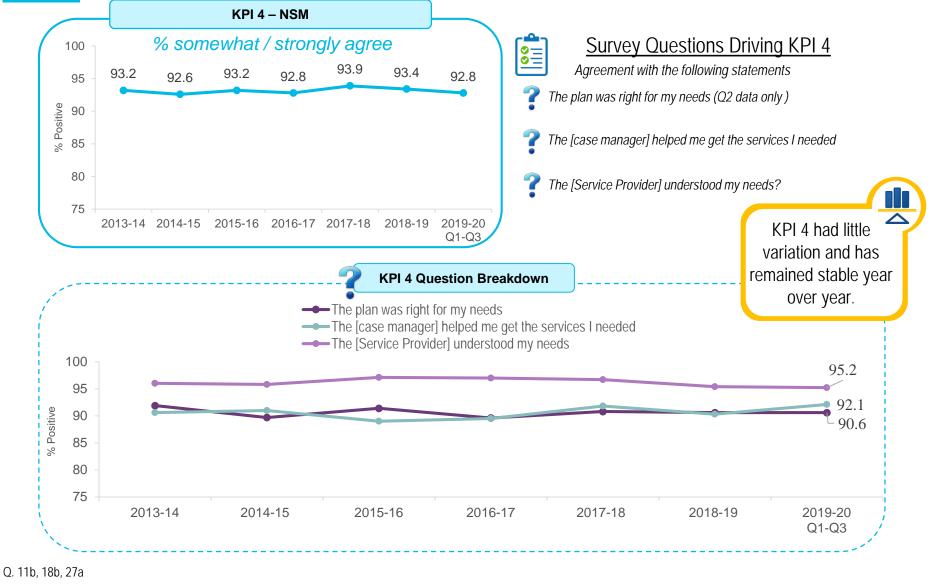


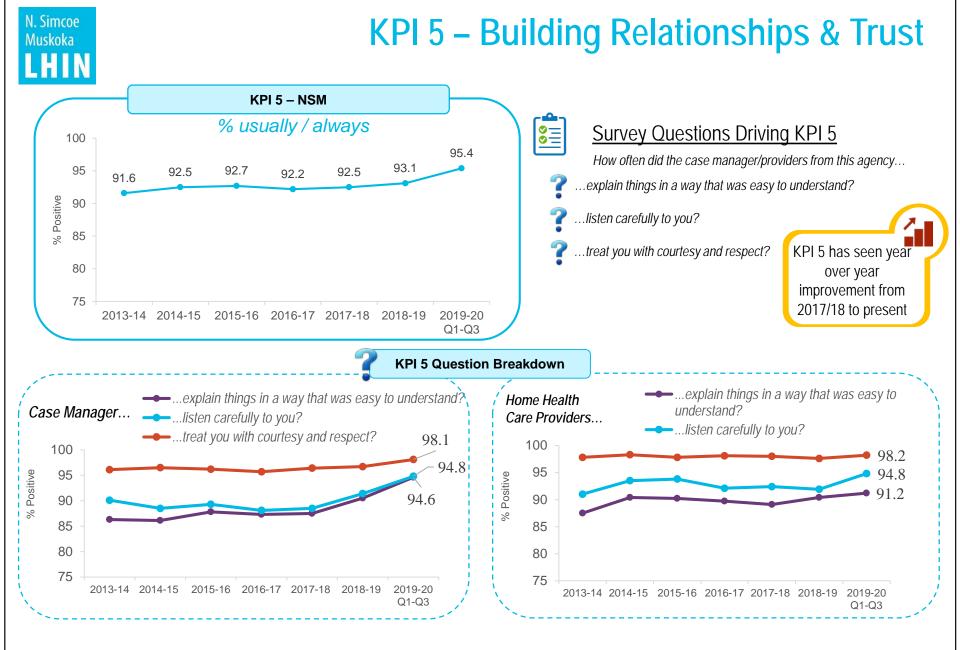


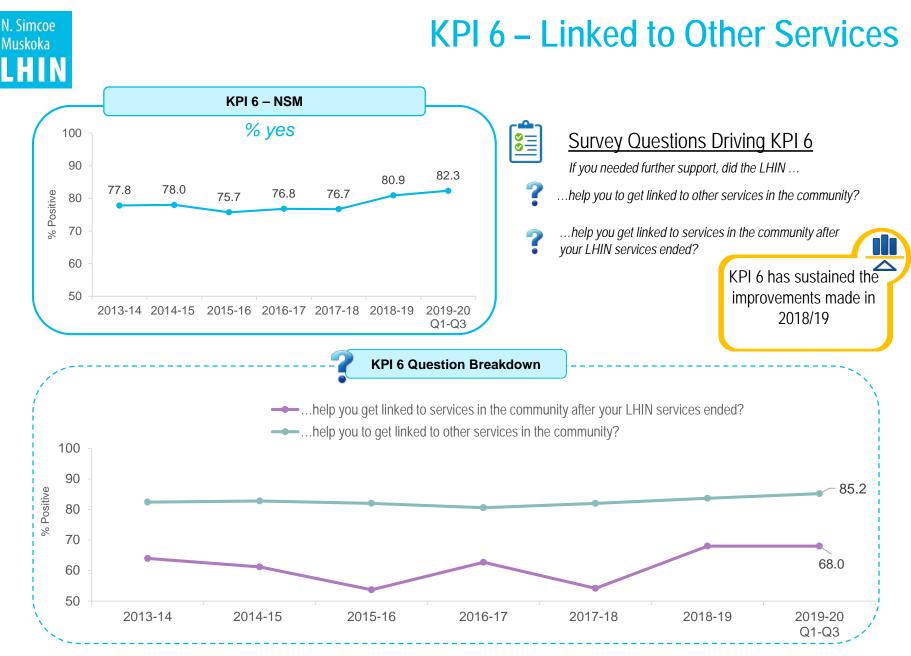
Q. 32b, 32c, 34



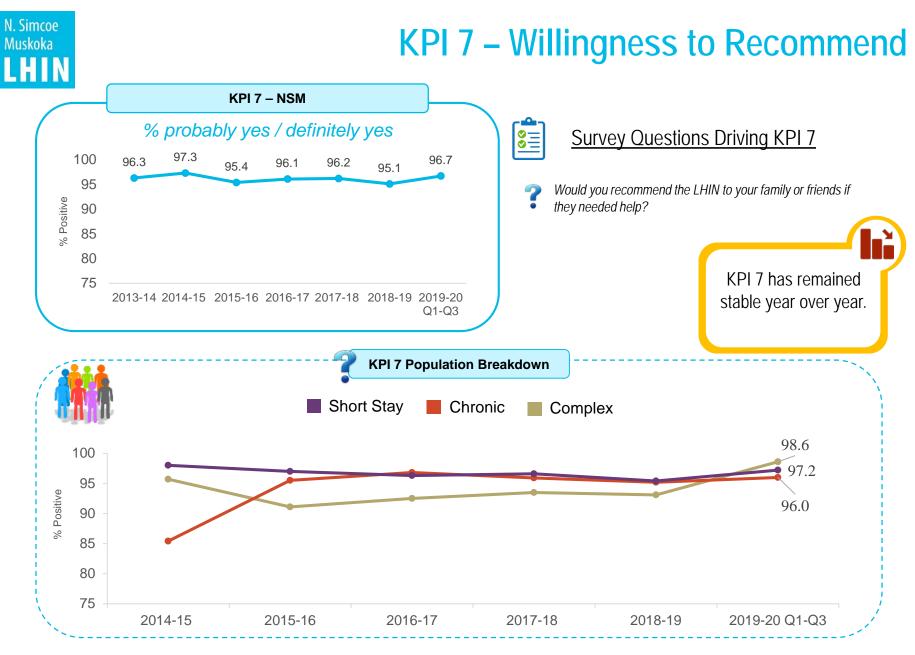
## KPI 4 – Quality of Care

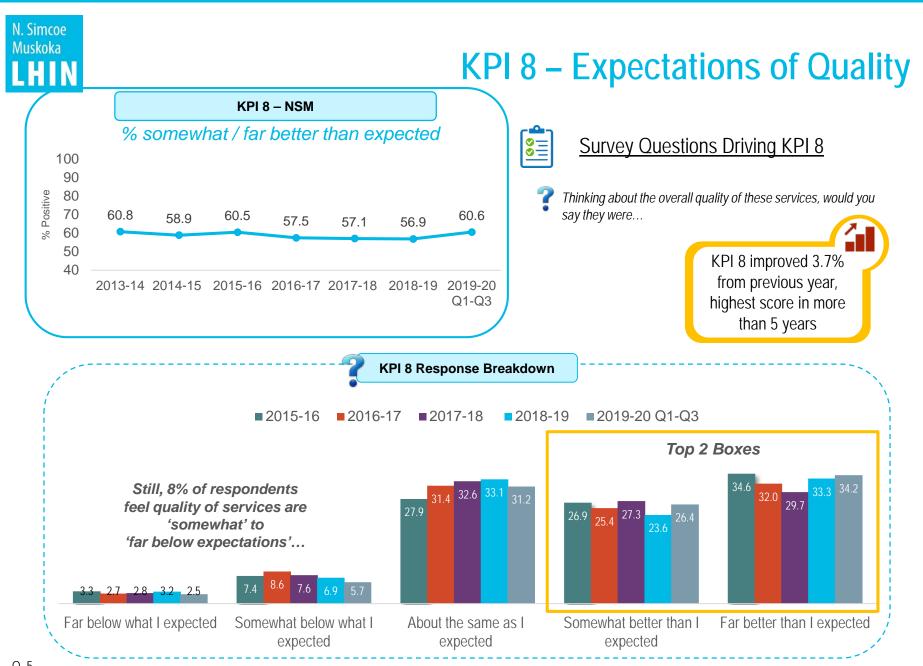


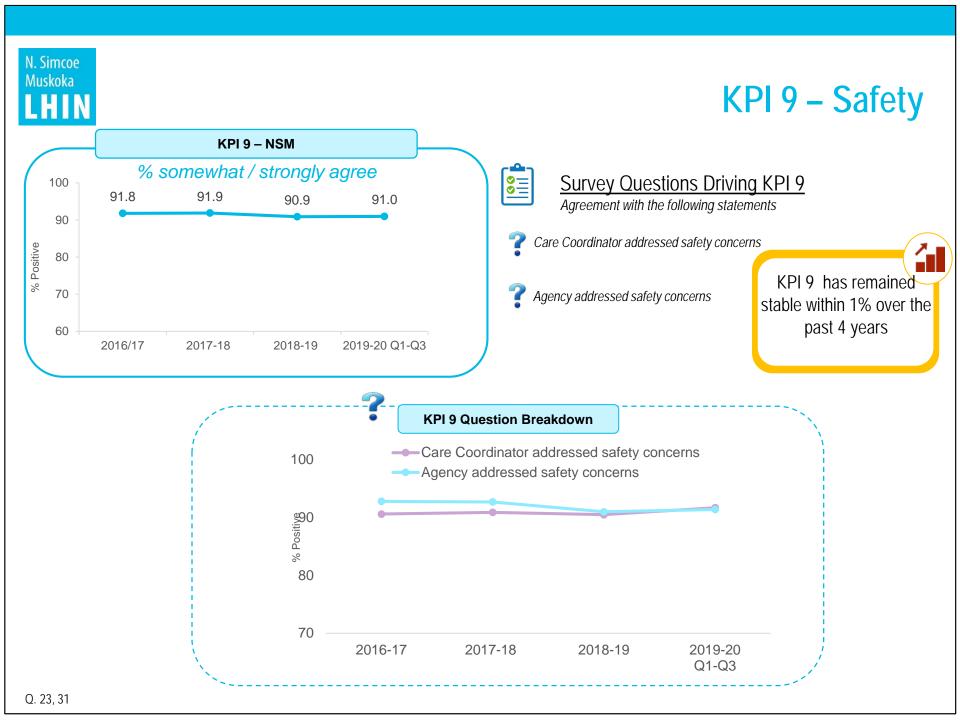




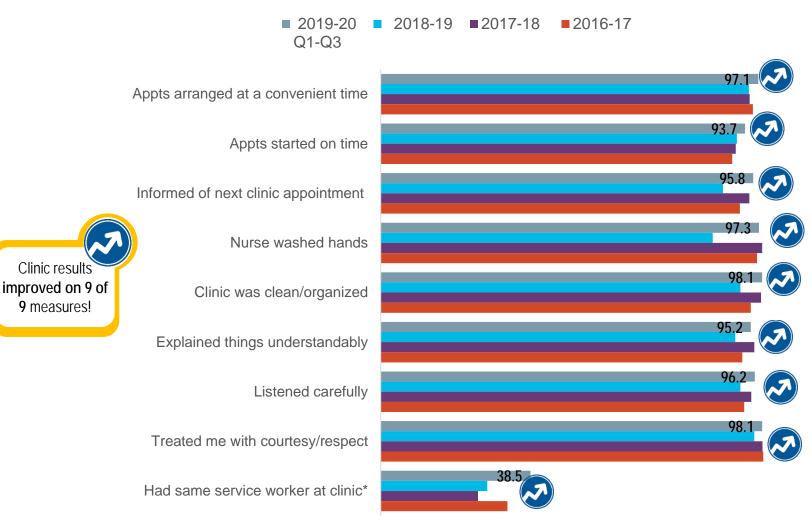
#### Q. 41, 18c



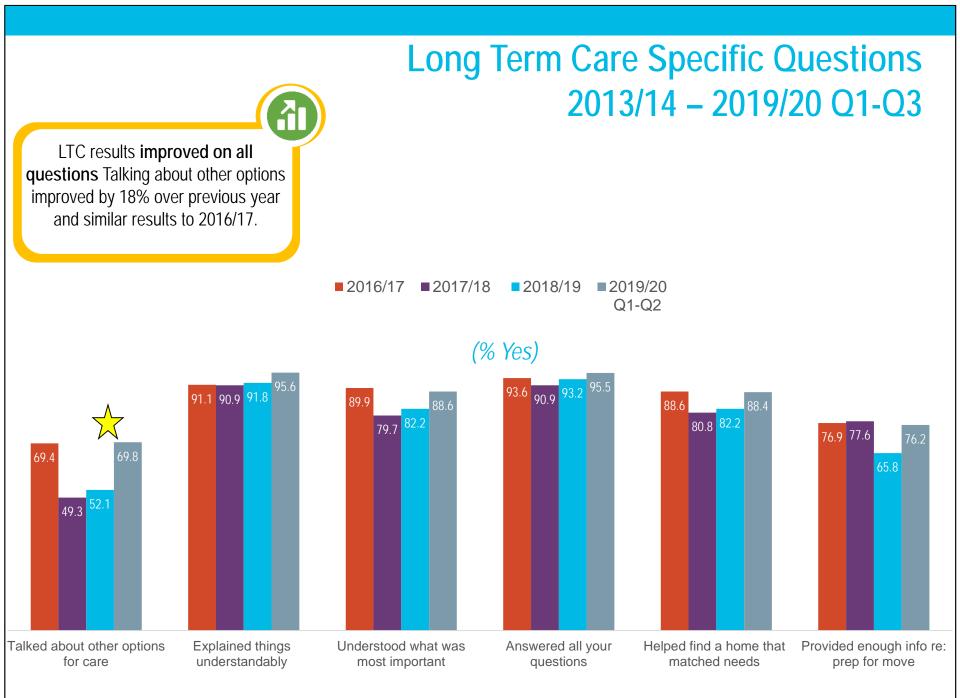




## Nursing Clinic Specific Questions 2016/17 –2019/20 Q1-Q3



\*Percentage "Always had the same service worker"



# Appendices

## **Survey Inclusion Criteria**

- Patient consent to participate in the survey
- All unique active or discharged patients receiving in-home services (within specified • time period) for one of the following contracted services: Nursing, Personal Support, Occupational Therapy, Physiotherapy, Speech Therapy, Social Work, Nutrition/Dietetics.
- Nursing Clinic Services (applicable only for LHINs participating in Clinic survey).
- Discharged patients to placement in one of the following categories within specified time period:
  - Admission final
  - Withdrawn, interim became final
  - Withdrawn, placement by other LHIN
  - Refused bed

## **Survey Exclusion Criteria**

- Patients who did not want to participate in any survey conducted
- Patients that received in-school service only. If the patient received both inhome and in-school service, include the in-home portion of the patient's service
- Nursing Clinic Services (applicable only for LHINs <u>not</u> participating in Clinic survey)
- Respite Services
- Medical Supplies and Equipment
- End of life patients (SRC 95)
- Patients not yet categorized (SRC 99)
- In-home patients classified as out of region
- Convalescent care patients
- Patients who had participated in the survey within the last year.

## Key Performance Indicators - % Positive Scores

- KPI 1 Overall Experience (Good, Very Good, Excellent)
- KPI 2 Client Centered Care (Somewhat Agree, Strongly Agree)
- KPI 3 Client Centered Care Appointments (Usually, Always)
- KPI 4 Quality of Care (Somewhat Agree, Strongly Agree)
- KPI 5 Building Relationships and Trust (Usually, Always)
- KPI 6 Linking to Other Services (Yes)
- KPI 7 Willingness to Recommend (Probably Yes, Definitely Yes)
- KPI 8 Expectations of Quality (Somewhat / Far Better than Expected)
- KPI 9 Safety (Somewhat Agree, Strongly Agree)

## If you have any questions regarding this information, please contact Valerie.armstrong@lhins.on.ca