

STROKE NETWORK of Southeastern Ontario

Evaluating Patient Experience In A Community Stroke Rehabilitation Program: Development Of A Tool And Evaluation Plan

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Background

Since 2009, the Community Stroke Rehabilitation Program has provided timely, enhanced home-based rehabilitation services to stroke survivors in Southeastern Ontario. Eligible candidates received enhanced Occupational Therapy (OT), Physiotherapy (PT), Speech and Language Pathology (SLP), and Social Work (SW) through Local Health Integrated Network funded services. To date, program evaluation has focused on utilization and process indicators such as: referral source, time from hospital discharge to first visit, number of visits, and number of patients served. While the input of patients and caregivers has been sought at specific times over the history of the CSRP, current program evaluation does not include a method of consistently monitoring patient or family experience. The Stroke Network of Southeastern Ontario (SESEO) has recognized this gap and prioritized this as a an area of requiring attention.

Purpose: To develop an evidence-based, and stakeholder-informed strategy for evaluating the experiences of patients receiving service through the Community Stroke Rehabilitation Program (CSRP) of Southeastern Ontario.

METHODS

A **literature review** and **environmental scan** were conducted to identify:

- 1. Essential elements of an effective community rehabilitation program from a patient perspective
- 2. Existing patient experience questionnaires/tools described in the literature and/or used in other jurisdictions for community-based rehabilitation;
- 3. Best practices for survey/questionnaire implementation.

Results were summarized into themes and used to evaluate content of existing tools.

Findings were presented to an advisory group of stroke survivors, caregivers and service providers and their input was obtained.

RESULTS

Findings of Literature Review and Environmental Scan Evaluation of programs ensure the best practice of care.

The majority of studies utilized face-to-face qualitative interviews to identify patient experiences

Online or paper surveys have both been shown to have successful response rates with varying populations.

There is no consistent tool or measure used across community rehabilitation programs in Ontario.

Review of Existing Tools

No one tool was found to contain all recommended patientexperience elements, as identified in the literature review.

The WatLx¹ was identified as a patient experience-focused tool that has been validated and implemented in outpatient rehabilitation settings including those servicing stroke survivors. A new home-care version of the WatLx was shared by the developers for consideration for use by the CSRP. Content gaps were identified in the WatLx and other tools and additional questions were recommended.

1. McMurray, J.et al. WatLX© Outpatient Rehabilitative Care Patient Experience Survey. Retrieved September 04, 2018.

RESULTS

Recommended elements of a comprehensive patient experience evaluation tool and proposed additions to existing tool(s)

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	Essential elements (patient's perspective)	Description	Proposed addition to existing tools
1	Broadening knowledge regarding diagnosis	Patient's understanding of their diagnosis and prognosis following CSRP	I feel I have a good understanding of my diagnosis, my abilities post-stroke, and my treatment plan
2	Ability to perform ADLs	How well the patient can perform baseline activities of daily living following CSRP	My rehab helped me to perform my usual day- to-day activities independently
3	Transition from hospital to home	Patient was given the resources necessary to transition smoothly (e.g. home adaptations, aids)	I felt my transition from hospital to home-based rehab went smoothly
4	Speed of service delivery	Services delivered at the convenience of the patient	I felt my discharge from hospital occurred at an appropriate time
5	Access to further rehab within the community	Patient given the opportunity to continue with community rehab to work towards their longterm goals	None
6	Patients acting as active participants in their rehab	Patient having autonomy and actively making decisions	I felt I was involved in setting goals for my treatment
7	Patients self-rating their recovery	How effective the patient believes the program is based on their recovery	None
8	Patients feeling adequately prepared for discharge	How well the patient received information regarding community resources, HCPs contact information, and treatment guidelines	I felt I was given all the necessary information to prepare for my discharge

CONCLUSIONS

This partnership between students, researchers, knowledge brokers (Stroke Network of Southeastern Ontario), clinicians, stroke survivors and caregivers has produced a practical, evidence-informed program evaluation strategy. The various perspectives that were incorporated into the critiquing of patient experience tools allowed missing elements in those tools to be highlighted. Next Steps: A tool incorporating the 8 elements of patient experience and recommendations received from the advisory committee will be tested for implementation, feasibility. It is anticipated that a final version of this tool will be incorporated into the ongoing patient CSRP evaluation.