

**Bay St. George Long Term Care  
Resident Experience Survey Results  
2015-2016**



**Western  
Health**

**Prepared by:  
Mariel Parcon  
Regional Manager Research and Evaluation  
Information and Quality Branch**

# **Bay St. George Long Term Care Resident Experience**

## **Background**

### **Survey Instrument**

The validated Consumer Assessment of Healthcare Providers and Systems (CAHPS) Nursing Home Survey: Resident Instrument (Appendix A) developed by Alberta Health Services in Canada was administered to long term care residents throughout the Western region. This instrument was piloted throughout rural facilities within Western Health in 2010. In keeping with the results of the pilot, this instrument was modified in 2013 and was used to assess long term care resident experience. In 2015/16, this same modified survey was used to evaluate resident experiences and administered electronically through Google Forms.

### **Method**

The long term care resident experience surveys were administered face to face with those residents who were deemed competent by a nurse to complete the survey. Survey administrators were different at each site; volunteers administered surveys at some sites, while students or nurses on ease-back administered surveys at other sites. For the Bay St. George Long Term Care Centre, the survey was administered by students.

### **Participants**

A list of long term care residents was compiled for each long term care facility throughout Western Health. The list indicated which residents were able to complete the survey and was provided to those responsible for administering the survey.

## **Sample**

Surveys were administered to all residents who were cognitive, not hard of hearing, and willing to participate for a total of 88 participants regionally. For the Bay St. George Long Term Care Centre specifically, there were 11 residents who completed the survey.

## **Privacy, Confidentiality, Data Security**

Privacy and confidentiality were achieved as the residents names were not reported on the surveys. Any information that could potentially identify the residents was deleted. The data was stored on a password protected computer in the Western Memorial Health Clinic used by Information and Quality staff.

## **Data Analysis**

Survey data was entered directly into Google Docs then transferred to an SPSS data file. Descriptive statistics were calculated on regional data to obtain a general perspective of residents' experiences with long term care services at Western Health. Statistics were also calculated for each site where the sample was sufficient to assist in quality improvement initiatives and planning at a site level. The following report provides survey results for Bay St. George Long Term Care Centre.

## **Results**

### **Demographics**

A total of 11 participants completed the survey. To gain a more thorough understanding of the demographics of the long term care residents, respondents were asked for their year of birth, gender, race or ethnicity, and whether they had difficulty with the English language. The average age of the participants was 73, and the median age was 77 (ranged from 55 years of age to 89 years of age). Sixty three point six percent of the respondents were female and 36.4% were male. All of the respondents reported being white/Caucasian and all participants reported not having difficulty with the English language.

Respondents were also asked about highest level of school completed, whether they had a roommate, and personal health rating. Ninety point nine percent of respondents reported that they had grade school or some high school, and 9.1% reported they had some university or college completed. Forty five point five percent of respondents reported that they had a roommate, and 45.5% reported that they did not have a roommate.

Respondents were asked to indicate how they would rate their overall health and 18.2 reported excellent, 18.2 reported very good, 18.2 reported good, 9.1 reported fair, and 36.4 reported poor.

### **Meals**

Residents were asked to rate food quality and mealtime enjoyment on a scale of 0-10 (with 10 being the best possible). On average, respondents rated food quality at 6.10 (range 1-10, standard deviation 2.601). Eighty one point eight percent reported that they ate in the dining room and when asked how they would rate their mealtime enjoyment in the dining room, the average rating was 7.0 (range 2-10, standard deviation 3.041).

## **Environment**

Respondents were asked to rate the home in relation to temperature and cleanliness. On average, respondents rated the temperature at 6.36 (range 1-10, standard deviation of 3.501), and respondents rated cleanliness at 7.64 (range 1-10, standard deviation 2.908). Respondents were also asked to indicate how safe and secure they felt in the home, and on average respondents reported 7.55 (range of 0-10, standard deviation of 3.804).

Respondents were asked to indicate whether the area around their room was quiet at night and 72.7% reported yes, 9.1% reported no, and 18.2% reported sometimes. The majority of respondents reported that they were not bothered by noise during the day (81.8%), 9.1% reported that they were, and 9.1% reported sometimes. Privacy is also an important component of environment. When respondents were asked if they could find a place to visit in private if they had a visitor, 72.7% reported yes, and 27.3% reported no.

## **Medication**

Seventy two point seven percent of respondents indicated that they took medication to help with aches or pain. On a scale of 1-10, respondents rated the medicine at 6.88 (range 2-10, standard deviation 2.850) in how well it worked to help with aches or pain. On average, respondents rated how well staff helped them when they had pain at 7.63 (range 1-10, standard deviation 3.068).

## **Resident Care**

Several rating questions were asked about nursing care in relation to gentleness, respect, listening, explaining things in a way the residents could understand, and overall care (see Table 1). Residents rated the listening and respectfulness of staff highly.

**Table 1. Resident Care**

<b>Aspect</b>	<b>Mean</b>	<b>Range</b>	<b>SD</b>
<b>Gentleness of Staff</b>	8.80	5-10	1.687
<b>Respectfulness of Staff</b>	9.55	7-10	0.934
<b>Staff Listen</b>	9.18	7-10	1.079
<b>Staff explanation &amp; ease of understanding</b>	7.00	0-10	3.688
<b>Rating of Staff Care</b>	8.45	5-10	1.968

Respondents were also asked to indicate if the staff made sure they had enough personal privacy when they dressed, showered, or bathed and 81.8% reported yes, and 18.2% did not report. Those individuals who did not report were those who did not need help with dressing, showering or bathing. Forty five point five percent of respondents reported that they received the help they needed from staff to stay clean, 9.1% reported sometimes, and 45.5% did not report. On average, respondents rated how quickly the staff came when they called for help at 8.45 (range 5-10, standard deviation 1.753).

### **Medical Care**

Respondents were asked if they visited a doctor or nurse practitioner for medical care outside or inside the long term care home. Fifty four point five percent reported visiting a doctor or nurse practitioner outside the long term care home, and 81.8% reported visiting one inside the long term care home. When asked if a doctor is available when they needed one, 81.8% reported yes, and 18.2% reported sometimes.

### **Autonomy and Control**

When respondents were asked whether they were left sitting or lying in the same position for so long it hurt, 36.4% reported no, 9.1% reported sometimes, and 54.5% did not report. The individuals who did not report were those who did not need help moving or repositioning. When asked if they were able to reach the call button by themselves, 100% reported yes. When asked if there was a pitcher of water or something to drink where they could reach it by themselves, 81.8% reported yes, 9.1% reported no, and 9.1% reported sometimes.

Respondents were asked about decision making and whether they chose what time they went to bed, clothes they wore, and activities in which they participated (Table 2). They were also asked if there were enough activities for them to do on the weekends and 27.6% of the respondents said yes, 54.5% reported no, and 18.2% reported sometimes. When asked if there were enough activities during the week 54.5% reported yes, 27.3% reported no, and 18.2% reported sometimes.

Table 2. Choices (%)

<b>Choice</b>	<b>Yes</b>	<b>No</b>	<b>Sometimes</b>	<b>No response</b>
<b>Bed time</b>	100	0	0	0
<b>Clothes</b>	100	0	0	0
<b>Activities</b>	72.7	9.1	18.2	0

**Emotions**

Respondents were asked to indicate how often they felt worried, happy, bored, and lonely (Table 3). Although most respondents reported being happy often or sometimes, respondents also reported being worried, bored or lonely often or sometimes.

Table 3. Emotions (%)

<b>Emotion</b>	<b>Often</b>	<b>Sometimes</b>	<b>Rarely</b>	<b>Never</b>	<b>No response</b>
<b>worried</b>	18.2	54.5	0	27.3	0
<b>happy</b>	63.6	27.3	0	9.1	0
<b>bored</b>	27.3	36.4	18.2	18.2	0
<b>lonely</b>	27.3	27.3	9.1	36.4	0

## **Future Planning**

Respondents were asked whether they had a discussion with family or a close friend about what healthcare treatment they wanted or did not want if they became ill and could not speak for themselves. One hundred percent reported yes. When asked if they ever had a discussion with a healthcare professional or long term care staff about what healthcare treatment they wanted or did not want if they became ill and could not speak for themselves, 27.3% reported yes and 72.7% reported no. When asked how important they felt it was to have this discussion with a health care professional or LTC home staff, 9.1% reported extremely important, 54.5% very important, 18.2% somewhat important, 9.1% reported not very important, and 9.1% reported not important at all.

## **Overall**

When respondents were asked whether they would recommend this long term care home to others, 45.5% reported definitely yes, 27.3% reported probably yes, 9.1% reported probably no, and 18.2% reported definitely no. When asked to rate the long term care home, on average, they rated the home at 6.55 (range 0-10, standard deviation 3.560). Nearly 67% reported that they were satisfied with how they spent their time in the home, 18.2% reported they were not, and 18.2% reported that they sometimes were. When respondents were asked to rate their life, on average they rated their lives at 6.45.



## Opportunities for Improvement

Overall results indicate that the Bay St. George Long Term Care Centre services have many strengths, including access to the call button and water, respect, communication and gentleness of staff with residents. Residents reported being satisfied with their level of privacy during bathing, the availability of a physician, and having choice with their clothes and when they go to bed. It is important to note the small sample size of this survey as only 11 residents from the Bay St. George Long Term Care Centre completed the questionnaire.

For the Bay St. George Long Term Care, opportunities for improvement include:

- Enhancing meal quality, and increasing mealtime enjoyment;
- Maintaining a comfortable temperature for residents;
- Enhancing cleanliness of the home;
- Increasing the residents' feelings of safety and security;
- Reducing excess noise around resident rooms at night;
- Making a private space available for residents when they have visitors;
- Exploring options for pain relief, from both medication and staff help;
- Ensuring staff explain things clearly to residents;
- Increasing availability and variety of activities on the weekends and during the week;
- Exploring opportunities to alleviate residents worry, boredom and loneliness.
- Providing opportunities for residents to plan their future wants and needs if they become ill and could no longer speak for themselves with a healthcare professional.

## **Appendix A**

### **CAHPS Nursing Home Survey: Resident Instrument**

# Resident Satisfaction Survey Long Term Care



Please fill in bubbles ● Print neatly inside boxes. *THANKS !!!*

Identifier: \_\_\_\_\_

Time Now: \_\_\_\_\_: \_\_\_\_\_

Do you understand and agree to participate in the survey?  Yes  No

Now let's talk about how you feel about things at this Long Term Care Home and how you feel about the care you get. Remember, when you answer, you can use any number from 0 to 10 where 0 is the worst possible, and 10 is the best possible.

1. First, what number would you use to rate the food here at this Long Term Care (LTC) Home?

0  1  2  3  4  5  6  7  8  9  10  NA

2. Do you ever eat in the dining room? (or communal area)?  Yes  No → Skip to 4

3. When you eat in the dining room (or communal area), what number would you use to rate how much you enjoy mealtimes?

0  1  2  3  4  5  6  7  8  9  10  NA

4. What number would you use to rate how comfortable the temperature is in this LTC Home?

0  1  2  3  4  5  6  7  8  9  10  NA

5. Now think about all the different areas of the LTC Home.

What number would you use to rate how clean this LTC Home is?

0  1  2  3  4  5  6  7  8  9  10  NA

6. What number would you use to describe how safe and secure you feel in this LTC Home?

0  1  2  3  4  5  6  7  8  9  10  NA

7. Now think about all the different kinds of medicine that help with aches or pain. This includes medicine prescribed by a doctor or nurse practitioner as well as aspirin and Tylenol.

Do you ever take any medicine to help with aches or pain?

Yes  Don't Know (DO NOT READ)  
 No → Skip to 9

Don't know

8. What number would you use to rate how well the medicine worked to help with aches or pain?

0  1  2  3  4  5  6  7  8  9  10  NA

9. What number would you use to rate how well the staff help you when you have pain?

0  1  2  3  4  5  6  7  8  9  10  NA

10. What number would you use to rate how quickly the staff come when you call for help?

0  1  2  3  4  5  6  7  8  9  10  NA

11. Do the staff help you with any of the following: to dress, bath, shower OR go to the toilet?

Yes  No → Skip to 13

12. What number would you use to rate how gentle the staff are when they're helping you?  
 0  1  2  3  4  5  6  7  8  9  10  NA

13. What number would you use to rate how respectful the staff are to you?  
 0  1  2  3  4  5  6  7  8  9  10  NA

14. What number would you use to rate how well the staff listen to you?  
 0  1  2  3  4  5  6  7  8  9  10  NA

15. What number would you use to rate how well the staff explain things in a way that is easy to understand?  
 0  1  2  3  4  5  6  7  8  9  10  NA

16. Overall, what number would you use to rate the care you get from all the staff?  
 0  1  2  3  4  5  6  7  8  9  10  NA

17. Overall, what number would you use to rate this LTC Home?  
 0  1  2  3  4  5  6  7  8  9  10  NA


18. Is the area around your room quiet at night?  
 Yes  
 No  
 Sometimes

23. Is a doctor available to you when needed?  
 Yes  
 No  
 Sometimes

19. Are you bothered by noise during the day?  
 Yes  
 No  
 Sometimes

24. **OBSERVATIONAL SCREENER:** Is R able to move around alone – not in a wheelchair? (Ask if not sure.)  
 Yes **Skip to 26**  
 No

20. If you have a visitor, can you find a place to visit in private?  
 Yes  
 No  
 Sometimes

 Interviewer Note: This can include their room if they feel it is "private"


25. Are you ever left sitting or laying in the same position so long that it hurts?  
 Yes  
 No  
 Sometimes

21. Do you visit a doctor or nurse practitioner for medical care outside the LTC Home?  
 Yes  
 No  
 Sometimes

26. Are you able to move your arms to reach things that you want?  
 Yes  
 No  
 Sometimes

22. Do you see any doctor or nurse practitioner for medical care inside the LTC Home?  
 Yes  
 No  
 Sometimes

27. We'd like to find out about whether you can reach the things you need to in your room. **Can you reach the call button by yourself?**  
 Yes  
 No  
 Sometimes

 Point out call button if helpful.

<p><b>28. Is there a pitcher of water or something to drink where you can reach it by yourself?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>	
<p><b>29. Do the staff help you with <u>any</u> of the following: to dress, take a shower, OR bathe?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No → Skip to 31</p>	<p><b>36.</b> For the next question you can answer definitely no, probably no, probably yes, or definitely yes.  <b>Would you recommend this LTC Home to others?</b></p> <p><input type="radio"/> Definitely No  <input type="radio"/> Probably No  <input type="radio"/> Probably Yes  <input type="radio"/> Definitely Yes</p>
<p><b>30. Do the staff make sure you have enough personal privacy when you dress, take a shower, or bathe?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>	
<p><b>31. Can you choose what time you go to bed?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>	
<p><b>32. Can you choose what clothes you wear?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>	<p><b>37.</b> Now I'd like to use this list of answer choices: Often, Sometimes, Rarely or Never  <b>How often do you feel worried – often, sometimes, rarely, or never?</b></p> <p><input type="radio"/> Often  <input type="radio"/> Sometimes  <input type="radio"/> Rarely  <input type="radio"/> Never</p>
<p><b>33. Can you choose what activities you do here?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>	
<p><b>34. Are there enough organized activities for you to do on the <u>weekends</u>?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>	<p><b>38. How often do you feel happy – often, sometimes, rarely, or never?</b></p> <p><input type="radio"/> Often  <input type="radio"/> Sometimes  <input type="radio"/> Rarely  <input type="radio"/> Never</p>

<p><b>35. Are there enough organized activities for you to do during the <u>week</u>?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>	<p><b>39. How often do you feel bored here – often, sometimes, rarely, or never?</b></p> <p><input type="radio"/> Often  <input type="radio"/> Sometimes  <input type="radio"/> Rarely  <input type="radio"/> Never</p>
<p><b>40. How often do you feel lonely here – often, sometimes, rarely, or never?</b></p> <p><input type="radio"/> Often  <input type="radio"/> Sometimes  <input type="radio"/> Rarely  <input type="radio"/> Never</p>	<p><b>46. Do you sometimes need help from staff to stay clean?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No → <b>Skip to 48</b></p>
<p><b>41. In general, how would you rate your overall health – excellent, very good, good, fair, or poor?</b></p> <p><input type="radio"/> Excellent  <input type="radio"/> Very Good  <input type="radio"/> Good  <input type="radio"/> Fair  <input type="radio"/> Poor</p>	<p><b>47. Do you receive the help you need from staff to stay clean?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>
<p><b>42. Are you satisfied with how you spend your time at this Home?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>	<p>These next few questions are about you.</p> <p><b>48. First, we want to know how you feel about your life now.</b> Use any number from 0 to 10 where 0 is the worst possible and 10 is the best possible.</p> <p><b>What number would you use to rate your life now?</b></p> <p><input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> NA</p>
<p><b>43. Are you ever <u>unhappy</u> with the care you get at this Home?</b></p> <p><input type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> Sometimes</p>	
<p><b>44. Do you feel free to speak up to staff when you</b></p>	<p><b>49. In what year were you born?</b></p>

<p><b>are unhappy with your care?</b></p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> Sometimes</p>	<table border="1" style="width: 100%; height: 30px;"> <tr> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> <td style="width: 25%;"></td> </tr> </table>				
<p><b>45. Do you get the care you need at this Home?</b></p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> Sometimes</p>	<p><b>50. What is the highest level of school that you have completed?</b> Field Coded – only read choices of needed.</p> <p><input type="radio"/> Grade school or some high school</p> <p><input type="radio"/> Completed high school or GED</p> <p><input type="radio"/> Post-secondary technical school</p> <p><input type="radio"/> Some university or college</p> <p><input type="radio"/> Completed college diploma</p> <p><input type="radio"/> Completed university degree</p> <p><input type="radio"/> Post-grad degree (Ph.D or MD)</p>				
<p><b>51. (Ask only if needed.)</b></p> <p><b>What is your race or ethnicity?</b></p> <p><input type="radio"/> White or Caucasian</p> <p><input type="radio"/> Other (Please Print)</p> <div style="border: 1px solid black; width: 200px; height: 30px; margin-left: 100px;"></div>	<p><b>57. In your opinion, how important is it to have this kind of discussion with a <u>Healthcare professional</u> OR <u>LTC Home staff</u>? (READ ALL)</b></p> <p><input type="radio"/> Extremely important</p> <p><input type="radio"/> Very important</p> <p><input type="radio"/> Somewhat Important</p> <p><input type="radio"/> Not very important</p> <p><input type="radio"/> Not at all important</p>				
<p><b>52. Gender</b> (Do not ask if obvious)</p> <p><input type="radio"/> Male</p> <p><input type="radio"/> Female</p>					
<p><b>53. Ask if not observed.</b></p> <p><b>Do you currently have a roommate?</b></p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>	<p><b>58. Do you have any additional comments, concerns, or issues about your care in this LTC Home? If so, please explain.</b></p>				
<p><b>54. Do Not Read</b></p> <p><b>Does resident have difficulty with English language?</b></p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> Yes to some extent</p> <p><input type="radio"/> No</p>					
<p><b>55. Have you had a discussion with <u>family</u> or a <u>close friend</u> about what healthcare treatment you want or do not want if you become very ill and you cannot speak for yourself?</b></p> <p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> Don't Know (Read)</p>					
<p><b>56. Have you ever had a discussion with a <u>healthcare professional</u> OR <u>LTC staff</u> about</b></p>					

**what healthcare treatment you WANT or DON'T want if you become very ill and you cannot speak for yourself?**

- Yes
  - No
  - Don't Know (Read)
- 

**Time Now:** \_\_\_\_\_ : \_\_\_\_\_



**Appendix B**

**Corner Brook Long Term Care: Resident Comments**

1. Better food, more activities.
2. Build a new home, all private rooms.
3. I love it here. I could not say anything bad about this place.
4. No, I feel pretty good about it.
5. Sometimes I get a little upset because of things that are by the staff.
6. Staff are wonderful, no complaints.