

Experiences of Relatives and Friends 2022



Thank you!

Thank you to all the residents and their family members and friends who participated in Ireland's first National Nursing Home Experience Survey.

Without your support and participation, the survey would not have been possible. The survey ensures that your voice will be heard by the people who can change and improve nursing home care in Ireland. By putting the voice of the residents, family members and friends at the centre of nursing home care, we can help make sure that the needs and wishes of the people who matter most are met.

Thank you also to the staff working in all participating nursing homes for supporting the implementation of the survey, and in particular, for engaging with and informing residents while the survey was under way. Without your commitment and generous support this survey could not have happened.

The National Nursing Home Experience Survey was overseen by a national steering group and a programme board. We acknowledge the direction and guidance provided by these groups. Appendix 1 lists the members of these groups and the core project team.

About the National Care Experience Programme

The National Care Experience Programme seeks to improve the quality of health and social care services in Ireland by asking people about their experiences of care and acting on their feedback.

The National Care Experience Programme is a joint initiative by the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health.

The National Care Experience Programme has a suite of five surveys that capture the experiences of people using Ireland's health and social care services: the National Inpatient Experience Survey, the National Maternity Experience Survey, the National Maternity Bereavement Experience Survey, the National Nursing Home Experience Survey, and the National End of Life Survey. The surveys aim to learn from people's feedback about the care received in health and social care services to find out what is working well, and what needs to be improved.

A National Care Experience Programme Survey Hub is available to provide support, guidance, information and resources to assist providers to develop, conduct and analyse their own surveys, and act upon the findings.

Find out more at <u>www.yourexperience.ie</u>.



About this Report

This report details the findings from the relatives and friends who participated in the National Nursing Home Experience Survey.

The survey was developed in response to a recommendation made in the COVID-19 Nursing Homes Expert Panel Report¹.

Two further reports on the survey findings are available at www.yourexperience.ie. One report details the methodology and findings of the survey with residents, and the second report provides a high level overview of the findings from the National Nursing Home Experience Survey.

¹ Department of Health. COVID-19 Nursing Homes Expert Panel: Final Report. Dublin. 2020. Available from: https://www.gov.ie/en/publication/3af5a-covid-19-nursing-homes-expert-panel-finalreport/ This included a recommendation calling for nursing home residents to be provided with an opportunity to have their voice and experience heard in a structured manner with a view to improving services and the lived experience.

Executive Summary

The National Nursing Home Experience Survey offered residents in a representative sample of nursing homes in Ireland, and their family members or friends, the opportunity to share their experiences of nursing homes.

The survey aims to learn from and understand these experiences in order to improve the care provided in Irish nursing homes.

A total of 53 nursing homes took part in the survey. The survey sample was created by dividing all registered nursing homes into groups based on three characteristics: region (Munster, Leinster, Connacht, Ulster and Dublin), centre size (40 or fewer beds, 41 to 99 beds, and over 100 beds) and provider type (public, private and voluntary). Nursing homes were randomly selected from each of these groups to be invited to take part. If a nursing home was unable to take part, it was replaced with another nursing home matching its profile.

A questionnaire was developed for residents to gather information about their experiences of living in a nursing home, and their experiences during the COVID-19 pandemic. An interview-based survey approach was selected in order to be more inclusive of residents with cognitive impairment or residents who may lack the capacity to complete a paper questionnaire. Not all residents chose to take part, and not all were capable of taking part due to cognitive or physical impairment. In total, 1,055 residents were invited to participate in the National Nursing Home Experience Survey, while 718 took part. A report on the findings from residents can be found on www.yourexperience.

A second questionnaire was developed for relatives or friends of residents ('designated representatives') to understand their experiences. Relatives or friends had the option to complete a hardcopy survey questionnaire or to complete the survey online. Relatives and friends have a unique, external perspective on nursing home care. While they did not act as proxy respondents for nursing home residents, the inclusion of their perspective allowed for a broader viewpoint to be represented, including, to a limited extent, those unable to participate themselves. In total, 1,579 relatives or friends were invited to participate in the survey, and 943 took part.



What were the main findings of the survey for relatives and friends?

Most relatives and friends said that they had a good or very good overall experience with the nursing home (87.1%).

The highest-scoring questions among relatives and friends related to knowing who to contact in the nursing home, feeling welcomed when visiting, cleanliness of the nursing home, and the assistance and protection staff provide to residents.

Analysis of the survey findings identified several high-scoring questions that had a strong relationship with participants' ratings of their overall experience. Relatives and friends had a more positive overall experience with the nursing home when they had confidence and trust in staff, felt the resident was treated with dignity and respect, and that staff were knowledgeable about the resident's needs.

However, 13% of relatives and friends said that they had a fair-to-poor experience with the nursing home. The lowest-scoring questions for relatives and friends related to awareness of how to contact advocacy organisations, residents' choice in how they spent their time, encouragement of residents' independence, and having a private place to talk during visits.

Lower-scoring questions that strongly related to ratings of overall experience were identified. Relatives and friends said that they had a poorer overall experience when the residents' emotional wellbeing was not supported, when residents weren't supported to take part in activities that interested them, and when they did not think that residents' belongings were kept safe in the nursing home.

Relatives and friends of residents in nursing homes with 40 or fewer beds said they had a slightly more positive overall experience compared to the national average.² They also reported more positive experiences on four of the six themes addressed in the survey. These themes were the living environment, caregivers and staff in the nursing home, food and nutrition, and spending time in the nursing home.³

Experiences during the COVID-19 pandemic

The survey asked relatives and friends an open-ended question about their experiences during the COVID-19 pandemic. These comments were analysed using a framework approach, with further detail provided in Chapter 5. In their comments, relatives and friends talked about the difficulty and stress experienced during times

² 92.4% of relatives and friends of residents in nursing homes with 40 or fewer beds had a good or very good overall experience, compared with the national average of 87.1%

³ For nursing homes with 40 or fewer beds, relatives or friends rated the living environment theme at 9.1 out of 10, compared with the national average of 8.8. For the caregivers and staff theme the rating was 9.5 out of 10, compared with the national average of 9. For food and nutrition, the rating was 9.1 compared with the national average of 8.7. For spending time in the nursing home, the rating was 8.8 compared with the national average of 8.5.

of increased restrictions. They frequently noted and appreciated the efforts of staff, but also expressed concerns about how the resident declined during periods of limited social interactions. Some relatives and friends talked about the efforts nursing home staff made to support them to stay in touch with residents in the nursing home (e.g. tablets and window visits). Others felt not enough was done with regard to sharing information about the resident or maintaining contact.

Conclusions

Overall, most relatives and friends of residents said they had either a good or a very good experience with the nursing home. They were particularly positive about the living environment in the nursing home, and the staff and caregivers. However, 13% of relatives and friends said that they had a fair-to-poor experience, and scores for the individual themes indicate that there is room for improvement in particular aspects of care, such as supporting emotional wellbeing and participation in interesting activities, and ensuring residents' belongings are kept safe.

What happens next?

Nursing homes can use the survey results to develop plans on how they will respond to the findings. All nursing homes, public, private and voluntary that participated have been invited to share initiatives they have undertaken in response to the findings of the survey. These will be available on <u>www.yourexperience.ie</u> from November 2022. Extensive engagement has taken place to support participating nursing homes, and organisations that represent them, to understand and use the findings of the survey.

The Department of Health will use the findings to help inform the development of policy and strategy in relation to nursing home care as appropriate. Finally, the findings of the survey will inform national standards and HIQA's regulation of nursing homes.



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Chapter 1: About the National Nursing Home Experience Survey

The National Nursing Home Experience Survey offered residents in a representative sample of nursing homes, and their family members or friends, the opportunity to share their experiences of nursing home care. The survey aims to learn from and understand these experiences in order to improve the care provided in Irish nursing homes.

The survey is part of the National Care Experience Programme. This programme is a joint initiative by the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health. The National Care Experience Programme seeks to improve the quality of health and social care services in Ireland by asking people about their experiences of care and acting on their feedback. The survey was developed in response to a recommendation made in the COVID-19 Nursing Homes Expert Panel Report⁴.

A total of 53 nursing homes took part in the survey. The survey sample was created by dividing all registered nursing homes into groups based on three characteristics: region (Munster, Leinster, Connacht, Ulster and Dublin), centre size and provider type (public, private and voluntary). Nursing homes were then randomly selected from each of these groups to be invited to take part (see Appendix 2 for more details). If a nursing home was unable to take part, it was replaced with another nursing home matching its profile.

Participating nursing homes played an important role in administering the survey. Nursing homes were responsible for identifying residents with the functional ability to participate in an interview, as well as engaging with relatives and friends to share their contact details with the survey team so they could receive a postal questionnaire. A process guide was developed by the NCEP team to assist nursing homes with these administrative tasks.

A questionnaire was developed for residents to gather information about their experiences of living in a nursing home, and their experiences during the COVID-19 pandemic. An interview-based survey approach was selected in order to be more

⁴ The COVID-19 Nursing Homes Expert Panel report '*Examination of Measures to 2021: Report to the Minister*' was published in August 2020. This included a recommendation calling for nursing home residents to be provided with an opportunity to have their voice and experience heard in a structured manner with a view to improving services and the lived experience.



inclusive of residents with cognitive impairment or residents who may lack the capacity to complete a paper questionnaire.

A second questionnaire was developed for relatives or friends of residents ('designated representatives^{5'}) to understand their experiences. Relatives or friends who agreed to take part could respond via post or online. Relatives and friends have a unique, external perspective on nursing home care. While they did not act as proxy respondents for nursing home residents, the inclusion of their perspective allowed for a broader viewpoint to be represented, including, to a limited extent, those unable to participate themselves. The findings relating to relatives and friends are presented in this report.

Methodology

How was the survey conducted?

To participate in this survey, individuals had to be a nominated family member or friend of a resident in a participating nursing home. A relative or friend was nominated for each resident in a participating nursing home.

The 53 participating nursing homes had a combined maximum occupancy of 3,105 residents. Participating nursing homes were asked to distribute an information pack (provided by the survey team) to one designated representative of each resident in the nursing home in advance of the survey period. Visiting restrictions associated with the COVID-19 pandemic limited the opportunity for some nursing homes to distribute the information packs to a relative or friend of each resident. The information packs contained a letter which explained the survey and also a frequently asked questions leaflet which provided information about the survey and also detailed the various options on how to opt out if they did not wish to take part. The survey team provided guidance to nursing homes on the eligibility criteria in order to promote a consistent and unbiased approach to the recruitment process.

Survey packs were sent out in the post to relatives or friends who had not opted out of the survey following receipt of the information packs. The survey pack contained a letter (containing a unique survey code), a hardcopy questionnaire and a Freepost envelope. Two reminders were sent at two-week intervals to people who had not responded. Relatives or friends had the option to complete and return the hardcopy survey questionnaire using the Freepost envelope or alternatively to log on to the National Care Experience Programme website (www.yourexperience.ie) and complete the survey online using their unique survey code. In total, 1,579 relatives or

⁵ Participating nursing homes were asked to identify one 'designated representative' for each resident in the nursing home. The term relative or friend is used to refer to these 'designated representatives'.

friends chose not to opt out of the survey prior to receiving the questionnaire in the post and were invited to participate. Of these, 943 actually took part (59.7% of those invited).



What questions did we ask relatives and friends?

The questionnaire asked questions about the following themes, identified as important in the development of the survey. Table 1 displays a description of the themes and number of questions for each theme.

Theme	Description	Number of questions
Moving into the nursing home	Experiences of receiving information prior to a relative or friend moving into the nursing home.	1
Caregivers and staff in the nursing home	Experiences with caregivers and staff in the nursing home, including perceptions of staff, treatment by staff, knowing who to contact, being informed, staff behaviours and communication with staff.	8
Spending time in the nursing home	Experiences of spending time in the nursing home, including visiting, privacy and perceptions of how residents spend their time.	7
The living environment	Experiences of the living environment in the nursing homes including cleanliness, homeliness, safety of personal belongings, resident's control over their finances and privacy.	5
Person-centred care	Experiences of person-centred care including involvement in care and support, perceptions of support for the resident, giving feedback, making complaints and advocacy.	9
Food and nutrition	Experiences of food and nutrition in the nursing home including perceptions of the food served, support to eat, adequate hydration, and access to snacks and drinks outside of mealtimes.	5

Relatives and friends were also asked to rate their overall experience on a scale from 0 to 10.

All participants were asked four open-ended questions, covering the following topics: areas of particularly good experience, areas for improvement, experiences during the COVID-19 pandemic, and other comments and suggestions. These questions were analysed using the framework approach, outlined in more detail in Chapter 5.⁶ Illustrative comments made in response to these questions are used throughout this report alongside responses to the structured questions.

Relatives and friends were asked 49 questions in total. See Appendix 4 for all questions included in the questionnaire. The administration and survey fieldwork was carried out by Behaviour & Attitudes⁷ on behalf of the National Care Experience Programme.

Participating nursing homes

Fifty-three nursing homes agreed to participate in the survey. Table 2 presents the characteristics of participating nursing homes in terms of provider type, region and maximum occupancy. See Appendix 2 for a comparison of participating nursing homes to the national profile and the profile of invited nursing homes.

⁶ Gale NK, Heath G, Cameron E, Rashid S, Redwood S. Using the framework method for the analysis of qualitative data in multi-disciplinary health research. BMC Medical Research Methodology. 2013;13(1):117.

⁷ Behaviour & Attitudes is a market research agency. More information on the company can be found on their website <u>www.banda.ie</u>.



Region		Provide	Provider type breakdown (N)			Bed-occupancy range breakdown (N)		
		HSE	Private	Voluntary	<u><</u> 40 beds	41-99 beds	<u>></u> 100 beds	
Connacht	11 (20.8%)	3(5.7%)	8 (15.1%)	0	5 (9.4%)	5 (9.4%)	1 (1.9%)	
Dublin	8 (15.1%)	2 (3.8%)	5 (9.4%)	1 (1.9%)	2 (3.8%)	3 (5.7%)	3 (5.7%)	
Leinster	13 (24.5%)	2 (3.8%)	10 (18.9%)	1 (1.9%)	4 (7.6%)	7 (13.2%)	2 (3.8%)	
Munster	17 (32.1%)	3 (5.7%)	12 (22.6%)	2 (3.8%)	6 (11.3%)	9 (17%)	2 (3.8%)	
Ulster	4 (7.5%)	2 (3.8%)	2 (3.8%)	0	2 (3.8%)	2 (3.8%)	0	
Total	53 (100%)	12 (22.6%)	37 (69.8%)	4 (7.5%)	19 (34%)	26 (49%)	8 (15.1%)	

Table 2 Profile of participating nursing homes

How were survey responses analysed?

The survey contained a mix of tick-box type responses, as well as open-ended responses to the questions that asked participants to describe their experiences in their own words. As a result, a mix of qualitative and quantitative analysis methods were used.

Appendix 3 contains details on how responses to the tick-box questions were converted into quantitative scales scored from 0 to 10 and the subsequent analyses that were carried out. Converting responses into scales allowed for the identification of higher- and lower-scoring questions within the survey, and the results of these questions are presented later in the report. This was the first step in identifying areas where nursing homes performed well, and areas where improvement were possible. The next step involved examining how strongly each question correlated with participants' ratings of their overall experience. While it is not possible to establish causation, by focusing on the lower-scoring areas that strongly correlate with overall experience, nursing homes can attempt to address the areas that appear to be of particular concern to residents and their relatives and friends.

A framework approach⁸ was used to analyse the comments received in response to the open-ended questions where participants described their experience. This approach involves multiple analysts reviewing survey comments, identifying a framework of key concepts and themes identified within the comments, then applying

⁸ Gale NK, Heath G, Cameron E, Rashid S, Redwood S. Using the framework method for the analysis of qualitative data in multi-disciplinary health research. BMC Medical Research Methodology. 2013;13(1):117.

the framework across all survey comments. An analytical framework consisting of five categories and 37 themes was developed. This framework helped organise and systematically reduce the thousands of comments into manageable segments of information. The framework approach is suited to analysing large volumes of qualitative information and has previously been used to analyse comments made in response to the National Inpatient Experience Survey and the National Maternity Experience Survey.



Chapter 2: Characteristics of residents and friends

Characteristics of relatives or friends who participated in the survey

A relative or friend of every resident in a participating nursing home was invited to take part in the National Nursing Home Experience Survey. Relatives and friends were invited to take part regardless of whether the resident they were associated with (referred to as 'the resident' in this report) took part in the survey. In total, 1,579 relatives or friends were invited to participate in the survey, and 943 took part (59.7% of those invited).

Most relatives and friends who took part were female (72.6%), 26.8% were male and six (0.6%) preferred not to say. Most were the child of a resident (55.5%), the sibling of a resident (13.8%) or the spouse of a resident (11.5%). Residents were asked to indicate their ethnicity. 98.3% said they were 'White, Irish', with fewer than five responses in all of the other categories. See Figure 1 for the characteristics of relatives or friends who participated in the survey.



Figure 1 Characteristics of relatives or friends who participated in the survey (%)

Relatives and friends answered a structured question on the reasons why the resident lived in the nursing home. The survey asked relatives or friends to select as many options as were relevant from a list, and the survey also gave the option to select 'other' and write down an answer not on the list. The findings are displayed in Figure 2.

The most frequently-selected options were 'can no longer live independently', followed by 'severe memory problems or dementia' and 'physical limitations or impairment'. Sixty-two relatives or friends also ticked the 'other' option. Reasons included elaborations on why the resident could no longer live independently, including conditions such as stroke (7), Parkinson's disease (8), no family members or friends capable of providing the care needed (7), or a personal preference (2).

Figure 2 Reasons relatives or friends gave for why their relative or friend lives in a nursing home



Figure 3 presents the proportion of relatives and friends with residents living in participating nursing homes by characteristics of the nursing home (provider type, region and size).

Figure 3 Proportion of relatives and friends by provider type, region and size of the nursing home the resident lives in



Chapter 3: Overall experience, areas of good experience and areas needing improvement

The National Nursing Home Experience Survey asked relatives or friends to rate their overall experience with the nursing home on a scale from 0 to 10, with 0 indicating a very negative experience and 10 indicating a very positive experience.

The average overall rating was 8.0 out of 10. In total 457 relatives and friends (49.5%) said they had a very good overall experience of their nursing home (overall rating between 9 and 10). Results show that 347 relatives and friends (37.6%) said they had a good experience (overall rating of 7-8), whereas 120 relatives and friends (13%) said they had a fair to poor experience.

Figure 4 Relatives or friends' overall experience

13	8.0%		37.6%)			49.	5%		
0%	10%	20%	30%	40%	50%	60%	70%	80%	90%	100%
			Fair to po	oor (0-6)	Good (7-8	8) ■Very	/ good (9-10))		

Relatives and friends of residents in nursing homes with fewer than 40 beds rated their overall experience more positively than the national average.⁹

Areas of good experience, and areas needing improvement

In the analysis of findings, the responses to all the questions in the survey were compared to relatives' and friends' ratings of their overall experience. The top three higher-scoring questions that were associated with a better overall experience were identified. The bottom three lower-scoring questions on the survey that were

⁹ 92.4% of relatives and friends of residents in nursing homes with 40 or fewer beds had a good or very good overall experience, compared with the national average of 87.1%



associated with a poorer overall experience were also identified. Appendix 3 explains how these areas were identified. Table 3 shows the questions associated with a good overall experience among relatives and friends. Table 4 shows the questions associated with a poorer overall experience among residents.

This section also presents the five highest- and five lowest-scoring questions among relatives and friends from across the survey regardless of their relationship to overall experience. The list includes the relevant question number and theme for each area. Table 5 presents the five highest-scoring questions, and Table 6 presents the five lowest-scoring questions. These areas are useful in terms of identifying where improvement efforts are required.¹⁰

Theme	Question
Caregivers and staff	757 of 930 relatives or friends (81.4%) said they always
Question 4	had confidence and trust in the staff who cared for their
	relative or friend in the nursing home.
Caregivers and staff	787 of 926 relatives or friends (85%) said their relative
Question 5	or friend was always treated with respect and dignity by
	the staff who care for them.
Caregivers and staff	753 of 926 relatives or friends (81.3%) said the staff in
Question 12	the nursing home were definitely knowledgeable about
	the care and support their relative or friend needs.

Table 3 Areas associated with a good overall experience among relatives or friends

The questions identified as having a strong association with an overall good experience among relatives or friends reflect the themes most frequently occurring in comments by relatives or friends when they were asked the open-ended question 'overall, is there anything particularly good about the care in the nursing home?' (Question 46). Most comments related to staff relationships, and quality of care. See Chapter 5 for more details on the responses to open-ended questions on the survey.

The questions identified as having a strong association with a poorer overall experience reflect the themes most frequently occurring in comments by relatives or friends when they were asked the open-ended question 'is there anything that could be improved?'. Most comments related to the physical environment (including cleanliness), staff availability and responsiveness, and activities and entertainment.

¹⁰ Please note: Not all relatives and friends chose to answer every question. The number of relatives and friends who responded to the questions referenced in Tables 3, 4, 5 and 6 is presented for information. For the purposes of statistical analysis 'don't know' type responses are excluded from some calculations.

In some of the areas identified for improvement, comparatively few relatives or friends had a negative experience. Nevertheless, these areas strongly correlated with relatives or friends ratings of their overall experience and should be an important focus when responding to survey findings.

Theme	Question
Caregivers and staff	40 of 870 relatives or friends (4.7%) said that staff do
Question 14	not support the emotional wellbeing of their relative or
	friend.
The living environment	36 of 911 relatives or friends (4%) said their relative or
Question 24	friend's belongings and personal items were not safe in
	the nursing home.
Spending time	50 of 868 relatives or friends (5.8%) said their relative
Question 16	or friend was not supported to take part in activities that
	interest them.

Table 4 Areas associated with a poorer overall experience among relatives or friends

The five highest-scoring and five lowest-scoring questions in the survey

The highest-scoring questions in the survey give an indication of the areas that are currently working well within nursing homes from the perspective of relatives and friends. The five highest-scoring questions on the survey show that most relatives and friends had positive views of nursing home staff and the care and protection they provided to residents. The five lowest-scoring questions among family members and friends related to information on accessing advocacy services, residents' independence, and privacy when visiting.

Table 5 Five highest-scoring questions for relatives or friends

Theme	Question
Caregivers and staff	906 of 933 relatives or friends (97.1%) said they knew
Question 9	who to contact in the nursing home for information about
	the resident.
Spending time in the	853 of 937 relatives or friends (91%) said they always felt
nursing home	welcome in the nursing home.
Question 20	
Person-centred care	806 of 913 relatives or friends (88.3%) said their relative
Question 25	or friend always received help when they need it in
	carrying out daily routines.



Person-centred care	809 of 930 relatives or friends (87%) said that they knew
Question 30	how to give feedback or make a complaint about the care
	provided in the nursing home.
Caregivers and staff	812 of 931 relatives or friends (87.2%) said that staff in
Question 8	the nursing home definitely kept their friend or relative
	safe and protected them from harm.

Theme	Question
Person-centred care	195 of 674 relatives or friends (28.9%) said they do not
Question 29	know how to contact organisations that can support
	their relative or friend to express their views and
	wishes, and to help them to assert their rights ¹¹ .
Person-centred care	136 of 845 relatives or friends (16.1%) said their
Question 26	relative or friend cannot choose how they carry out their
	daily routines.
Spending time in the	118 of 806 relatives or friends (14.6%) said their
nursing home	relative or friend did not get to decide how they spend
Question 15	their day.
Person-centred care	97 of 858 relatives or friends (11.3%) said their relative
Question 28	or friend was not encouraged to be as independent as
	they are able to be.
Spending time in the	83 of 910 relatives or friends (9.1%) said that they could
nursing home	not find a place to talk to their relative or friend in
Question 19	private, other than their bedroom when they visit.

Table 6 Five lowest-scoring questions among relatives or friends

See Chapter 5 for more information on relatives' or friends' responses to the openended questions in the survey.

¹¹ Relatives or friends were prompted with examples of advocacy organisations using the following wording "for example, the Patient Advocacy Service, Sage Advocacy or Age Action Ireland."



Chapter 4: Results for individual themes

The questions in the National Nursing Home Experience Survey are grouped into six themes. Scores out of 10 were calculated for each theme. A score of 0 indicates a very negative experience and a score of 10 indicates a very positive experience.

Statistical tests were carried out to examine if there were significant differences between the scores for specific groups, for example for provider type, size of nursing home, gender, age group, and the national average (see Appendix 3 for further information). Quotations from relatives and friends are used to illustrate particular themes. These have been redacted to remove information that could identify an individual.

Figure 5 shows the average score out of 10 for each theme. The remainder of this chapter details the highest- and lowest-scoring questions in each theme, shows the average scores for each question in each theme, and describes any differences based on nursing home size or provider type.



Figure 5 Survey themes and scores out of 10 for relatives or friends

Moving in to the nursing home

Relatives or friends were asked one question relating to the information they received prior to the resident moving into the nursing home. In total, 667 (72.8%) relatives or friends said that they had definitely received enough information about the nursing home before the resident moved in. The results for this question are shown in Figure 6.

Figure 6 Individual question scores for relatives or friends for 'moving in to the nursing home'



Differences in relatives or friends' experiences of moving in to the nursing home by characteristics of the nursing home

There were no statistically-significant differences in relatives or friends' responses to the question in the 'moving in to the nursing home' theme by size or provider type.



Sample comments

"When my husband was initially accepted to stay at [Nursing Home Name] the administrator took me on a "video tour" of the nursing home so I could see what it was like."

"The lack of nursing home places gave us no advocacy or time frame to plan properly so that my dad could mentally prepare for the move."

"He has been a resident for over 8 years now and while he was far too young to be in full time care when he first moved there, the alternative living arrangement was not good. The staff are so good to him and he is safe and well fed." "The contract for care was only delivered to my mother the day before my father was admitted. This made [her] very anxious as she thought it needed to be completed before admission."

> "When Dad moved to this nursing home it was the first time in 10 years that I stopped worrying about him and his safety knowing he was in the best hands when he couldn't be in mine anymore."

"My mother is 10 years younger since she moved in. She is safe, warm, dry, fed and cared for better than I am."

Caregivers and staff in the nursing home

Relatives and friends were asked eight questions about the caregivers and staff in the nursing home. Figure 7 shows the individual question scores for relatives or friends for 'caregivers and staff in the nursing home'.

In total, 906 (97.1%) of relatives and friends said they know who to contact in the nursing home for information about the residents. This was the highest scoring question for this theme.

The lowest-scoring question for this theme related to the emotional wellbeing of residents, with 4.7% (41) of relatives and friends saying the emotional wellbeing of the resident was not supported.

Figure 7 Individual question scores for relatives or friends for 'care givers and staff in the nursing home'





Differences in relatives or friends' experiences of caregivers and staff by characteristics of the nursing home

Compared to the national average the overall score for the 'caregivers and staff in the nursing home' theme was slightly higher among relatives and friends of residents in nursing homes with a maximum occupancy of 40 or fewer beds.¹²

Sample comments

"All staff are knowledgeable about Dad, friendly, kind, available to talk and take on board any suggestions." "Could be a little more communication between staff and "designated" person, e.g. my friend had COVID and I (as her proxy) was NOT informed."

"Overall the care in the nursing home is very good my mother is treated with respect and compassion in times of distress and during the undertaking of personal care." "My mother feels very safe and protected in the home and is in good hands."

"Staff do [need a] bit more training into dealing with patients with dementia especially in later stages to help keep them stimulated and as active as possible."

"Train staff in communicating respectfully with residents. Ask rather than issue orders."

¹² For nursing homes with 40 or fewer beds, relatives or friends rated the caregivers and staff theme at 9.5 out of 10, compared with the national average of 9.

Spending time in the nursing home

Relatives or friends were asked seven questions about 'spending time in the nursing home'.

The highest-scoring question for this theme related to visiting the nursing home. 853 (91%) of family members and friends said they always felt welcome in the nursing home

The lowest-scoring question for this theme related to residents' autonomy. 118 (14.6%) said that the resident did not get to decide how they spend their days.

Figure 8 shows the individual question scores for relatives or friends for 'spending time in the nursing home'.



Figure 8 Individual question scores for relatives or friends for 'spending time in the nursing home'



Differences in relatives or friends' experiences of spending time in the nursing home by characteristics of the nursing home

Compared to the national average the overall score for the 'spending time in the nursing home' theme was slightly higher among relatives and friends of residents in nursing homes with a maximum occupancy of 40 or fewer beds.¹³

Sample comments

"There are plenty of activities to choose from on a daily basis for those who wish to avail of same."

"The staff of [nursing home name] all work well with both residents and families. We are always made feel welcome."

"More activities are needed for residents over there. It is heartbreaking to see that the only thing they have is half an hour of exercise a week and the rest of time it is TV to keep them occupied." "On lots of occasions I've gone to collect my mum and she's been busy at activities. This is great to see, she can have a busy day if she chooses. She is encouraged to take part and I know she enjoys it."

"My mother does not like to leave her room so she spends a lot of time on her [own] as due to our schedules we are unable to visit every day. I think there needs improvements on one-to-one activities and things that would give more stimulation to a person with dementia."

> "I know they are understaffed, but I would very much appreciate to spend more time on special occasions such as birthdays, wedding anniversaries."

¹³ For nursing homes with 40 or fewer beds, relatives or friends rated the spending time theme at 8.8 out of 10, compared with the national average of 8.5.

The living environment in the nursing home

Figure 9 shows the individual question scores for relatives or friends for 'the living environment in the nursing home'. Relatives or friends were asked five questions about this theme.

The highest-scoring question for this theme related to cleanliness. Overall, 774 (82.6%) family members and friends said that the nursing home was 'very clean'.

The lowest-scoring questions related to control of finances and safety of personal items and belongings. 449 (49%) said that the resident did not have the capacity to have control over their personal finances. However, of those who felt the resident did have capacity, 35 (7.5%) said that the resident did not have as much control as they would like over their own finances in the nursing home. In addition, 36 participants (4%) said that their relative's belongings and personal items were not safe in the nursing home.

Figure 9 Individual question scores for relatives or friends for 'the living environment in the nursing home'



Differences in relatives' or friends' experiences of the living environment in the nursing home by characteristics of the nursing home

Compared to the national average the overall score for the 'living environment' theme was slightly higher among relatives and friends of residents in nursing homes with a maximum occupancy of 40 or fewer beds.¹⁴

¹⁴ For nursing homes with 40 or fewer beds, relatives or friends rated the living environment theme at 9.1 out of 10, compared with the national average of 8.8.

Sample comments

"The nursing home is in a lovely setting with gardens accessible to staff and patients. The home is always clean and bright. Staff are helpful and my aunt is quite happy there."

"The size of the nursing home is ideal as it gives a homely feel. All staff are lovely."

"The only thing that could be improved would be minding of individual's belongings. Hearing aids, glasses, clothing go missing from time to time. I know it is very difficult to keep track of everyone's belongings, but glasses and hearing aids are necessary for positive and engaging communication, so everyone loses out." "I don't like the main sitting room — it's cramped and not very homely. Not much natural light can come in. Wheelchairs sometimes lined up in the centre of the room. There is another much brighter sitting room at the front which is rarely used."

"Could improve more private space (other than the bedroom) for visiting own relative. There is a small sitting room which is sometimes available."

> "The care home is a bright spacious building that is kept really clean, and it has a good atmosphere and always great reception staff that keep families well informed and supported."

Person-centred care

Figure 10 shows the individual question scores for relatives or friends for 'personcentred care'. Relatives or friends were asked nine questions about this theme. The highest-scoring question related to residents receiving help. 806 relatives or friends (88.3%) said that from their perspective the resident always got help when they needed it.

The lowest-scoring question related to knowing how to access organisations that could help their relative or friend to express their views and wishes, and to help them to assert their rights; 195 (28.9%) relatives or friends said that they did not know how to do so.



Figure 10 Individual question scores for relatives or friends for 'person-centred care'

Differences in relatives' or friends' experiences of person-centred care by characteristics of the nursing home

There was no statistically-significant difference the overall score for the 'personcentred care' theme by nursing home size or provider type.

Sample comments

"Local staff makes my aunt feel a part of her community still. This is very important to her and her family. Visits from local entertainment e.g. choirs, musicians, school children very cheerful residents missed greatly during COVID. Local priest visits mass when possible."

"I feel nursing homes in Ireland are under staffed and do not have the correct standard of care. For the costs involved you would expect them to be operated much better than they are. I will never put another relative in a nursing home again." "Could able patients where suitable be taken to local restaurants, places of interest etc. so that life might feel less monastic and more diverse."

> "My mother's wishes are always listened to."

"There needs to be individual plans for each resident which looks at every aspect of their health, not just physical health but social and emotional health also. Each individual and family should have input into likes, dislikes etc. be that food/activities or whatever. There should be better understanding that not all residents have a cognitive disorder."

Food and nutrition

Figure 11 presents the individual question scores for relatives or friends for 'food and nutrition'. Residents were asked five questions about this theme. The questions covered perceptions of the food served, support to eat, adequate hydration, and access to snacks and drinks outside of mealtimes.

In total, 705 (86.9%) relatives or friends said the resident could always get enough fresh water to drink. This was the highest-scoring question for this theme.

The lowest-scoring question related to residents being offered a choice of food. 55 relatives or friends (7.1%) said that the resident was not offered a choice of food.



Figure 11 Individual question scores for relatives or friends for 'food and nutrition'

Differences in relatives or friends' experiences of food and nutrition by characteristics of the nursing home

Compared to the national average the overall score for the 'food and nutrition' theme was slightly higher among relatives and friends of residents in nursing homes with a maximum occupancy of 40 or fewer beds.¹⁵

¹⁵ For nursing homes with 40 or fewer beds, relatives or friends rated the food and nutrition theme at 9.1 out of 10, compared with the national average of 8.7.



Sample comments


Chapter 5: In their own words

Four survey questions asked relatives and friends (questions 46-50) to provide additional information, in their own words, on their experiences with the nursing home. These open-ended, free text questions allowed participants to give a more indepth description of specific aspects of their experiences with their nursing home. Relatives and friends made 2,396 comments across the four questions.

A framework approach was used to analyse and manage information provided in the comments.¹⁶ An analytical framework was developed by the survey team consisting of five categories and 37 themes (see Table 7). This framework helped organise and systematically reduce the thousands of comments into manageable chunks of information.

Category	Themes	Total
Staff	Staff relationship/attitude/turnover	554
	Communication with designated representative	355
	General staff - cleaners/security/catering	146
	Nurses	73
	Communication with Resident	72
	Healthcare assistants	69
	Admin staff - reception etc.	25
	Doctors	18
Medical	COVID-19 and vaccine-related comments	483
aspects	Quality of care	460
	Medical care or condition	233
	Physio and other physical therapies	24
Material	Physical environment (including cleanliness) and	355
needs	equipment	105
	Food and drink	62
	Finance	46
	Personal property	45
	Personal hygiene	28
	Support with feeding/drinking/dressing	24
	Health and safety	19
	Personal services	16

Table 7 Analytical framework for responses to open-ended questions

¹⁶ Gale NK, Heath G, Cameron E, Rashid S, Redwood S. Using the framework method for the analysis of qualitative data in multi-disciplinary health research. BMC Medical Research Methodology. 2013;13(1):117.

	End-of-life care	
Emotional	Visiting	304
needs and	Activities and entertainment	199
wellbeing	Spiritual care	14
	All other therapies	8
Other	General comments	321
	Dignity, respect and privacy	65

Open-ended questions

The open ended questions asked of relatives and friends were:

- Q46. Overall, is there anything particularly good about the care in the nursing home?
- Q47. Is there anything that could be improved?
- Q48. Do you have any comments about how the COVID-19 pandemic affected the care provided to residents or your overall experience with the nursing home during that period?
- Q49. Do you have any other comments or suggestions?

Overall, is there anything particularly good about the care in the nursing home?

For question 46, 'overall, is there anything particularly good about the care in the nursing home?', most comments related to the staff relationship (376), quality of care (240), physical environment (including cleanliness) and equipment (172), communication with relative or friend (112), and general staff - cleaners/security/catering (80) themes.

Table 8 Overview of responses to question 46

Theme	Feedback received	Illustrative Quote
-------	-------------------	--------------------

Staff	Comments referred to nursing	"In general, staff are
Relationship	home staff as kind, caring, helpful	caring and kind and treat
	and attentive. Some comments	my father with dignity and
	also noted concerns over staff	compassion. The home is
	turnover.	well kept."
Quality of Care	Comments in the quality of care	"Very happy with the care
	theme referred to satisfaction with	
		given to my father. Carers are fantastic."
	the care provided and how well residents' needs were met.	are fantastic.
Dhuaiaal		"The howe is also a ord
Physical	Comments were generally very	"The home is clean and
environment	positive about the cleanliness,	fresh. Not clinical -
(including	homeliness, atmosphere and	wooden floors (not tiles).
cleanliness) and	design of the nursing home.	Lovely bathrooms. Happy
equipment		patients. Good food. Nice
	-	garden. Nice staff."
Communication	Comments in the communication	"They are very caring and
with relative or	with relative or friend theme	treat the patient with
friend	referred to the accessibility and	dignity and love. Will
(designated	availability of staff, and how	always contact me if he is
representative)	informed they were about the	not well or has a problem.
	resident	If he needs to see the
		doctor I will always get a
		follow up call to give me
		the results."
General staff	Comments in the general staff	"Great effort is made to
	theme included references to	get to know my loved one
	specific staff members, as well as	and what they like. Prior to
	comments about how staff in a	COVID all staff from
	wide variety of roles impacted their	laundry to housekeeping,
	experience of the nursing home.	in addition to care and
		nursing, dropped in
		regularly to chat. Any
		request from family is
		acted on promptly".
L	1	

Is there anything that could be improved?

For question 47, *'is there anything that could be improved?*' most comments related to the physical environment (including cleanliness) and equipment (108), general (105), staff availability & responsiveness (87), activities and entertainment (81), communication with designated representative (72) themes.



Table 9 Overview of responses to question 47

Theme	Feedback received	Illustrative Quote
Physical environment	Comments in the physical environment theme included specific suggestions about staffing, skills needed, structural issues in the nursing home, activities, facilities and communication issues.	"Sitting room to be returned to residents - it was a staff room during COVID."
Staff availability and responsiveness	Comments in the staff availability and responsiveness theme related to staffing issues.	"Staff numbers - not enough staff working on shifts puts pressure on staff."
Activities and entertainment	Comments in the activities and entertainment theme referred to activities that meet the interests and abilities of their resident or friend.	"More specific activities for clients with severe memory problems and dementia. I feel some of these clients are isolated and left out of activities. More 'one on one' care, if needed."
Communication with designated representative	Comments in the communication with designated representative theme referred to timely communication, and communication that recognised the individual needs and circumstances of the resident	"Phone contact is difficult. I can only call between certain hours. [Resident Name] hearing is poor and team make an effort but signal is poor. It would be nice to have video call."

Experiences during the COVID-19 pandemic

For question 48, 'do you have any comments about how the COVID-19 pandemic affected the care provided to residents or your overall experience with the nursing home during that period?', most comments related to the COVID and vaccine-related comments (338), visiting (187), communication with designated representative (129), and quality of care (129).

Table 10 Overview of responses to question 48

Theme	Feedback received	Illustrative Quote
-------	-------------------	--------------------

COVID-19 and vaccine-related comments	Comments in the COVID-19 and vaccine-related comments theme referred to the difficulty and stress experienced during times of increased restrictions.	"Covid restrictions - visitors were checked - temperatures taken. Sanitisers were in place. Masks were compulsory. Rules and regulations in place at all times. Overall very good."
Visiting	Comments in the visiting theme referred to restrictions, precautions taken, and alternative arrangements made to accommodate keeping in touch with their relative or friend.	"It was really tough, couldn't visit for a long time, for a person living in a nursing home it had to be difficult. I remember my mother saying it wasn't easy not seeing anyone or having a chat. We got over it thank god."

Other comments or suggestions

For question 49, '*do you have any other comments or suggestions?*' most comments related to the general (128), staff relationship (59), quality of care (54), physical environment (53), communication with designated representative (42), and activities and entertainment (42) themes.



Table 11 Overview of responses to question 49

Theme	Feedback received	Illustrative Quote
Staff relationship	Comments in the staff relationship theme referred to the impact of kind, caring and helpful staff on residents.	"To be able to give time to residents as older people need someone to talk to/or just be there comforting word, smile, shake hand, read to them etc."
Quality of care	Comments in the quality of care theme covered topics including criticisms about the physical health and wellbeing of residents and the lack of stimulation they received in the nursing home.	I am very pleased overall with the care both medically and personally that my brother receives. He seems to be very happy there.
Physical environment	Comments in the physical environment theme referred to things that relatives and friends said should be upgraded (fittings, fixtures and furnishings), as well as facilities they suggested would be beneficial	"More openness to a garden, a courtyard is not enough for a relatively young person who loves nature and doesn't need physical protection or restriction. This would provide a huge interest and solace to my relative who would love birds, birdsong; access to planting; animals They could be provided with a little plot to plant something, or an animal to pet."
Communication with designated representative	Comments in the communication with designated representative theme related to the value of clear and consistent communication with relatives or friends in relation to a range of aspects including their health, wellbeing, and the activities they engage in	"I would welcome an opportunity say once a year to speak with a member of the care/medical staff about relatives' wellbeing."
Activities and entertainment	Comments in the activities and entertainment theme referred to the availability of interesting and	"As already advised activities should be 7 days a week not just Monday to Friday."

appropriate activities for	
residents in nursing homes.	



Chapter 6: Conclusion

Overall, relatives and friends who participated in the survey said they had either a good or a very good experience with the nursing home. Relatives and friends were particularly positive about knowing who to contact in the nursing home, feeling welcomed when visiting, cleanliness of the nursing home, and the assistance and protection staff provide to residents.

Most relatives and friends said that they had confidence and trust in the staff in the nursing home, they felt that the resident was treated with respect and dignity by the staff who care for them, and the staff in the nursing home were knowledgeable about the care and support the resident needed. These areas were also associated with a more positive overall experience for the relative or friend. When asked to describe in their own words what was particularly good about the care in the nursing home, relatives or friends commented on the quality of care and staff relationships.

However, 13% of relatives and friends said they had a fair-to-poor experience, and scores for the individual themes indicate that there is room for improvement in particular aspects of care. The lowest-scoring questions for relatives and friends related to awareness of how to contact advocacy organisations, residents' choice in how they spent their time, encouragement of residents' independence, and having a private place to talk during visits.

Relatives and friends had poorer overall experiences when they said that staff in the nursing home did not support the emotional wellbeing of the resident enough, when the resident's belongings and personal items were not safe in the nursing home, and when the resident was not supported to take part in activities that interested them. When asked to describe in their own words what could be improved, relatives or friends talked about the physical environment, and staff availability and responsiveness.

What happens next?

Nursing homes can use the survey results to develop plans on how they will respond to the findings. All nursing homes, public, private and voluntary that participated have been invited to share initiatives they have undertaken in response to the findings of the survey. These will be available on <u>www.yourexperience.ie</u> from November 2022. Extensive engagement has taken place to support participating nursing homes, and organisations that represent them, to understand and use the findings of the survey.

The Department of Health will use the findings to help inform the development of policy and strategy in relation to nursing home care as appropriate. Finally, the findings of the survey will inform national standards and HIQA's regulation of nursing homes.

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A high level overview report of the national findings and more detailed reports on the findings from residents can be accessed on www.yourexperience.ie.



Appendix 1- Membership of the National Nursing Home Experience Survey governance groups

National Care Experience Programme Steering Group

Phelim Quinn	Chief Executive Office, HIQA, (Chairperson)
(Chair) ¹⁷	
Rachel Flynn	Director of Health Information and Standards, HIQA
Angela	Deputy National Director of Acute Hospitals, HSE
Fitzgerald ¹⁸	Chief Executive Officer, HIQA (Chair from March 1, 2022)
Niamh Bernard ¹⁹	Principal Officer, Department of Health
Patrick Creedon ²⁰	Principal Officer, Department of Health
Marita Kinsella ²¹	Director, National Patient Safety Office, Department of
	Health
Louise Loughlin	National Manager, National Advocacy Service
Mary McGeown	Head of Patient Safety Surveillance & Performance Unit,
	Department of Health
Roisin O'Leary	Senior Patient Advocate, Sage Advocacy
-	
Brian Place ²²	Patient representative
Joe Ryan	National Director of Operational Performance, HSE
Liam Woods	National Director of Acute Hospitals, HSE

¹⁷ Until December 2021

¹⁸ Appointed CEO of HIQA and Chair of the Steering Committee in March 2022.

¹⁹ From April 2022

²⁰ Until January 2022

²¹ Until January 2022

²² The late Dr Brian Place was a patient representative on the steering group since its inception in 2017. He sadly passed away in November 2021.

Rachel Flynn	Director of Health Information and Standards, HIQA
	(Chairperson)
Tracy O'Carroll	Head, National Care Experience Programme, HIQA
,	,
Celine Clarke	Head of Advocacy and Communications, Age Action Ireland
	Thead of Advocacy and Communications, Age Action Ireland
Cara Bagan	Rusiness Manager, Operational Parformance and
Cara Regan	Business Manager, Operational Performance and
Downey ²³	Integration, HSE
Martina Duffy ²⁴	Project Lead, National Office Older People Operations, HSE
Conor Foley	Senior Analyst, National Care Experience Programme, HIQA
Deirdre Hyland	Patient Safety Surveillance Officer, Department of Health
Ultan Hynes ²⁴	Head of Service, Nursing Home Support Scheme, HSE
Helen Lindsey	National Operations Manager, Older Person's Services,
	HIQA
Sarah Lennon	Executive Director, Sage Advocacy
Poioin Maguiro	Specialist National Operations Office Services for Older
Roisin Maguire	Specialist National Operations Office Services for Older
	People, HSE
Nuala O'Reilly	Assistant Principal Officer, Older Persons Policy
	Development Unit, Department of Health
Amanda Phelan	Professor in Ageing & Community Nursing, School of
	Nursing & Midwifery, Trinity College Dublin
A:L 25	
Aileen Killeen ²⁵	Senior Operations Manager, Partnering with Patients,
	Office of the National Director
	Operational Performance & Integration, HSE

National Nursing Home Experience Survey, Programme Board:

²³ Until August 2022
²⁴ Until February 2022
²⁵ From September 2022



Tracy O' Carroll	Head, National Care Experience Programme, HIQA
Tina Boland	Project Lead, National Care Experience Programme, HIQA
Conor Foley	Senior Analyst, National Care Experience Programme, HIQA
Catriona Keane ²⁶	Project Officer, National Care Experience Programme, HIQA
Lisa Ann Kennedy	Analyst, National Care Experience Programme, HIQA
Trudi Mason	Project Officer, National Care Experience Programme, HIQA
Róisín Murphy	Research Officer, National Care Experience Programme,
	HIQA
Donnacha	Project Officer, Information management, National Care
O'Ceallaigh	Experience Programme, HIQA
Alice Reetham	Project Officer, National Care Experience Programme, HIQA
Geneviéve Ruiz-	Research Officer, National Care Experience Programme,
O'Sullivan	HIQA

National Nursing Home Experience Survey Team

²⁶ Until December 2021

Appendix 2 - What nursing homes participated in the 2022 National Nursing Home Experience Survey?

National profile of nursing homes.

Province		Provider ty	ovider type breakdown (N)		Bed occupancy range breakdown N			
Province		HSE	Private	Voluntary	<u><</u> 20 beds	21-40 beds	41-99 beds	<u>></u> 100 beds
Connacht	95 (16.6%)	21 (3.7%)	74 (13.0%)	0	6 (1.1%)	33 (5.8%)	54 (9.5%)	2 (0.4%)
Dublin	111 (19.4%)	12 (2.1%)	94 (16.5%)	5 (0.9%)	3 (0.5%)	17 (3.0%)	60 (10.5%)	31 (5.4%)
Leinster	148 (25.9%)	24 (4.2%)	117 (20.5%)	7 (1.2%)	10 (1.8%)	34 (6.0%)	93 (16.3%)	11 (1.9%)
Munster	177 (31.0%)	42 (7.4%)	131 (22.9%)	4 (0.7%)	3 (0.5%)	71 (12.4%)	89 (15.6%)	14 (2.5%)
Ulster	40 (7.0%)	14 (2.5%)	26 (4.6%)	0	2 (0.4%)	14 (2.5%)	23 (4.0%)	1 (0.2%)
Total	571	113 (19.8%)	442 (77.4%)	16 (2.8%)	24 (4.2%)	169 (29.6%)	319 (55.9%)	59 (10.3%)

Profile of nursing homes invited to take part.

Province		Provider t	Provider type breakdown (N)		Bed occupancy range breakdown (N)			
Province		HSE	Private	Voluntary	<u><</u> 20 beds	21-40 beds	41-99 beds	<u>></u> 100 beds
Connacht	13 (18.1%)	3 (4.2%)	10 (13.9%)	0	1 (1.4%)	5 (6.9%)	6 (8.3%)	1 (1.4%)
Dublin	13 (18.1%)	2 (2.8%)	10 (13.9%)	1 (1.4%)	0	3 (4.2%)	7 (9.7%)	3 (4.2%)
Leinster	19 (16.4%)	2 (2.8%)	15 (20.8%)	2 (2.8%)	2 (2.8%)	4 (5.6%)	11 (15.3%)	2 (2.8%)
Munster	23 (31.9%)	3 (4.2%)	18 (25%)	2 (2.8%)	0	6 (8.3%)	15 (20.8%)	2 (2.8%)
Ulster	4 (5.6%)	2 (2.8%)	2 (2.8%)	0	0	2 (2.8%)	2 (2.8%)	0
Total	72 (100%)	12 (16.7%)	55 (76.4%)	5 (6.9%)	3 (4.2%)	20 (27.8%)	41 (56.9%)	8 (11.1%)



Profile of nursing homes who participated.

Province Province		Provider t	Provider type breakdown (N)		Bed occupancy range breakdown (N)			
		HSE	Private	Voluntary	<u><</u> 20 beds	21-40 beds	41-99 beds	<u>></u> 100 beds
Connacht	11 (20.8%)	3(5.7%)	8 (15.1%)	0	0	5 (9.4%)	5 (9.4%)	1 (1.9%)
Dublin	8 (15.1%)	2 (3.8%)	5 (9.4%)	1 (1.9%)	0	2 (3.8%)	3 (5.7%)	3 (5.7%)
Leinster	13 (24.5%)	2 (3.8%)	10 (18.9%)	1 (1.9%)	1 (3.8%)	3 (5.7%)	7 (13.2%)	2 (3.8%)
Munster	17 (32.1%)	3 (5.7%)	12 (22.6%)	2 (3.8%)	0	6 (11.3%)	9 (17%)	2 (3.8%)
Ulster	4 (7.5%)	2 (3.8%)	2 (3.8%)	0	0	2 (3.8%)	2 (3.8%)	0
Total	53 (100%)	12 (22.6%)	37 (69.8%)	4 (7.5%)	1 (1.9%)	18 (34%)	26 (49%)	8 (15.1%)

Appendix 3 – A technical note on analyses and interpretation

Preliminary note

Please note that values in figures do not always add up to 100% exactly. This is due to rounding.

Scoring methodology

The scores for the survey were calculated by grouping survey questions into six themes: moving in to the nursing home, caregivers and staff in the nursing home, spending time in the nursing home, the living environment in the nursing home, person-centred care, and food and nutrition. Scores are presented for individual questions making up a theme. The responses to all questions in each theme were also summarised to form overall scores ranging from 0-10.

The National Nursing Home Experience Survey scoring methodology is based on the methodology adopted by the Care Quality Commission on behalf of the National Health Service (NHS) in England, subsequently used in the National Inpatient Experience Survey and National Maternity Experience Survey.²⁷

Below is an example of how response options were converted into scores. It should be noted that only evaluative questions could be scored, that is questions that assessed an actual experience of care. Routing or demographic questions were not scored. More 'positive' answers were assigned higher scores than more 'negative' ones. In the example, 'No' was given a score of 0, 'Yes, sometimes' was given a score of 5 and 'Yes, always' was given a score of 10. The last response option, 'Don't know' was categorised as 'missing'. It was not scored as it cannot be evaluated in terms of best practice.

Example of a scored question

- Q9. Do you have enough privacy in this nursing home?
 - o Yes, always (10)
 - o Yes, sometimes (5)
 - o No (0)

²⁷ Care Quality Commission. NHS Patient Survey Programme: Survey Scoring Method 2015.



o Don't know (M)

The following table below shows how scores were calculated for a specific question. In this example, the scores of five respondents are presented. The score for Question 9 of the residents' survey is calculated by adding the scores in the right hand column (10+10+5+0+5), before dividing them by the number of people who responded to this question (30/5=6). Thus, the average score for Question 9 is 6 out of 10.

Q9. Do you have enough privacy in this nursing home?			
Respondent	Score		
1	10		
2	10		
3	5		
4	0		
5	5		
Sum of scores	30		

Scores for the themes (scales) were constructed by calculating the average scores for all questions belonging to that stage.

Comparing groups – When is a difference a 'real' difference?

Statistical tests were carried out to examine if there were significant differences in reported experience across different groups (that is by sex, age group, region, nursing home size or provider type).

A 'z-test' was used to compare experience data at the 99% confidence level. A z-test is a statistical test used to examine whether two population mean scores are different when the variances are known and the sample size is large. A statistically significant difference means it is very unlikely that results were obtained by chance alone if there was no real difference. Therefore, when a score is 'higher than' or 'lower than' the national average, this is highly unlikely to have occurred by chance.

Results on questions comparing two groups of relatives and friends (e.g., males and females) were compared using a 't-test' at the 99% confidence level. A t-test is a statistical test used to compare the average scores of two groups. A statistically significant difference means it is very unlikely that results were obtained by chance alone if there was no real difference. Therefore, when a score is 'higher than' or 'lower than' a comparison group, this is highly unlikely to have occurred by chance.

The National Nursing Home Experience Survey technical report, will be available at <u>http://www.yourexperience.ie/</u>, and will provide details on all aspects of the analyses, including response rates, mapping of questions to reporting themes, computation of scores, and statistical comparisons.

Identifying higher and lower-scoring questions

Figure 12 shows the average score out of 10 for each question on the survey for relatives or friends, and how strong a relationship it has with their overall experience. The vertical axis shows the correlation of each question with overall experience, the horizontal axis shows each question's score out of 10. Questions with high average scores out of 10 and a strong relationship with overall experience are highlighted in blue. Questions with lower scores out of 10 and strong relationships with overall experience are highlighted in orange.



Figure 2 Overall designated representative experience map

Survey analysis and reporting

The survey data was analysed by the National Nursing Home Experience Survey team based in the Health Information and Quality Authority (HIQA). Quantitative survey data was analysed using the statistical package SPSS (Version 24).

The responses to the open-ended questions were transcribed and anonymised. All references to names, places, nationalities, and other identifying information were removed from comments.

Appendix 4 – Questions and Response Options from the National Nursing Home Experience Survey Questionnaires

Questions	Questions and Response Options from Designated Representative Questionnaire				
Question	Question Text	Answers	Theme		
BQ1	Is the nursing home a homely place to live?	Yes, definitely Yes, to some extent No	The living environment in the nursing home		
BQ2	Are you as involved as you would like to be in decisions about the care and support your relative or friend receives, if they want you to be involved?	Yes, definitely Yes, to some extent No My relative/friend does not want me to be involved	Person-centred care		
BQ3	Are your relative's or friend's plans and wishes for the future listened to and supported?	Yes, definitely Yes, to some extent No Don't know	Your experience of caregivers and staff in the nursing home		
BQ4	Overall, do you have confidence and trust in the staff who care for your relative or friend in the nursing home?	Yes, always Yes, sometimes No Don't know	Your experience of caregivers and staff in the nursing home		
BQ5	Overall, do you feel your relative or friend is treated with respect and dignity by the staff who care for them?	Yes, always Yes, sometimes No Don't know	Your experience of caregivers and staff in the nursing home		
BQ6	Does your relative or friend have enough privacy in the nursing home?	Yes, always Yes, sometimes No Don't know	The living environment in the nursing home		
BQ7	Are your relative's or friend's dietary needs and choices taken into account in the food provided?	Yes, always Yes, sometimes No Don't know	Food and Nutrition		
BQ8	Do staff in the nursing home keep your relative or friend safe and protect them from harm?	Yes, definitely Yes, to some extent No Don't know	Your experience of caregivers and staff in the nursing home		
BQ9	Do you know who to contact in the nursing home if you have any questions about your relative or friend?	Yes No	Your experience of caregivers and staff in the nursing home		
BQ10	If you need to get information from the nursing home, do you receive it in a timely manner?	Yes, always Yes, sometimes No	Moving into the nursing home		

		I haven't requested information from the nursing home	
BQ11	Before your relative or friend moved in, did you receive enough information about the nursing home?	Yes, definitely Yes, to some extent No Don't know/can't remember	Your experience of caregivers and staff in the nursing home
BQ12	Are the staff in the nursing home knowledgeable about the care and support your relative or friend needs?	Yes, definitely Yes, to some extent No Don't know	Your experience of caregivers and staff in the nursing home
BQ13	If there is a change to your relative's or friend's condition, does the nursing home keep you updated?	Yes, definitely Yes, to some extent No Don't know	Your experience of caregivers and staff in the nursing home
BQ14	Do staff in the nursing home support the emotional wellbeing of your relative or friend?	Yes, definitely Yes, to some extent No They do not need support with this	Your experience of caregivers and staff in the nursing home
BQ15	Does your relative or friend get to decide how they spend their day?	Yes, always Yes, sometimes No Don't know	Spending time in the nursing home
BQ16	Is your relative or friend supported to take part in activities that interest them?	Yes, always Yes, sometimes No Don't know	Spending time in the nursing home
BQ17	When national restrictions are not in place (such as those relating to COVID-19), does the nursing home offer enough opportunities for family and friends to visit residents?	Yes, definitely Yes, to some extent No Don't know	Spending time in the nursing home
BQ18	Besides visits, are you enabled to stay in contact with your relative or friend?	Yes, definitely Yes, to some extent No	Spending time in the nursing home
BQ19	When you visit your relative or friend, can you find a place to talk to them in private, other than their bedroom?	Yes, always Yes, sometimes No Don't know I have not been able to visit	Spending time in the nursing home
BQ20	When you visit, are you made to feel welcome by staff?	Yes, always Yes, sometimes No I have not been able to visit	Spending time in the nursing home
BQ21	When national restrictions are not in place (such as those relating to COVID-19), are you able to join your relative or friend in marking special occasions or milestones?	Yes, definitely Yes, to some extent No Not relevant to my situation	Spending time in the nursing home
BQ22	In your opinion, how clean is the nursing home?	Very clean Fairly clean Not very clean Not at all clean Don't know	The living environment in the nursing home
BQ23	If they have the capacity, does your relative or friend have as much control as they wish over their personal finances?	Yes, definitely Yes, to some extent No They do not have the capacity	The living environment in the nursing home
BQ24	Are your relative's or friend's belongings and personal items safe in the nursing home?	Yes, definitely Yes, to some extent No Don't know	The living environment in the nursing home
BQ25	Does your relative or friend receive help when they need it in carrying out daily routines?	Yes, always Yes, sometimes No They don't require any help	Person-centred care

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BQ26	Can your relative or friend choose how they carry out their daily routines?	Yes, definitely Yes, to some extent No Don't know	Person-centred care
BQ27	Do the staff support your relative or friend in practicing their religious or spiritual needs (things like talking, praying, quiet time or access to a religious or spiritual leader)?	Yes, always Yes, sometimes No Not relevant	Person-centred care
BQ28	Is your relative or friend encouraged to be as independent as they are able to be?	Yes, always Yes, sometimes No Don't know	Person-centred care
BQ29	Do you know how to contact organisations that can support your relative or friend to express their views and wishes, and to help them to assert their rights?	Yes, definitely Yes, to some extent No Not relevant to my situation	Person-centred care
BQ30	If you wish to give feedback or make a complaint about the care provided in the nursing home, do you know how to do so?	Yes No	Person-centred care
BQ31	If you have ever made a complaint, did the staff respond to it promptly and appropriately?	Yes No I have not needed to make a complaint	Person-centred care
BQ32	Is your relative or friend offered a choice of food?	Yes, always Yes, sometimes No Don't know	Food and nutrition
BQ33	Does your relative or friend get enough help from staff to eat their meals?	Yes, always Yes, sometimes No My relative/friend does not need support to eat meals Don't know	Food and nutrition
BQ34	Does your relative or friend get enough water to drink in the nursing home?	Yes, always Yes, sometimes No Don't know	Food and nutrition
BQ35	Can your relative or friend get snacks outside of mealtimes if they want to?	Yes, always Yes, sometimes No Don't know	Food and nutrition
BQ36	Overall, how would you rate your experience of this nursing home? Select a number between 0 (very poor experience) and 10 (very good experience).	0, 1, 2, 3, 4, 5, 6, 7, 8, 9, 10	Overall
BQ37	In total, about how long has your relative or friend lived in this nursing home?	Less than 6 months 6 months to less than 1 year More than 1 year, but less than 2 years More than 2 years, but less than 5 years More than 5 years Don't know	About your relative or friend
BQ38	Why does your relative or friend live in this nursing home?	(Comment)	About your relative or friend
BQ39	In what year was your relative or friend born?	(Select Year)	About your relative or friend
BQ40	Does your relative or friend share a bedroom with another person in this nursing home? (For example, a multi-occupancy room)	Yes No	About your relative or friend
BQ41	Please could you indicate which ethnic group your relative or friend belongs to:	White: Irish Irish Traveller Any other white background Black or Black Irish: African Any other black background Asian or Asian Irish:	About your relative or friend

BQ42	What is your relationship to the resident?	Chinese Indian/Pakistani/Bangladeshi Another Asian background Other, including mixed group/background: Arabian Mixed, please specify: Other, please write your ethnic group here: Prefer not to say Husband / Civil Partner / Partner Wife / Civil Partner / Partner Son / Daughter	About you
		Brother / Sister Son in Law / Daughter in law Parent Other relative Friend Neighbour Staff in care home Other:	
BQ43	Are you:	Male Female Other Prefer not to say	About you
BQ44	In what year were you born?	(Select Year)	About you
BQ45	Please could you indicate which ethnic group you belong to:	White: Irish Irish Traveller Any other white background Black or Black Irish: African Any other black background Asian or Asian Irish: Chinese Indian/Pakistani/Bangladeshi Another Asian background Other, including mixed group/background: Arabian Mixed, please specify: Other, please write your ethnic group here: Prefer not to say	About you
BQ46	Overall, is there anything particularly good about the	(Comment)	Free-text responses
	care in the nursing home?	(Comment)	
BQ47	care in the nursing home? Is there anything that could be improved?	(Comment) (Comment)	Free-text responses
	care in the nursing home?	(Comment)	