



Overview of Findings 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 been undertaken.

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.





53

NURSING HOMES

12 HSE-RUN, 37 PRIVATE,
4 VOLUNTARY



718

RESIDENTS



943

RELATIVES AND FRIENDS

90%



OF RESIDENTS HAD A **GOOD** OR A **VERY GOOD** EXPERIENCE

Things that were associated with a **good** overall experience:

- confidence and trust in the staff who cared for them
- staff being knowledgeable about the care and support they needed
- staff checking in with them to see if they needed anything.

10%



OF RESIDENTS HAD A **FAIR-TO-POOR** EXPERIENCE

Things that were associated with a **poor** overall experience:

- not liking the food served
- not having a staff member to talk to about their worries and fears
- not being as involved as they wanted to be in decisions about their care and support.

87%



OF RELATIVES AND FRIENDS HAD A **GOOD** OR A **VERY GOOD** EXPERIENCE

Things that were associated with a **good** overall experience:

- confidence and trust in the staff who cared for their relative or friend
- their relative or friend being treated with respect and dignity
- staff being knowledgeable about the care and support that the resident needs.

13%



OF RELATIVES AND FRIENDS HAD A **FAIR-TO-POOR** EXPERIENCE

Things that were associated with a **poor** overall experience:

- staff in the nursing home not supporting the emotional wellbeing of the resident
- the resident's belongings and personal items not being safe
- the resident not being supported to take part in activities that interested them.

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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.

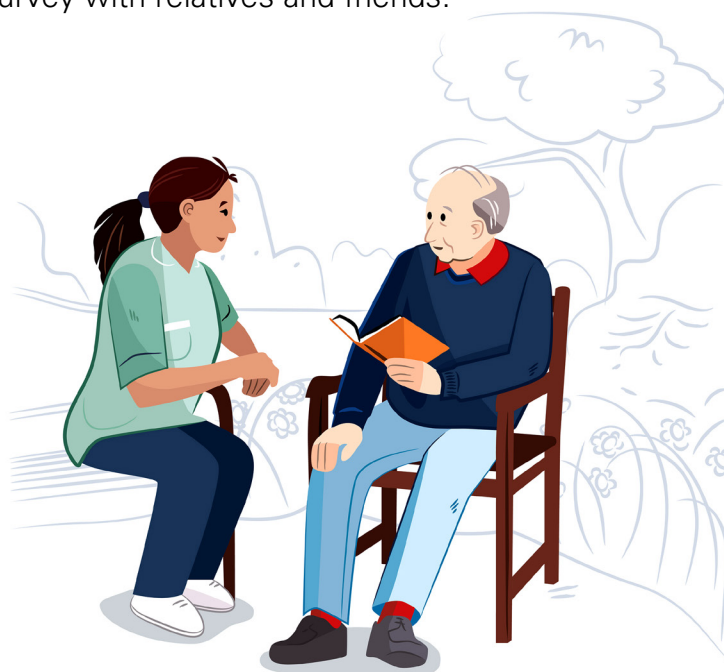
Find out more at www.youexperience.ie.

About this Report

This report provides a high level overview of the findings from 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.

This report presents findings from both the perspective of the residents and their relatives and friends. It includes information on overall experience ratings and highlights questions where there was a strong relationship with the reported overall experience rating. It provides an overview of findings under the thematic areas that questions were grouped under and notes the highest and lowest scoring questions under each theme. Finally it includes sample comments made by residents and relatives and friends in response to the open-ended questions. Comments included reflect both positive experiences and areas for improvement. 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 details the methodology and findings of the survey with relatives and friends.



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-final-report/>. 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.

Introduction

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 that reflected the national profile of nursing homes: 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 second questionnaire was developed for relatives or friends of residents ('designated representatives') to understand their experiences of having a relative or a friend living in a nursing home, and their experiences during the COVID-19 pandemic. Relatives or friends had the option to complete a hardcopy survey questionnaire or to complete the survey online. In total 1,579 relatives or friends were invited to participate in the survey, and 943 took part. 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.

What were the main findings of the survey for residents?

Most residents said they had good or very good overall experience in their nursing home (90.3%).

Residents were particularly positive about the living environment in the nursing home and the staff and caregivers who cared for them.

Residents gave a higher rating of their overall experience² when they had confidence and trust in the staff who cared for them, when the staff were knowledgeable about the care and support they needed, and when staff checked in with them often enough to see if they needed anything.

9.6% of residents said that they had a fair-to-poor experience in their nursing home. While this is a minority of residents, this finding is nevertheless of great importance. For residents, the nursing home is where they live. A negative overall experience with the nursing home could have a significant impact on their comfort and wellbeing. Residents gave less positive feedback about the experience of moving into the nursing home, access to advocacy organisations, and of person-centred care. Residents said they had a poorer overall experience when they did not like the food, when there was no staff member that they felt they could talk to about their worries or fears, and when they were not involved in decisions about the care and support they receive.

There were no significant differences in the overall experience of residents based on the size or provider type of the nursing home. However, there were differences for two of the six themes addressed in the survey. Compared to the national average, residents in nursing homes with 40 or fewer beds reported a more positive experience with caregivers and staff in the nursing home and with the living environment in the nursing home³.

2 Measured by Question 42 on the questionnaire for residents.

3 Residents in nursing homes with 40 or fewer beds rated the 'staff and caregivers' theme at 9.2 out of 10, compared with the national average of 8.9 out of 10. Residents in nursing homes with 40 or fewer beds rated the 'living environment' theme at 9.2 out of 10, compared with the national average of 9 out of 10. For more details, see the National Nursing Home Experience report on Resident Experiences, available at www.yourexperience.ie.



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

Most relatives and friends (87%) said that they had a good or very good overall experience with the nursing home.

Relatives and friends gave a higher rating of their overall experience⁴ with the nursing home when they said that they had confidence and trust in staff, the resident was treated with dignity and respect, and staff were knowledgeable about their needs.

13% of relatives and friends said that they had a fair-to-poor experience with the nursing home. Relatives and friends had a worse overall experience when residents' emotional wellbeing was not supported, when they weren't provided with interesting activities, or when they did not think that residents' belongings were kept safe in the nursing home.

Compared to the national average, relatives and friends of residents in nursing homes with 40 or fewer beds said they had a more positive overall experience with the nursing home⁵. 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 home⁶.

4 Measured by Question 36 on the questionnaire for relatives and friends.

5 92.4% of relatives or friends of those in a nursing home with 40 or fewer beds had a good or very good overall experience, compared with the national average of 87%.

6 For more details, see the National Nursing Home Experience report on the Experiences of Relatives and Friends, available at www.yourexperience.ie.

Methodology

How was the survey conducted and who took part?

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.

The 53 participating nursing homes had a combined maximum occupancy of 3,105 residents.

In total, 1,055 residents were identified by the nursing homes as having the functional ability to participate in the survey. Of these, 718 residents (68%) took part in a face to face interview about their experiences. Eligible participants were those with the physical, psychological, cognitive, and social capabilities required to take part in the interview. Nursing homes were encouraged to be as inclusive as possible when assessing the ability of residents to participate. In order to encourage participation, residents could invite someone to accompany them in the interview. In addition, a brief 10-question interview was developed for those unable to complete the full interview. Of those who were invited but did not take part, 84 declined to participate on the day of the interview, 218 were unwell and 35 passed away before the scheduled interview.

The average age of participating residents was 83.4 years. The majority of residents who participated were aged between 80 and 99 years (70%). In total, 67% of the participants were female (483), and 32% were male (231). Four residents described their gender as 'other' or did not disclose their gender.

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 took part in the survey. Relatives and friends were free to decline participation prior to being sent an invitation if they wished. The process was administered by nursing homes, who were asked to distribute information packs to one relative or friend of each resident to inform them of the survey and ask them to provide their details so they could be invited. In total 1,579 relatives or friends agreed to provide their contact details to participate in the survey, and 943 actually 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%).

For more details on the survey participants, see the accompanying reports on www.yourexperience.ie.



How were survey responses analysed?

Responses to 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 1 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, as assessed by Question 42 for residents and Question 36 for relatives and friends. 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 approach⁷ was used to analyse the comments received in response to the open-ended questions where participants described their experiences. This approach involves multiple analysts reviewing survey comments, identifying a framework of key concepts and themes identified within the comments, then applying 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.

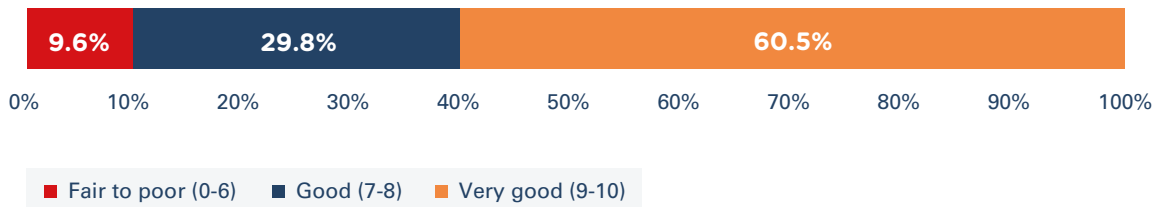
⁷ Gale NK, Heath G, Cameron E, Rashid S, Redwood S. Using the framework method for the analysis of qualitative data in multi-disciplinary health research. *BMC Medical Research Methodology*. 2013;13(1):117.

What did residents in nursing homes say about their overall experience?



The survey asked residents to rate their overall experience in their 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 from residents was 8.6 out of 10. Most residents said that they had a good or very good overall experience (90.3%), while 9.6% said that they had a fair-to-poor experience.



What questions were residents asked?



Residents were asked questions about six themes. Table 1 displays the themes and number of questions for each theme in the survey.

Table 1 - Themes, description of themes, and number of questions for each theme

Theme	Description	Number of questions
Moving in to the nursing home	Experiences of moving into the nursing home, including involvement in the decision to move, receiving information and support prior to moving, staying in contact with family and friends upon moving into the nursing home.	3
Caregivers and staff in the nursing home	Experience with caregivers and staff in the nursing home, including perceptions of staff, treatment by staff, emotional support and staff behaviours.	6
Spending time in the nursing home	Experiences of day-to-day life in the nursing home, including choice in how to spend the day, support to engage in activities, receiving visitors and marking special occasions.	7
The living environment	Experiences of the living environment in the nursing homes including cleanliness, homeliness, safety of personal belongings, control over finances and privacy.	5
Person-centred care	Experiences of person-centred care, including involvement in care and support, independence, autonomy, giving feedback, making complaints and advocacy.	14
Food and nutrition	Experiences of food and nutrition in the nursing home, including food preferences, dietary requirements, choice of meals, support to eat, adequate hydration, and access to snacks and drinks outside of mealtimes.	6

What did residents say about different aspects of their lives in nursing homes?

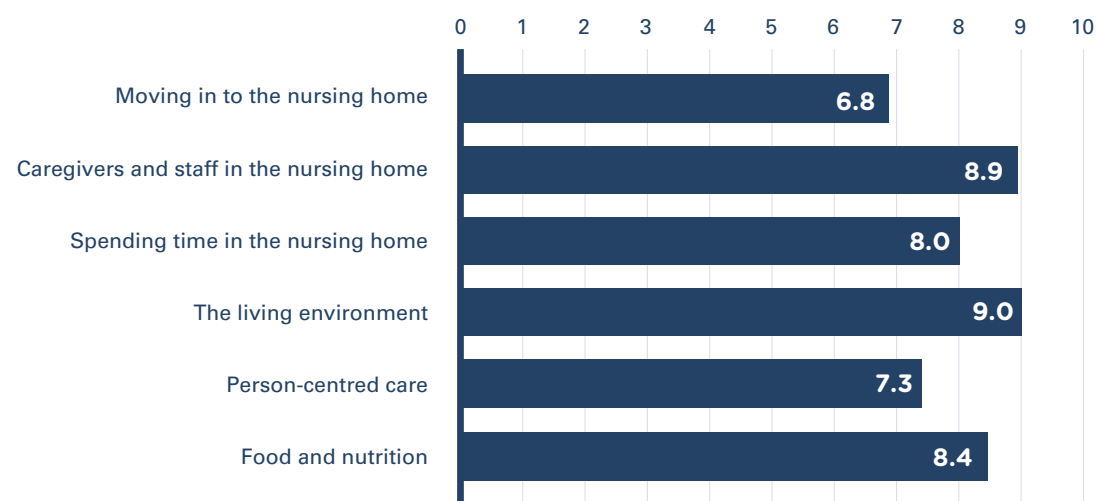


The survey asked residents questions about their experiences of life in the nursing home under six different themes:

- ➔ moving in to the nursing home
- ➔ caregivers and staff in the nursing home
- ➔ spending time in the nursing home
- ➔ the living environment
- ➔ person-centred care
- ➔ food and nutrition

Figure 1 shows the scores out of ten for each theme.

Figure 1 - Scores out of ten for residents for each survey theme



The five highest-scoring questions on the survey show that most residents say their basic needs are being met and the staff are treating them well. Most residents said that they always got enough fresh water to drink, that their nursing home was very clean and that they always have enough privacy in the nursing home. Most residents also said that staff definitely kept them safe and protected them from harm, and always treated them with respect and dignity.

The five lowest-scoring questions on the survey related to involvement and being informed. Most residents said that they did not know how to access advocacy services or organisations that could help them to express their views and wishes, and to help them to assert their rights⁸. Advocacy organisations provide both direct and indirect support to residents, and awareness of these indirect supports appears to be limited. Some residents said that they did not receive enough information about what life would be like in the nursing home before they moved in. Some also said that they were not as involved as they would like to be in: decisions about the care and support they received, the decision to move into the nursing home, and planning ahead for any changes in their circumstances and their preferred care in the future.

Additional analysis was undertaken to identify the questions that had the strongest relationship with overall experience. This helps to identify the most important areas to focus on to improve the experiences of residents and their relatives and friends. The results of this analysis are shown in the next section.

⁸ Residents were prompted with examples of advocacy organisations using the following wording “for example, the Patient Advocacy Service, Sage Advocacy or Age Action Ireland.”

What areas should be focused on to improve the experiences of all residents in nursing homes?



The section presents the questions in the survey that had the strongest relationships to residents' overall experience.

Questions that had a high score out of 10 and a strong relationship with residents' overall experience were identified as areas of good experience, while questions that had lower scores out of 10 and a strong relationship with overall experience were identified as areas for improvement.

Residents reported a good overall experience when:

- they had confidence and trust in the staff who cared for them
- the staff were knowledgeable about the care and support they needed
- the staff checked in with them often to see if they needed anything.

Table 2 - Higher-scoring questions associated with overall experience theme

Theme	Question
Staff and caregivers Question 5	585 of 705 residents (83%) said that they always had confidence and trust in the staff who cared for them.
Staff and caregivers Question 14	532 of 653 residents (81.5%) said the staff were definitely knowledgeable about the care and support they needed.
Staff and caregivers Question 15	631 of 683 residents (77.7%) said the staff definitely checked in with them often enough to see if they need anything.



Residents reported a poorer overall experience when:

- the food served in the nursing home was poor
- there was no staff member to talk to about their worries and fears
- they were not as involved as they wanted to be in decisions about their care.

Table 3 - Lower-scoring questions associated with overall experience

Theme	Question
Food and nutrition Question 37	107 of 688 residents (15.5%) rated the food in the nursing home 'poor' (16 residents, 2.3%) or 'fair' (91 residents, 13.2%).
Staff and caregivers Question 16	82 of 557 residents (14.7%) said there was no staff member they could talk to about their worries and fears.
Person-centred care Question 2	124 of 707 residents (17.5%) said they were not involved as much as they wanted to be in decisions about the care and support they received.

Sample comments from residents



“Most of the staff are great, know what is needed and deal with situations very well.”

“I find it very good here. I get the care I need.”

“I was living alone [...] I was so lonely and then I had a fall and was alone for some time before I was found, so I had to go to a nursing home. I am very happy here, it was my choice.”

“I like the pleasant atmosphere here. People are very nice.”

“They take a long time to answer the bell.”

“I like small dinners. I get too much food on my plate and then I can't eat it.”

What did residents tell us about their experiences during the COVID-19 pandemic?



Residents were asked an open-ended question about their experiences during the COVID-19 pandemic.

The framework method was used to analyse and manage the wealth of information provided in participants' comments. An analytical framework consisting of key themes was developed — this framework helped organise and systematically reduce the thousands of participants' comments into manageable segments of information.

Residents were typically positive about the care received during the COVID-19 pandemic. They frequently mentioned the care received during that time as being good, the staff being attentive and the situation being well handled.

Some residents made reference to missing visits from family, but they also described understanding why precautions were taken. As well as noting that the restrictions were difficult, residents also described how they coped during this time, such as using their phone to stay in touch, or having visitors come to the window. Some residents talked about their wellbeing and the psychological impact of the restrictions, including feeling alone, isolated, and uncertain. Other residents talked about their experiences contracting the virus and the symptoms they experienced.

Sample comments from residents



"I was well cared for during this time although it was difficult not having visitors."

"It was fierce but they made it as easy as possible."

"They did their best to keep COVID out and were very strict about it. The staff were very good and they did what they were told as well."

"I was isolated myself and that was discomforting."

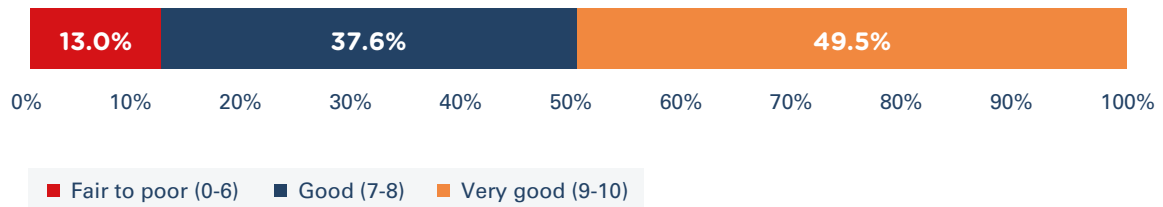


What did relatives and friends of residents say about their overall experience?



The survey asked relatives and friends of residents in the participating nursing homes to rate their overall experience with the nursing homes.

Most relatives and friends said that they had a good or very good overall experience (87.1%), while 13% said that they had a fair-to-poor experience.



What questions were relatives and friends of residents asked?



Relatives and friends were asked questions about six themes.

Table 4 displays the themes and number of questions for each theme in the survey.

Table 4 - Themes and number of questions for each theme in the survey

Theme	Description	Number of questions
Moving in to 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	Experience 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 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, residents' 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



What did relatives and friends tell us about different aspects of their experiences with nursing homes?

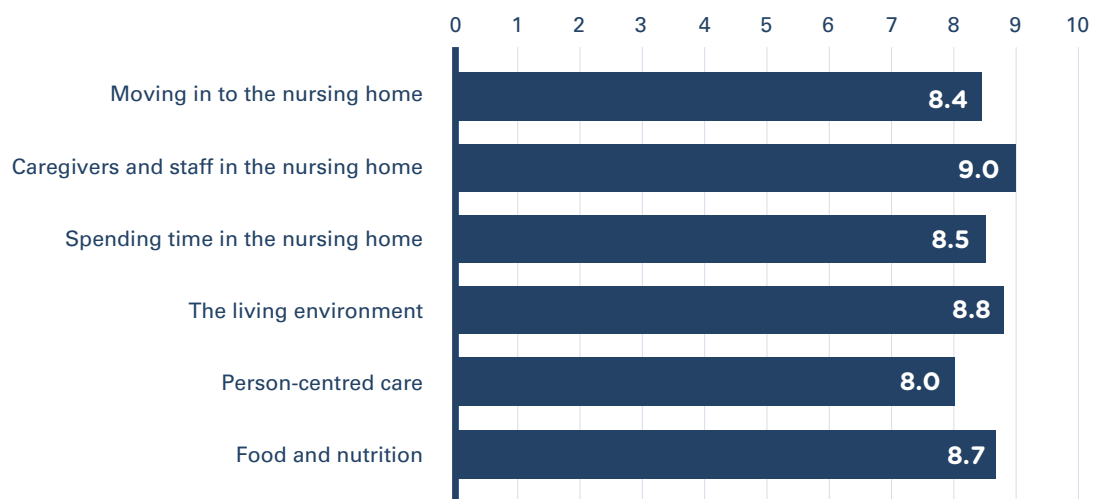


Relatives and friends were asked questions under six different themes covering different aspects of their experiences with nursing homes:

- ➔ moving in to the nursing home
- ➔ caregivers and staff in the nursing home
- ➔ spending time in the nursing home
- ➔ the living environment
- ➔ person-centred care
- ➔ food and nutrition

Figure 2 shows the scores out of ten for each theme.

Figure 2 - Scores out of ten for relatives and friends for each survey theme



The five highest-scoring questions among relatives and friends show that most knew who to contact in the nursing home if they had any questions, and felt welcome in the nursing home. Most also said that their relative or friend always received help when they need it in carrying out daily routines, and that staff in the nursing home definitely kept their friend or relative safe and protected them from harm. Relatives and friends also rated the cleanliness of nursing homes very highly.

The five lowest-scoring questions among relatives and friends show that some relatives and friends did not feel that residents' autonomy and independence was supported enough. The lowest-scoring questions related to residents getting to decide how they carry out their daily routines, residents getting to decide how they spend their day, residents being encouraged to be as independent as they were able to be, and relatives and friends being able to find a place to talk to the resident in private, other than the bedroom, when they visit. Over one in four relatives and friends (28.9%) said they do not 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 rights⁹.

Additional analysis was undertaken to identify the questions that had the strongest relationship with overall experience. This helps to identify the most important areas to focus on to improve the experiences of residents and their relatives and friends. The results of this analysis are shown in the next section.

⁹ Family members and friends were prompted with examples of advocacy organisations using the following wording "for example, the Patient Advocacy Service, Sage Advocacy or Age Action Ireland."



What areas should be focused on to improve the experiences of all relatives and friends of residents in nursing homes?



This section explores the questions in the survey that had the strongest relationships to the ratings that relatives and friends gave to their overall experience with the nursing home.

Questions that had a high score out of 10 and a strong relationship with participants' overall experience were identified as areas of good experience, while questions that had lower scores out of 10 and a strong relationship with overall experience were identified as areas for improvement.

Relatives and friends reported a good overall experience with the nursing home when:

- they had confidence and trust in the staff who cared for their relative or friend in the nursing home
- they felt that their relative or friend was treated with respect and dignity by the staff who cared for them
- staff in the nursing home were knowledgeable about the care and support their relative or friend needed.

Table 5 - Higher-scoring questions associated with overall experience

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

Relatives and friends of residents in nursing homes reported a poorer overall experience with the nursing home when:

- ➔ staff in the nursing home did not support the emotional wellbeing of their relative or friend
- ➔ their relative or friend's belongings and personal items were not safe in the nursing home
- ➔ their relative or friend was not supported to take part in activities that interest them.

Table 6 - Lower-scoring questions associated with overall experience

Theme	Question
Caregivers and staff Question 14	41 of 870 relatives and friends (4.7%) said that staff did not support the emotional wellbeing of their relative or friend.
The living environment Question 24	36 of 911 relatives and friends (4%) said their relative or friend's belongings and personal items were not safe in the nursing home.
Spending time Question 16	50 of 868 relatives and friends (5.8%) said their relative or friend was not supported to take part in activities that interested them.

Sample comments from relatives and friends



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

"Just wish the meals were improved, and more fresh foods offered than processed foods."

"All staff are knowledgeable about Dad, friendly, kind, available to talk and take on board any suggestions."

"The interaction between staff and residents is second to none. Staff make the residents feel special, wanted and loved."

"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."

"The care is exceptional. Staff are so genuine, sincere and fully focused on mum's care and happiness. I couldn't rate them high enough."

What did relatives and friends tell us about their experiences during COVID-19?



We asked relatives and friends an open-ended question about their experiences during the COVID-19 pandemic.

The framework method was used to analyse and manage the wealth of information provided in participants' comments. An analytical framework consisting of key themes was developed — this framework helped organise and systematically reduce the thousands of participants' comments into manageable chunks of information.

Relatives and friends talked about the difficulty and stress experienced during times 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 (for example, through use of tablets and facilitating window visits). Others felt not enough was done with regard to sharing information about the resident or maintaining contact.

Sample comments from relatives and friends



“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.”

“It was a distressing time for family unable to see loved ones and the feeling of powerlessness if something happened to them. Free tablets were excellent as way to video call and to see them. Freepost packages were great for family to regularly send in items so residents did not feel forgotten and it gave them a nice surprise. Nursing home kept us up to date constantly and kept high standards of care.”

“The care was excellent but my relative lost the ability to communicate during this period as she didn't have enough stimulation. No social activities or visits from relatives.”

Conclusions

Overall, most residents and relatives and friends of residents said they had either a good or a very good experience in their nursing home.

Both groups were particularly positive about the living environment in the nursing home, and the staff and caregivers. However, scores for the individual themes and for individual questions indicate that there is room for improvement in particular aspects of care.

Residents gave lower ratings to questions relating to accessing advocacy supports, information on moving into the nursing home, and being involved in planning ahead for changes in their circumstances. It was evident that some questions had particularly strong relationships with residents' overall experiences of care and are important areas to address. For example, some residents would like more input in decisions that affect their lives, including their care planning and their day-to-day experiences. Other important areas for improvement related to the food provided to residents, and the availability of staff to talk to residents about their worries and fears.

The results for relatives and friends were similar to those of residents in many respects. Lower-scoring questions for residents or friends related to knowing how to contact advocacy organisations, and residents' involvement in how they spend their days. Key areas for improvement for relatives and friends related to provision of emotional support for residents, ensuring interesting activities are provided, and that residents' belongings are 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 www.yourexperience.ie 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.

More detailed reports on the findings from residents and the findings from relatives and friends can be accessed on www.yourexperience.ie.



Appendix 1 - 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 into 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 Survey¹⁰.

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?

- Yes, always (10)
- Yes, sometimes (5)
- No (0)
- Don't know (M)

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

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 residents (e.g., those who share a bedroom and those who do not) 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.

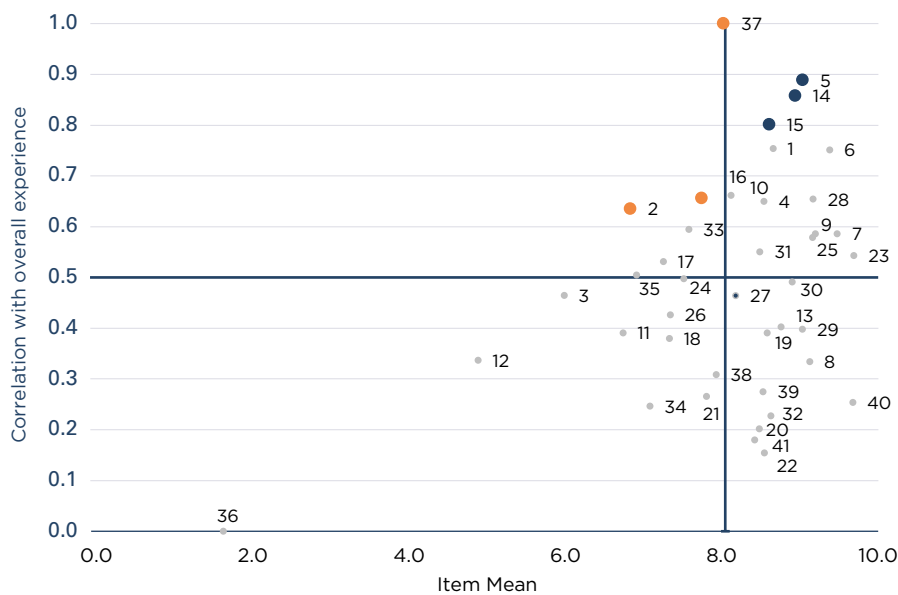
The National Nursing Home Experience Survey technical report, will be available at www.yourexperience.ie, and will provide details on all aspects of the analyses, including response rates, mapping of questions to reporting themes, computation of scores, and statistical comparisons.



Identifying higher and lower-scoring questions

Figure 3 shows the average score out of 10 for each question on the survey for residents, 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 3 - Overall resident 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.

