



National Nursing Home Experience Survey 2022

Technical Report

About the National Nursing Home Experience Survey

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. The survey is part of 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.yourexperience.ie.

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.

A questionnaire with 54 questions 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 impairments or residents without 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 impairments. In total, 1,055 residents were invited to participate in the National Nursing Home Experience Survey, while 718 took part.

A second questionnaire with 49 questions 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 hard copy 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 allows for the experiences of all residents to be represented, including those unable to participate themselves. In total, 1,579 relatives or friends were invited to participate in the survey, and 943 took part (59.7% of those invited).

National Nursing Home Experience Survey 2022 – Technical Report

Purpose of the report

This report provides a comprehensive technical description of the model, methodology, methods and procedures implemented during the National Nursing Home Experience Survey 2022. It has been designed to provide sufficient detail for repetition, replication and review. This document does not report in detail on the survey results. The reports on the survey findings can be downloaded from <https://yourexperience.ie/>.

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1. Overview

1.1 The National Nursing Home Experience Survey

The National Nursing Home Experience Survey is comprised of two questionnaires; one for residents of nursing homes, and one for the relatives and friends of residents. The resident questionnaire contains 54 questions and the questionnaire for relatives and friends contains 49 questions which capture their respective experiences with nursing homes across six different themes including: moving into the nursing home, staff and caregivers in the nursing home, spending time in the nursing home, person-centred care, the living environment and food and nutrition.

The National Nursing Home Experience Survey includes questions identified through an international review of similar surveys and through engagement with stakeholders, and prioritised through a Delphi process with stakeholders including nursing home residents and the relatives and friends of residents.

The aim of the survey is to learn from the experiences of residents, and relatives and friends of residents, to improve the safety and quality of the care that they receive, as well as their overall experience in nursing homes. In Ireland, nursing home care is provided by the HSE, private providers and voluntary providers.

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. More information on the survey design can be found at <https://yourexperience.ie>.

The last survey questionnaires were accepted on 31 May 2022. Among residents, all participants completed the survey via a face-to-face interview that took place in their nursing home. Among relatives and friends 16.97% (n = 160) of participants completed the survey online; the remaining 83.03% (n = 783) returned the questionnaire by post. The results of the survey were published in November 2022. The overview of findings, residents' experiences, and experiences of relatives and friends reports are available to download from <https://yourexperience.ie>.

1.2 Management of the National Nursing Home Experience Survey

HIQA, as the lead partner in the National Nursing Home Experience Survey, contracted a managed service to administer the survey and to process the responses received. This included conducting interviews with residents, distributing survey questionnaires by post to designated representatives and processing all survey responses.

The master file contained the names and contact details of all eligible participants from all participating nursing homes, including residents and designated representatives. The managed service, on behalf of HIQA, was responsible for the management of the National Nursing Home Experience Survey master file. It was the responsibility of the managed service to:

- assign a unique survey code to each resident and designated representative
- conduct interviews with residents
- distribute survey packs to designated representatives
- record and manage opt-outs in the master file
- manage survey responses
- store the master file and the survey responses separately,
- ensure that survey responses were pseudonymised
- anonymise hard copy survey responses
- arrange for the secure destruction of all personal data.

The unique survey code allowed the managed service to manage survey responses, without linking participants' names and contact details (held in the master file) with their survey responses. Only the managed service held the unique survey codes, which were deleted after the survey cycle was complete.

The managed service was also responsible for:

- receiving and quality assuring the lists of sampled persons from participating nursing homes, including residents and designated representatives
- printing and distributing the questionnaire
- training interviewers to administer the resident questionnaire
- scheduling interviews with residents and managing the interviewers
- creating and testing an online survey platform
- logging returns, opt-outs and ineligible respondents
- providing information to respondents via a dedicated survey helpline
- data processing and quality assuring survey responses
- hosting a secure back-end database to participating nursing homes, to view their survey results on an online reporting platform prior to the publication of the results
- secure storage and destruction of paper responses.

1.3 Survey design

1.3.1 Survey methodology

The National Nursing Home Experience Survey adopted a mixed methods, cross-sectional design employing both closed and open-ended questions with participating residents and designated representatives. The mode of administration differed for the different participant groups. The survey with residents was administered via a face-to-face interview, while designated representatives completed a postal survey.

The scope of the survey was registered nursing homes in Ireland. A representative sample of nursing homes was selected based on centre size, ownership model (private, public and voluntary) and location (Dublin, Leinster, Munster, Connacht and Ulster). Eligible participants from the representative sample of nursing homes were identified and given an opportunity to share their experiences.

Eligible participants included:

- a) nursing home residents from participating nursing homes. To be eligible to participate, residents must have had the functional ability to participate in a face-to-face interview.
- b) one designated representative of each resident from each participating nursing home.

In line with international best practice, as identified in the [International Review](#), the survey was administered as follows:

Face-to-face interviews with residents

Residents participated in an interview. The interview was carried out by trained interviewers. Interviews were subject to audits, to ensure that they were carried out in line with best practice and as per the training provided.

Postal survey with designated representatives

Designated representatives received a survey pack in the post. This included an invitation letter, an FAQ (Frequently Asked Questions) leaflet, a hard copy survey questionnaire, a Freepost envelope and a unique survey code that could be used to complete the survey online.

1.3.2 Sample

Sampling technique

Stratified random sampling was used to identify a representative sample of nursing homes for inclusion in the survey.

In line with similar studies conducted nationally and internationally, randomisation of nursing homes was proportionally stratified by:

- Region: Dublin, Leinster, Munster, Connacht and Ulster.

- Centre size: <20 beds, 21 – 40 beds, 41 – 99 beds, >100 beds¹.
- Provider type: Public (HSE), private or voluntary providers.

Nursing homes were then randomly sampled within each of the strata using a random number generator to achieve a representative sample. Checks were run to verify if the sample drawn was representative of the national population of nursing homes in Ireland.

Each of the nursing homes selected were formally invited to participate in the National Nursing Home Experience Survey. In cases where a nursing home declined or was unable to participate, a reserve list was generated and replacement nursing homes matching the required characteristics were selected from the list as required to achieve the required sample.

Fifty-three nursing homes agreed to participate in the survey, with the profile of nursing homes representative of the national breakdown. Table 1 presents the characteristics of participating nursing homes in terms of provider type, region and maximum occupancy. See Appendix 1 for a comparison of participating nursing homes to the national profile and the profile of invited nursing homes.

Table 1: Profile of participating nursing homes

Region		Provider type breakdown (N)			Bed occupancy range breakdown (N)		
		HSE	Private	Voluntary	≤40 beds	41-99 beds	≥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%)

¹ For the analyses, nursing homes with a maximum capacity of <20 beds and 21 – 40 beds were combined into a single group of <40 beds.

Sample of residents

To participate in the resident survey, participants had to be residents from a participating nursing home with the functional ability to participate in an interview.

The total maximum occupancy across the 53 participating nursing homes was 3,105. Staff in the nursing homes were asked to invite eligible residents to participate in the survey. In total, 1055 residents were invited. Of these, 718 residents took part in the survey (68.1% of eligible residents). Among those who were invited but did not take part in the survey, 84 declined to participate on the day of the interview, 218 were unwell and 35 had died before the scheduled interview.

The functional ability of residents to participate was based on their physical, psychological, cognitive, and social ability to perform normal daily activities required to meet basic needs, and maintain health and wellbeing. Nursing homes applied the eligibility criteria. The National Care Experience Programme provided participating nursing homes with guidance to support this process, to ensure consistent application of the eligibility criteria and the inclusion of all eligible survey participants.

Sample of designated representatives

To participate in the survey, designated representatives had to be a nominated representative of a resident of participating nursing home.

Participating nursing homes were asked to distribute information packs to a designated representative (typically a family member or friend) for each resident in the nursing home. Designated representatives who did not opt-out of the survey received a survey pack in the post. This included an invitation letter, an FAQ (Frequently Asked Questions) leaflet, a hard copy survey questionnaire and a Freepost envelope. The survey pack contained a unique survey code. Designated representatives could complete and return the hard copy survey questionnaire using the Freepost envelope provided in the survey pack or alternatively could log on to the National Care Experience Programme website (www.yourexperience.ie) and complete the survey online using their unique survey code.

1.3.3 The questionnaires

The questionnaires administered to residents and to designated representatives were designed to gather information on areas relevant to their individual experiences with nursing homes. Some questions asked in the survey were common to both groups, while other questions were unique to either residents or designated representatives. Each survey asked questions about the following themes, identified as important in the development of the survey:

- 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.

The development steps are outlined below:

1. An international review of nursing home experience surveys identified international best practice with regard to the questionnaires and methodologies employed to deliver a national survey of nursing home experience.
2. Eight focus groups and eight individual interviews were held with nursing home residents, family members, nursing home management, health and social care service staff, advocacy bodies, policymakers and healthcare regulators, which identified the key themes to be included in the questionnaires.
3. A gap analysis consisting of a review of national standards and policies was conducted to ensure that all aspects of care, important in the Irish context of nursing home care provision, were captured.
4. A list of 87 questions was assembled for the resident questionnaire, and 75 questions for the designated representative questionnaire from the previous steps. These lists of questions were reduced through a two-round Delphi study with key stakeholders who had knowledge and experience in the area of nursing home care. The purpose of the Delphi study was to identify the priority questions to be included in the questionnaires. Participants included 25 individuals from advocacy agencies and representative bodies, directors of nursing and persons in charge, family members or friends of residents, individuals in a regulatory role, managers of a service or programme, healthcare professionals, policy makers or funders of services. A parallel process was also undertaken with seven residents to elicit their views. Following analysis of the findings of the Delphi study, the long list of questions was reduced to 75 questions for residents and 60 for designated representatives, with suggestions on how other questions could be merged or consolidated.
5. Picker Institute Europe checked the measurement and analytical quality of the questions in both questionnaires.
6. Cognitive interviews with relevant individuals, such as nursing home residents and family members, were undertaken to assess the clarity and appropriateness of the National Nursing Home Experience Survey questionnaires.
7. A further review of the questionnaires was undertaken by the National Nursing Home Experience Survey Programme Board. The final approved surveys included 54 questions for nursing home residents and 49 questions for designated representatives.

The final questionnaires are available on www.yourexperience.ie, and a list of all the questions in each questionnaire mapped to their relevant themes is included in Appendix 2.

1.3.4 Ethical approval

Ethical approval for the National Nursing Home Experience Survey was obtained from the Royal College of Physicians in Ireland (RCPI). This was confirmed by e-mail from the RCPI on 30 November 2021.

1.3.5 Privacy Impact Assessment

A Data Protection Impact Assessment (DPIA) must be carried out to identify and mitigate risks to the privacy of data subjects prior to the processing of any personal and sensitive data. Given that the administration of the National Nursing Home Experience Survey required the processing of personally identifiable information (for example, contact details and dates of birth), a DPIA was conducted in 2021 and kept under review throughout the course of the survey implementation. The DPIA is available to download from <https://yourexperience.ie/about/information-governance/>.

1.3.6 Information governance

Information governance is a means of ensuring that all data, including personal information, is handled in line with all relevant legislation, guidance and evidence-based practices. The National Care Experience Programme developed a comprehensive information governance framework to ensure that any information it collects is handled safely and securely.

The National Care Experience Programme information governance framework comprises policies, procedures and processes covering: data protection and confidentiality, data subject access requests, record retention and destruction, security, data breach management, data quality, access control, business continuity and record management. A statement of purpose and statement of information practices detailing the information-handling practices of the National Nursing Home Experience Survey are available from <https://yourexperience.ie/about/information-governance/>.

1.3.7 Data retention and destruction

The contact details of designated representatives of nursing home residents were used to distribute the survey invitations to their home addresses. Participant names and addresses (with the exception of 'Nursing Home Name') were deleted at the close of the survey period in line with the National Care Experience Programme data retention and destruction schedule. Hard copies of the survey questionnaire were destroyed once all answers had been coded and correctly uploaded to the response file. By this stage, the survey responses were fully anonymised, meaning that the responses could not be linked back to the person who completed the survey.

1.3.7 Communications

Prior to the implementation of the survey, nursing homes were asked to inform all residents and designated representatives about the survey and provide them with the option to opt out. If residents and designated representatives decided to opt out at this point, they were not included in the sample of eligible participants.

If residents and designated representatives did not opt out at this point, the nursing home was asked to include them in the list of eligible participants and securely transfer their data to the managed service, who used it to organise and conduct interviews with residents and distribute postal surveys to designated representatives.

The National Care Experience Programme developed a Communications Plan to ensure transparency about the survey and to support nursing homes in implementing the survey. In line with the plan, the National Care Experience Programme:

- 1) Provided nursing homes with promotional material that they could use to inform all residents and designated representatives about the survey. This included information packs, posters, and FAQs, which were displayed in participating nursing homes.
- 2) Implemented a national and social media campaign to raise awareness about the survey.
- 3) Organised information sessions with nursing homes on Zoom to:
 - a. inform all residents and designated representatives about the survey.
 - b. provide transparency around the conduct of survey, namely that the survey was:
 - i. voluntary and that participation or non-participation would not affect future care needs.
 - ii. conducted at a national level by the National Care Experience Programme and therefore independent of nursing homes.
 - iii. confidential, with nursing homes only having access to responses at an aggregate level and their own anonymised data, provided there were more than 5 responses to a particular question.

2. Survey fieldwork

The National Care Experience Programme provided participating nursing homes with guidance to support the identification of eligible participants, to ensure consistent application of the eligibility criteria and the inclusion of all residents who had the capacity to take part (See Appendix 3 for the process guide). The functional ability of residents to participate was based on their physical, psychological, cognitive, and

social capabilities. The National Care Experience Programme team encouraged nursing home staff to be inclusive when applying the eligibility criteria.

Participating nursing homes were asked to distribute an information pack containing an information letter and an FAQ (provided by the survey team) to all eligible residents in advance of the survey period (See Appendix 4 for the most up-to-date FAQ). Residents participated in an interview carried out by trained interviewers.

The National Nursing Home Experience Survey with relatives and friends was based on a concurrent mixed-mode response design, which allowed participants to complete the survey online or by returning a hard copy questionnaire in the post. The mode of contact, however, was via post or via the distribution of information packs within participating nursing homes (see Appendix 5 for the initial information letter distributed to family members and friends). The administration of two reminder letters was built into the survey design.

Information packs were distributed to all eligible participants (both residents and relatives and friends) between January and March 2022. Participation in the survey was voluntary. If a resident or a designated representative did not wish to take part in the survey, there were processes to facilitate opt-outs.

1. Nursing home residents could opt out by:

- informing a member of nursing home staff when initially informed about the survey by the nursing home, or upon receipt of the information pack.

2. Designated representatives could opt out by:

- informing the nursing home upon receipt of the information pack
- calling the National Nursing Home Experience Survey Freephone number: 1800 314 093
- logging on to www.yourexperience.ie
- emailing info@yourexperience.ie

No further communication was sent to any individual who opted out. The participant's details were destroyed at the end of the survey cycle.

2.1 Data extraction

Data extraction refers to the sampling procedures undertaken to identify individuals eligible to participate in the survey.

During the survey period, participating nursing homes were required to provide the names of eligible residents as there is no existing population-based sample dataset available which covers all nursing home residents in Ireland.

During the survey period participating nursing homes also extracted personal information (such as names and addresses) for a 'designated representative' for every resident in their nursing home. Adhering to agreed protocols, nursing homes shared this information with the managed service, who subsequently sent invitation

letters and online survey codes via post to eligible participants. Nursing homes were also required to quality assure the sample, for example, by checking that all relevant data fields were completed accurately.

Personnel responsible for data extraction and quality assurance of data extracts were required to follow data extraction and quality assurance procedures during every step of the process to ensure a standardised and consistent approach to the implementation of the survey across all participating nursing homes. Nominated members of staff who created the datasets and transferred them to HIQA were provided with training via zoom and a process guide. The process guide is available in Appendix 3.

During the week commencing 21 February 2022, nursing homes were asked to compile and upload the dataset of participating resident contact details (Resident Contact Dataset) and a dataset of participating designated representative contact details (Designated Representative Contact Dataset) to the managed service via a secure folder on OneDrive.

The datasets of each nursing home were collated and included in the managed service's master file of eligible participants. Nursing homes were asked to provide the minimum amount of data necessary to carry out the survey. For residents, this pertained to their full names (forename and surname) and the name of the nursing home. For designated representatives, this included their full names (forename and surname), their postal addresses and the name of the nursing home.

2.2 Survey administration

Residents participated in an interview carried out by trained interviewers. Interviews were held in a designated room in participating nursing homes. The first 10 questions of the survey covered questions from the main themes in the survey. This allowed for the perspectives of residents who did not feel able to complete all questions to be included. Residents could choose to finish the interview at the point of their choosing and still have their answers included, if they wished for them to be included. This was to promote as much participation as was feasible.

Nursing home staff were not present for the interview unless requested by the resident, nor did they receive direct access to survey responses. Residents were assured of the confidential and independent nature of the survey. Survey responses were anonymised and it is not possible to link responses back to individual participants.

The National Nursing Home Experience Survey with relatives and friends was based on a concurrent mixed-mode response design, which allowed participants to complete the survey online or by returning a hard copy questionnaire in the post. The mode of contact, however, was via post.

Arranging face-to-face interviews with residents and distributing the postal survey to designated representatives

Upon receipt of the nursing homes contact datasets, the managed service created a master file of eligible survey participants and:

- followed up with nursing homes to arrange face-to-face interviews with residents
- sent the survey pack by post to designated representatives.

The survey pack that was sent to designated representatives included further information on the survey in the form of an invitation letter and an FAQ leaflet and a hard copy survey questionnaire and Freepost envelope. Designated representatives could return the questionnaire in the post, using the Freepost envelope.

The survey pack also provided designated representatives with a unique survey code, which they could use to log on to the National Care Experience Programme's website (www.yourexperience.ie) and complete the survey online.

The invitation letter and FAQ leaflet provided information on:

- the aims of the survey
- information on advocacy and support
- information on opting out of the survey.

The FAQ is available in [here](#).

Two reminder packs were also sent to designated representatives at two week intervals for non-responders. The first reminder pack was sent two weeks after the first survey pack and included a reminder letter. The reminder letter included the unique survey code and information on opting out. The second reminder pack was sent four weeks after the first survey pack. The second reminder pack included a reminder letter, a hard copy questionnaire and a Freepost envelope. The unique survey code and information on opting out of the survey was also included in the second reminder pack.

The reminder letters for designated representatives are available in Appendix 6.

Face-to-face interviews with residents

Face-to-face interviews were carried out with residents between 14 March and 31 May 2022. The interviews were carried out by trained interviewers. Interviewers:

- complied with all health and safety criteria and regulations necessary to gain entry to participating nursing homes.
- were provided with specialist training. This included infection prevention and control, adult safeguarding and how to manage conflict, residents' distress and or disclosure of information of concern.

Interviews were subject to audits, to ensure that they were carried out in line with best practice and as per the training provided.

Information provided to residents about the survey informed them that they could invite a family member, friend or any other individual of their choosing to accompany them to the interview, if they (residents) felt that they needed or wanted support in participating. However, residents were encouraged to respond to all questions of their own volition and based on their own experience of nursing home care. Any additional individuals attended in a support capacity only.

The interviews were carried out independently of the nursing homes by the managed service and this was made clear to residents. Residents were assured of the confidential and independent nature of the survey.

2.3 Sampling and operational outcomes and response rates

The maximum bed occupancy of participating nursing homes was 3,105. 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. 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.

Participating nursing homes provided the contact details of 1,579 designated representatives and a first invitation was dispatched to each of these. 1,341 first reminders were sent, and 913 second reminders were sent. 943 completed surveys were returned, 160 were returned online and 783 were returned by post, resulting in a response rate of 59.7%. In total there were 71 opt-outs (10 opted out via the phone number, 17 opted out via a paper response, 33 opted out by returning the survey pack to sender, 3 opted out online and 3 opted out via e-mail).

3. Data processing, analysis and reporting

Managing survey responses

Survey responses were processed in one of three ways:

- 1) Responses to face-to-face interviews were recorded by the interviewer on a portable electronic device, which was both password protected and encrypted. Once logged on to the device, interviewers were required to enter another password to upload responses to ASKIA software. Data entered into the ASKIA software was stored on the managed service's server, encrypted and backed to the Microsoft Azure cloud computing system, which was hosted within the European Union. This data was then transferred by 'Secure File Transfer Protocol' (sFTP) to the National Care Experience Programme dashboard.
- 2) Designated representatives completed the survey online using the survey code provided. Once submitted, their responses were uploaded directly to the National Care Experience Programme Dashboard and stored on the Amazon Web Service (AWS) Server in Dublin.
- 3) Alternatively, designated representatives could complete the hard copy survey questionnaire and return it to the managed service in the Freepost envelope provided in the survey pack. Once the managed service received completed hard copy surveys, the responses were uploaded to the National Nursing Home Experience Survey Response File on the Dashboard, via ASKIA software, and stored on the Amazon Web Service (AWS) Server in Dublin.

All survey responses were then reviewed, risk rated and anonymised.

3.1 Data processing steps

Completed questionnaires from family members and friends were received both online and in paper form. The latter were uploaded and merged with the online surveys. All completed questionnaires were returned by participants to the managed service where they were opened, date stamped, punched and coded. Data was entered into a customised data entry form developed in Askia software. The form was designed to quality assure the data upon entry. For example, data entry staff could not progress to the next field if an incorrect survey code (ID) was entered. Similarly, out-of-range values were not permitted for any of the numeric fields.

The National Care Experience Programme website allowed participants to input their eight digit code² and complete the survey online. Similar to the paper-based survey, invalid survey codes (IDs) were not permitted on login (an error message appeared asking the user to enter their code again).

² Eligible participants received a unique eight digit survey code, which was provided to them in the initial invitation and subsequent reminder letters.

To prepare the data for analysis and reporting, scoring and a number of post-entry recodes were applied to the survey response file (using SPSS® version 24). The age of participating residents and designated representatives, and the age of the residents that designated representatives were responding in relation to, were calculated using the indicated year of birth. Age was then collapsed into sub-age groups for residents, designated representatives and the residents that designated representatives were responding in relation to.

The questions on overall experience with the nursing home were collapsed into three groups: very good (score of 9-10), good (7-8), and fair to poor (0-6).

3.2 Mapping of survey questions to the questionnaire themes

Survey questions were grouped into themes along different dimensions of participants' experiences in and with the nursing home. Table 2 and Table 3 provide a brief description of the themes in each survey questionnaire and specify the number of questions corresponding to each theme. Questions on respondent demographics and the open-ended questions were excluded from themes. See Appendix 1 for a list of the questions included in each survey, mapped to the relevant theme.

Table 2 Description of themes and number of questions per theme in residents' survey

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

Table 3 Description of themes and number of questions per theme in designated representatives' 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

3.3 Quantitative methodology

This section describes how the scores for each theme were calculated and describes the quality assurance of the survey data.

Question scores

To calculate scores for the themes described in Section 3.2, the responses to the questions making up these themes were assigned a score using methods equivalent to those used in the UK by the Care Quality Commission (CQC) and in other NCEP surveys. The scores applied to each of these questions are shown in Appendix 1.

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 CQC on behalf of the National Health Service (NHS) in England, subsequently used in the National Inpatient Experience Survey and National Maternity Experience Survey.³

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. 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)

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

³ Care Quality Commission. NHS Patient Survey Programme: Survey Scoring Method 2015.

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 were constructed by calculating the average scores for all questions belonging to that theme.

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.

Identifying higher and lower-scoring questions

Figure 1 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. Figure 2 shows the average score out of 10 for each question on the survey for designated representatives, and how strong a relationship it has with their overall experience. The vertical axis in each figure shows the correlation of each question with overall experience, and 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 1 Overall resident experience map

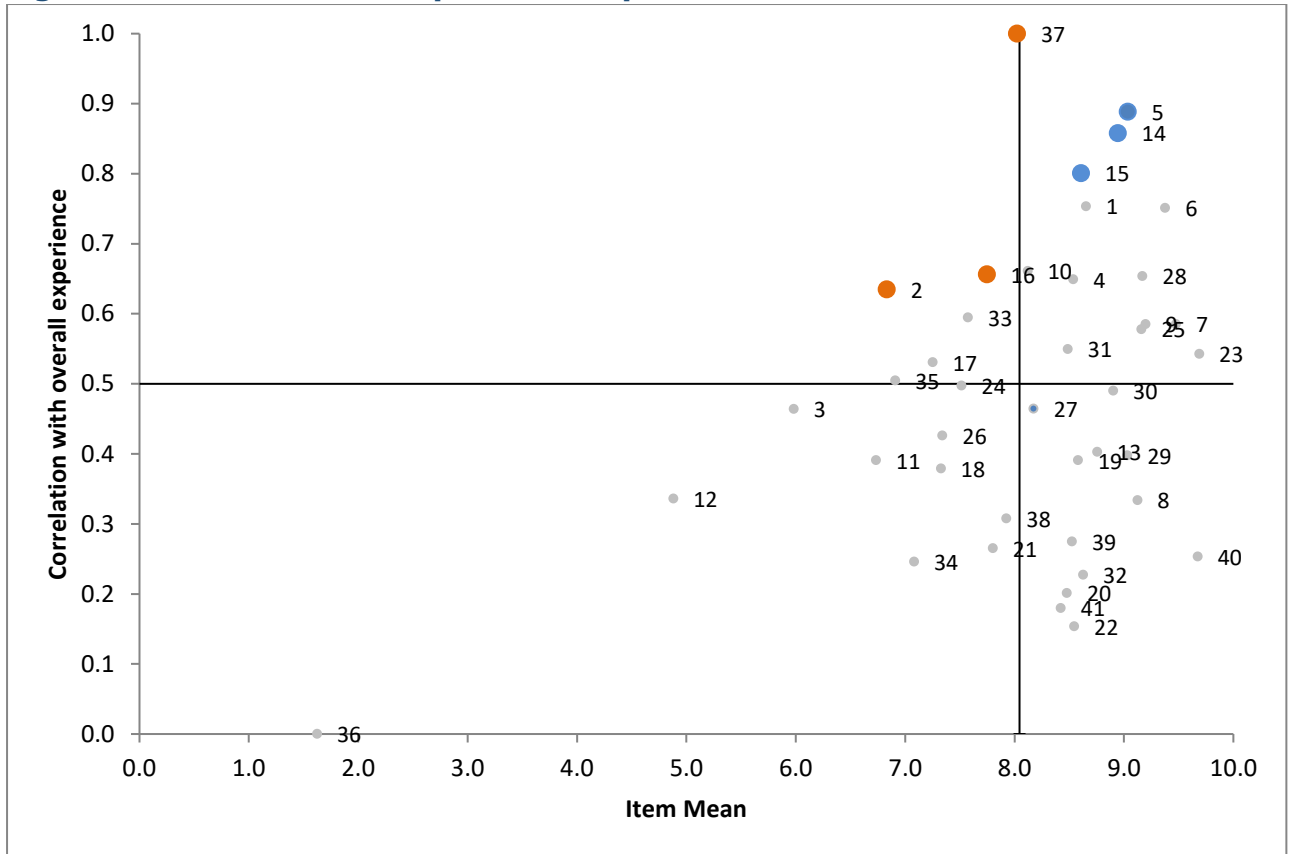
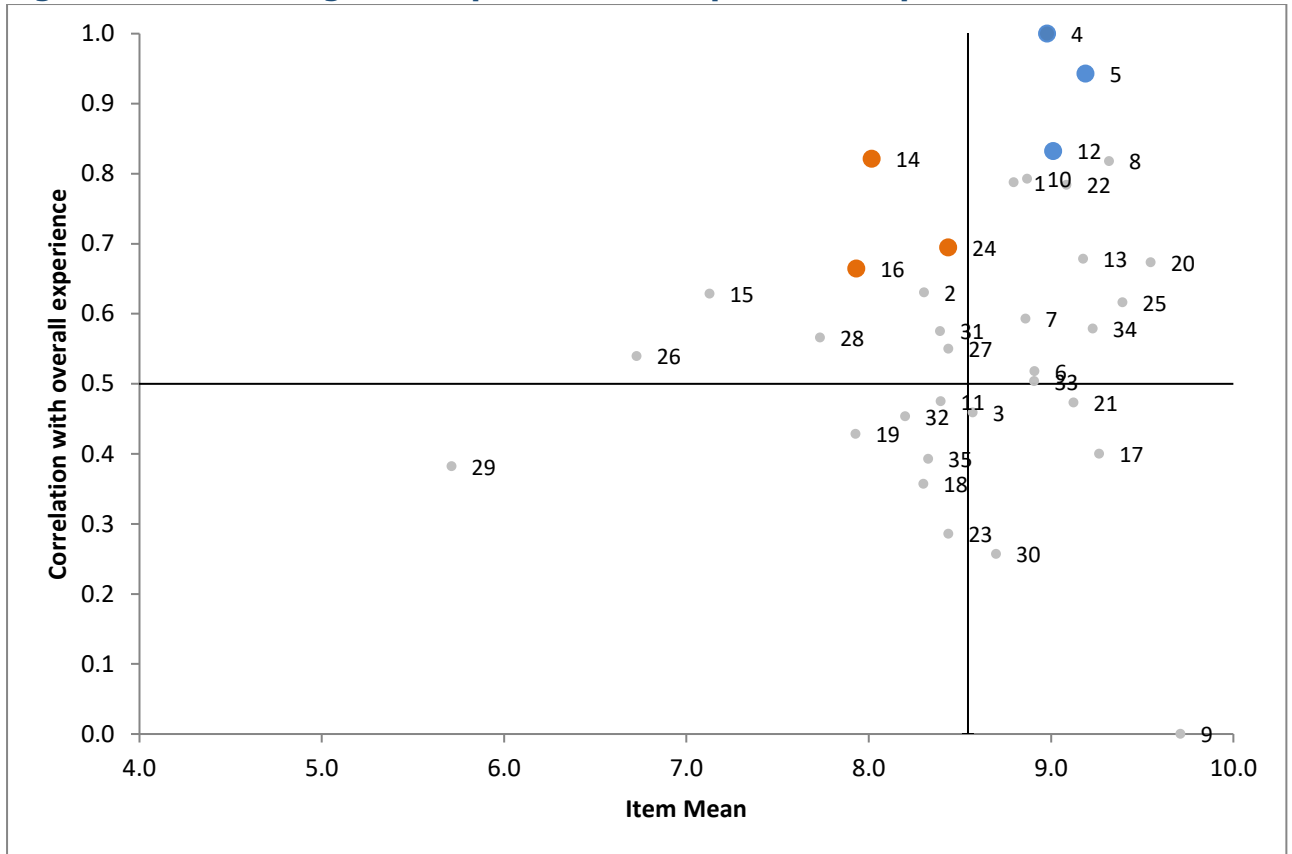


Figure 2 Overall designated representative experience map



3.4 Qualitative methodologies

This section describes the processing of the qualitative data collected via the survey questionnaires. Four survey questions asked residents (questions 49-52) and designated representatives (questions 46-49) to provide additional information, in their own words, on their experiences in the nursing home. These open-ended, free-text questions allowed participants to give a more in-depth description of specific aspects of their experiences with their nursing home. Residents made 2,548 comments across the four questions, and designated representatives made 2,396.

The framework method was used to analyse and manage information provided in the comments. An analytical framework consisting of five categories and 37 themes was developed (see Table 5). This framework helped organise and systematically reduce the thousands of comments into manageable amounts of information.

Table 4 Coding framework

Category	Themes	No. of Comments
Staff	Staff relationship/attitude/turnover	755
	Communication with Designated Representative	371
	Management staff	149
	General staff - cleaners/security/catering	148
	Communication with Resident	86
	Nurses	85
	Healthcare assistants	75
	Staff availability and responsiveness	75
	Admin staff - reception etc.	25
	Doctors	19
Medical aspects	Quality of care	881
	Covid and vaccine-related comments	493
	Medical care or condition	271
	Physio and other physical therapies	32
Material needs	Physical environment (including cleanliness) and equipment	475
	Food and drink	226
	Finance	67
	Personal hygiene	55
	Personal property	53
	Health and safety	32
	Support with feeding/drinking/dressing	30
	Personal services	23
	End of life care	18
Emotional needs and wellbeing	Visiting	399
	Person-centred care and involvement in choices	309
	Activities and entertainment	301
	Spiritual care	67
	All other therapies	9
Other	General comments	1693
	Dignity, respect and privacy	75

The same open-ended questions were asked of both residents and designated representatives. The questions were:

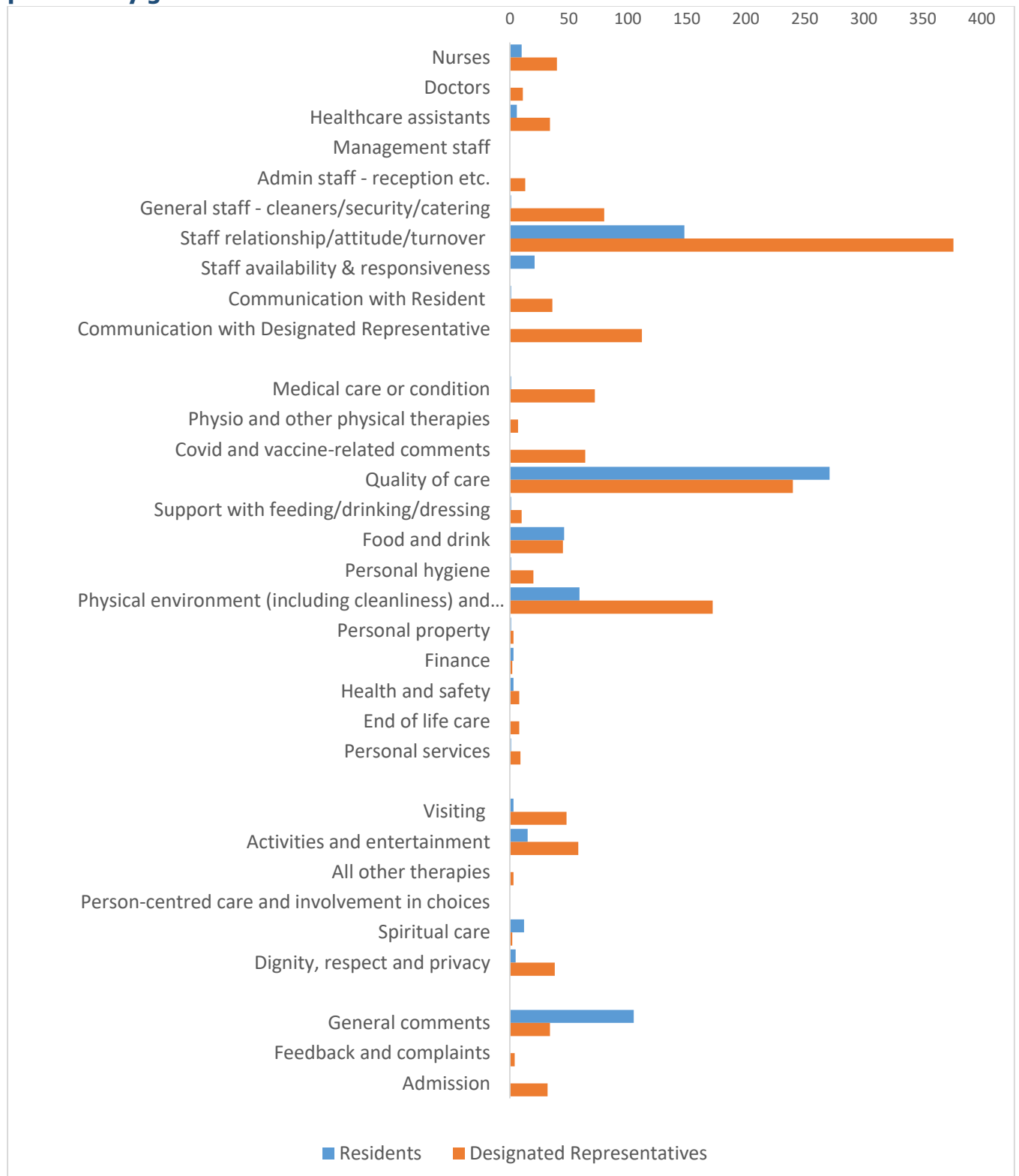
- Is there anything particularly good about the care here?
- Is there anything that could be improved?
- Do you have any comments about how the COVID-19 pandemic affected the care you /your relative or friend received in the nursing home or your overall experience in the nursing home during that period?
- Do you have any other comments or suggestions?

Compared to comments from designated representatives, resident comments were typically short and covered fewer themes. Comments made by designated representatives were generally longer and included multiple themes. The remaining sections in this chapter describe the findings for each question and show the breakdown of participant comments by theme for each open-ended question.

Is there anything particularly good about the care here?

Figure 3 shows the breakdown of resident and designated representatives' comments for the question 'is there anything particularly good about the care here/in the nursing home?'

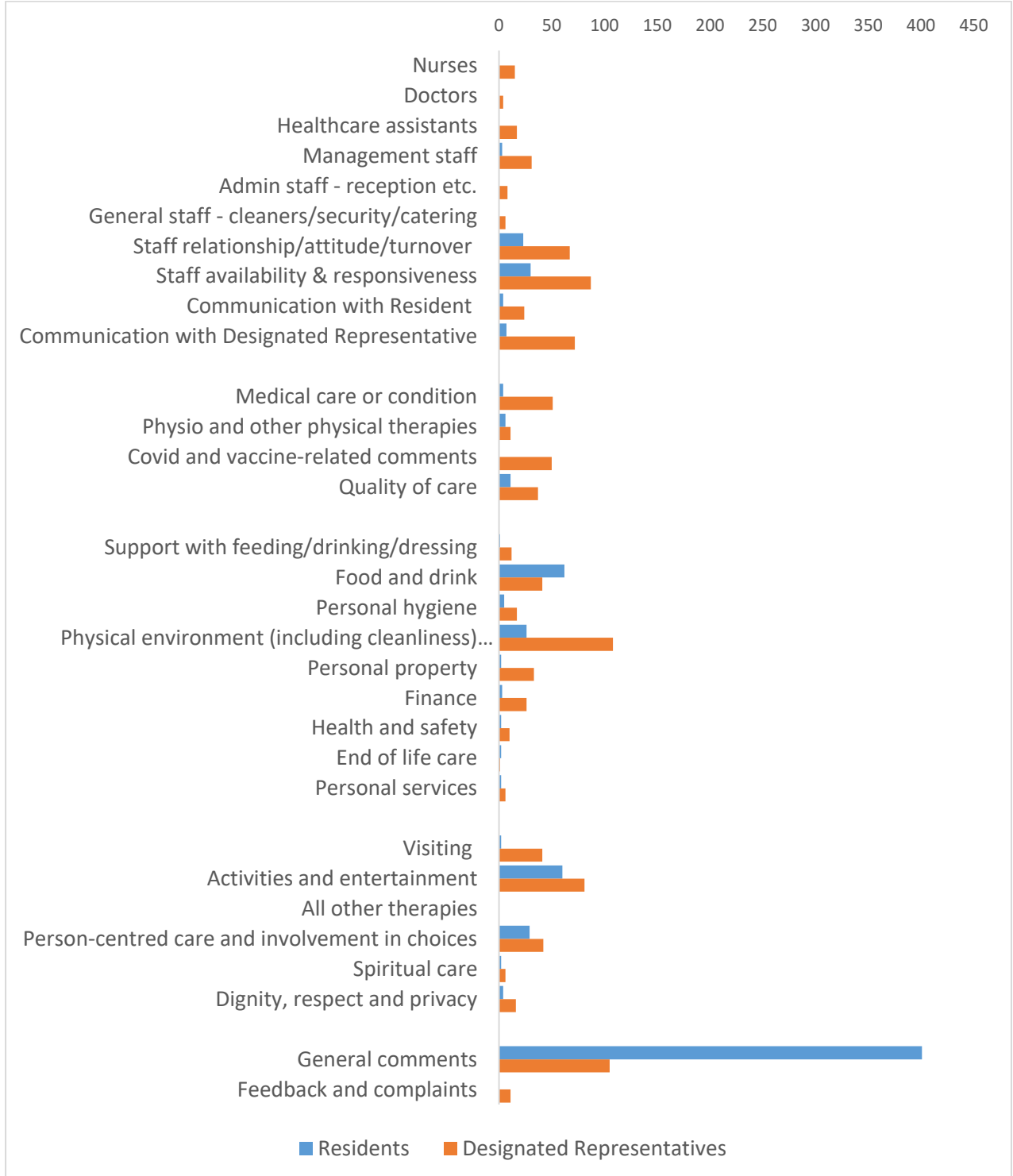
Figure 3 Number of comments for each theme for 'is there anything particularly good about the care here?'



Is there anything that could be improved?

Figure 4 shows the breakdown of resident and designated representatives comments for the question 'is there anything that could be improved?'

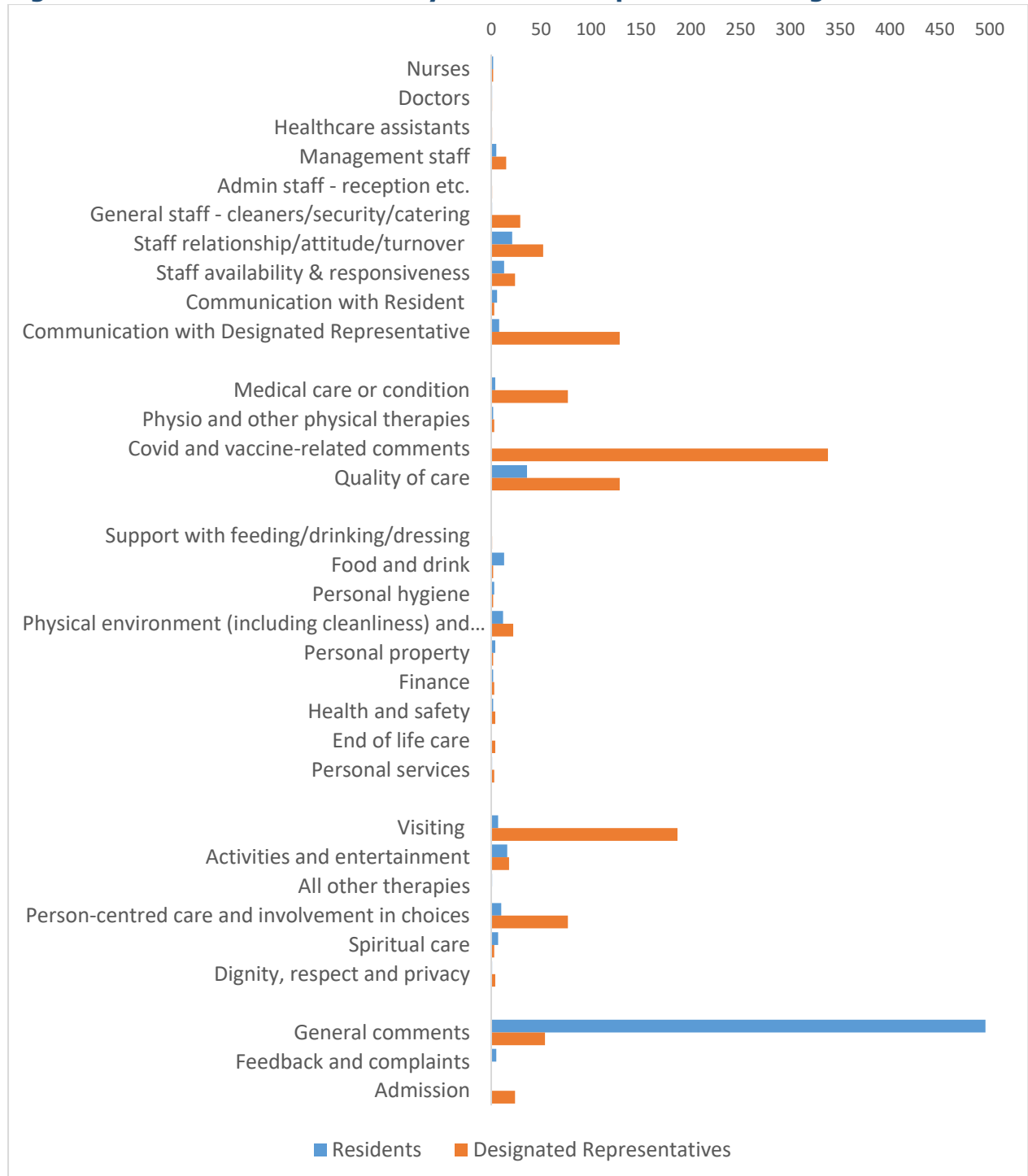
Figure 4 Number of comments for each theme for 'is there anything that could be improved?'



Experiences during the Covid-19 pandemic

Figure 5 shows the breakdown of resident and designated representatives comments for the question 'Do you have any comments about how the COVID-19 pandemic affected the care you received here or your overall experience here during that period? If so, please elaborate.'

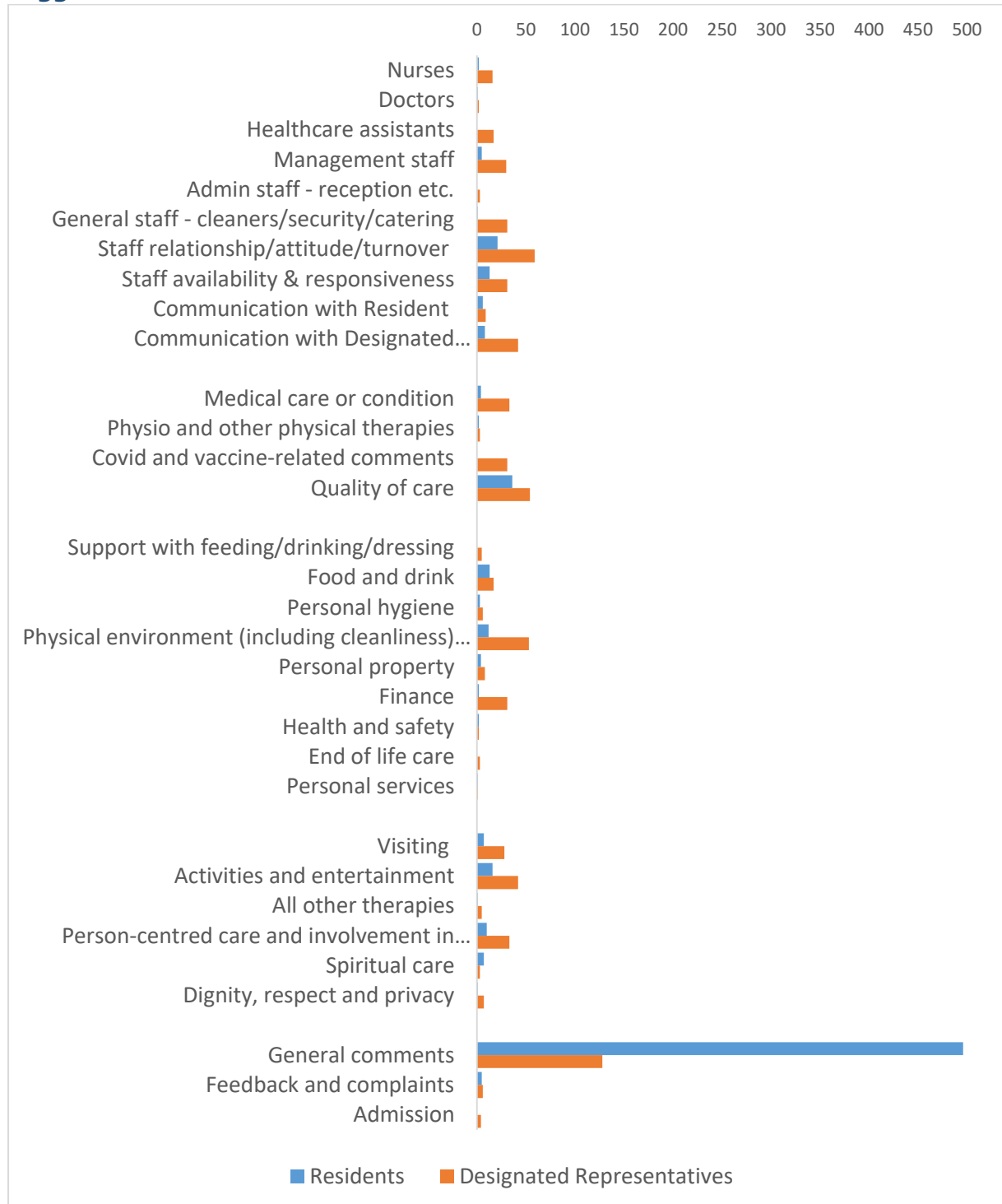
Figure 51 Number of comments by theme for 'experiences during Covid'.



Other comments or suggestions

Figure 6 shows the breakdown of resident and designated representatives comments for the question 'do you have any other comments or suggestions? If so, please elaborate.'

Figure 6 Number of comments for each theme by 'other comments or suggestions'



Anonymisation of qualitative data

All qualitative responses were anonymised. Whether on paper or online, the same set of procedures was followed. The overarching principle guiding these procedures was the protection of the anonymity of individuals, including respondents and hospital staff.

3.6 Quality assurance of qualitative data

The following processes assured the quality of these data:

- audits of paper-based responses against the data entered online confirmed high levels of accuracy in the transcription of the handwritten comments to the online system.
- the National Nursing Home Experience Survey team at HIQA reviewed all comments to check that they had been anonymised in accordance with the agreed redaction protocols. Only then was the data released to the online reporting facility for hospitals to review.

3.7 Publication of results

In November 2022, the National Nursing Home Experience Survey team published one overview report, as well as individual reports on the findings for residents and the findings for relatives and friends. [Tableau data visualisation](#) was embedded on <https://yourexperience.ie/> and allows site visitors to further examine the results. It should be noted that nursing home staff and other specific stakeholders had been granted access to a 'real-time' online reporting platform where they could view their performance in the survey as the data were being processed. Access to this information prior to the publication of reports allowed participating nursing homes to be proactive and to identify opportunities for improvement at an early stage.

Taken together reports were designed to:

- provide a clear description of the key features of nursing home experience at the national levels, pointing to areas of good experience and areas needing improvement in the system at national and nursing home levels.
- together with other data and information sources, provide a robust basis for the development of initiatives designed to improve experiences with nursing homes for all nursing homes.
- together with other data and information sources, enable the identification of policy priorities at the national level.
- provide a basis for benchmarking progress over time, following future surveys.

All published reports can be downloaded from <https://yourexperience.ie/nursing-homes/about-the-survey/> .

3.8 Survey findings, quality improvement and next steps

Nursing homes have begun to 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 shared on www.yourexperience.ie.

The National Care Experience Programme provided a template to support a structured approach towards improvement (see Appendix 7). The following resources are available on www.yourexperience.ie: a [suggested poster template](#) for nursing homes to share their insights, a [tips sheet](#) to aid the completion of the poster and also a [sample completed poster](#) template.

The Department of Health is using 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.

3.9 Next Steps

A lessons learned exercise was conducted. The findings of this process will inform the next iteration of the National Nursing Home Experience Survey.

The National Care Experience Programme Steering Group determines the frequency of all surveys. The group will agree on the most appropriate time to conduct this survey again which will allow us to understand what improvements to service and practice, based on the National Nursing Home Experience Survey 2022 have effectively improved the experience for residents and their next of kin.

Appendices

Appendix 1 Profile of participating nursing homes, national profile and profile of invited nursing homes

National profile of nursing homes.

Province		Provider type breakdown (N)			Bed occupancy range breakdown N			
Province		HSE	Private	Voluntary	≤20 beds	21-40 beds	41-99 beds	≥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 type breakdown (N)			Bed occupancy range breakdown (N)			
Province		HSE	Private	Voluntary	≤20 beds	21-40 beds	41-99 beds	≥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		Provider type breakdown (N)			Bed occupancy range breakdown (N)			
Province		HSE	Private	Voluntary	≤20 beds	21-40 beds	41-99 beds	≥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 2 Questions included in the survey with residents, and the survey with relatives and friends

Questions and Response Options from Resident Questionnaire			
Question	Question Text	Response Options	Theme
Q1	Do you find it homely here?	Yes, definitely Yes, to some extent No	Your living environment
Q2	Are you as involved as you would like to be in decisions about the care and support you receive?	Yes, definitely Yes, to some extent No I do not wish to be involved	Person-centred care
Q3	Are you involved as much as you want to be in planning ahead for any changes in your circumstances and your preferred care in the future?	Yes, definitely Yes, to some extent No	Person-centred care
Q4	Do you have an opportunity to ask questions when you want to?	Yes, always Yes, sometimes No I don't have any questions Don't know	Person-centred care
Q5	Overall, do you have confidence and trust in the staff who care for you here?	Yes, always Yes, sometimes No Don't know	Caregivers and staff in the nursing home
Q6	Overall, do you feel you are treated with respect and dignity by the staff who care for you?	Yes, always Yes, sometimes No Don't know	Caregivers and staff in the nursing home
Q7	Do staff here keep you safe and protect you from harm?	Yes, definitely Yes, to some extent No Don't know	Caregivers and staff in the nursing home
Q8	Do you receive help when you need it in daily tasks, such as eating your meals, getting dressed, or using the bathroom?	Yes, always Yes, sometimes No I don't require any help	Spending time here
Q9	Do you have enough privacy in this nursing home?	Yes, always Yes, sometimes No Don't know	Your living environment
Q10	Are your dietary needs and choices taken into account in the food that is served?	Yes, always Yes, sometimes No I do not have any requirements or preferences	Food and nutrition

Q11	Were you involved as much as you wanted to be in the decision to move into this nursing home?	Yes, definitely Yes, to some extent No Don't know/can't remember	Admission/moving into the nursing home
Q12	Before you moved in, did you receive enough information about what life would be like here?	Yes, definitely Yes, to some extent No Don't know/can't remember	Admission/moving into the nursing home
Q13	When you moved in, were you supported to keep in touch and maintain relationships with family or friends?	Yes, definitely Yes, to some extent No Don't know / Can't remember	Admission/moving into the nursing home
Q14	Are the staff here knowledgeable about the care and support you need?	Yes, definitely Yes, to some extent No Don't know	Caregivers and staff in the nursing home
Q15	Do the people who work here check in with you often enough to see if you need anything?	Yes, definitely Yes, to some extent No Don't know	Caregivers and staff in the nursing home
Q16	Is there a staff member who you can talk to about your worries and fears?	Yes, always Yes, sometimes No I have no worries or fears	Caregivers and staff in the nursing home
Q17	Do you get to decide how you spend your day?	Yes, definitely Yes, to some extent No I don't wish to provide input	Spending time here
Q18	Are you supported to take part in activities that interest you?	Yes, always Yes, sometimes No Don't know	Spending time here
Q19	Do you have enough control over the visits you receive here?	Yes, definitely Yes, to some extent No Don't know	Spending time here
Q20	Besides visits, are you enabled to stay in contact with the people you would like to stay in contact with?	Yes, definitely Yes, to some extent No Don't know/ I don't have anyone to stay in contact with	Spending time here
Q21	If you have a visitor, can you find a place to talk to them in private, other than your bedroom?	Yes, always Yes, sometimes No	Spending time here

		Don't know/I don't normally have visitors	
Q22	Are you able to mark special occasions in the way that you would like?	Yes, definitely Yes, to some extent No Not relevant to my situation	Spending time here
Q23	In your opinion, how clean is the nursing home?	Very clean Fairly clean Not very clean Not at all clean	Your living environment
Q24	Do you have as much control as you would like over your personal finances?	Yes, definitely Yes, to some extent No I have asked someone else to look after my finances for me	Your living environment
Q25	Are your belongings and personal items safe here?	Yes, definitely Yes, to some extent No	Your living environment
Q26	Are you able to make choices about your daily routine?	Yes, definitely Yes, to some extent No	Person-centred care
Q27	Are you encouraged to be as independent as you are able to be?	Yes, always Yes, sometimes No Don't know	Person-centred care
Q28	When receiving support with personal care and hygiene, do you feel that staff respect your privacy and do not rush you?	Yes, always Yes, sometimes No I don't require any support with personal care and hygiene	Person-centred care
Q29	If you want to make an appointment with a GP or family doctor are you supported to?	Yes, definitely Yes, to some extent No Don't know/I have not needed to talk to my GP	Person-centred care
Q30	If you want to see a healthcare professional (such as a Physiotherapist, Occupational Therapist, Speech and Language Therapist, Dietician, Chiropody, Optician, Dentist) about a condition, treatment or tests, do you have enough opportunity to do so?	Yes, definitely Yes, to some extent No Don't know/I have not needed to see a healthcare professional	Person-centred care

Q31	Do staff in the nursing home support your family members and or friends to be as involved in your care as you would like them to be?	Yes, definitely Yes, to some extent No I do not want them to be involved	Person-centred care
Q32	Do the staff support you to practice your religious or spiritual needs?	Yes, always Yes, sometimes No Not relevant	Person-centred care
Q33	Are you encouraged to speak up about things you don't like here if you don't agree with something?	Yes, definitely Yes, to some extent No Don't know	Person-centred care
Q34	Thinking about your overall care, if you wish to give feedback or make a complaint, do you know how and where to do so?	Yes No	Person-centred care
Q35	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 I wanted to make a complaint but was not able to	Person-centred care
Q36	Do you know how to access organisations that can support you to express your views and wishes, and to help you to assert your rights?	Yes, definitely Yes, to some extent No Not relevant to my situation	Person-centred care
Q37	How would you rate the food served here?	Very good Good Fair Poor Don't know	Food and nutrition
Q38	Are you offered a choice of food?	Yes, always Yes, sometimes No	Food and nutrition
Q39	Do you get enough support from staff to eat your meals?	Yes, always Yes, sometimes No I do not need support to eat meals	Food and nutrition
Q40	Do you get enough fresh water to drink?	Yes, always Yes, sometimes No	Food and nutrition

Q41	Can you get snacks and drinks outside of mealtimes if you want to?	Yes, always Yes, sometimes No	Food and nutrition
Q42	Overall, how would you rate your experience here? 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
Q43	In what year were you born?	(Select Year)	About you
Q44	Are you:	Male Female Other Prefer not to say	About you
Q45	In total, about how long have you lived here?	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 you
Q46	Do you currently share a bedroom with other residents here?	Yes No	About you
Q47	Do you currently share a bathroom with other residents here?	Yes No	About you
Q48	Please 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

Q49	Overall, is there anything particularly good about the care here?	(Comment)	Free-text responses
Q50	Is there anything that could be improved? (For example, are there activities that you would like to engage in that you currently cannot? Do you feel limited by anything here?)	(Comment)	Free-text responses
Q51	Do you have any comments about how the COVID-19 pandemic affected the care you received here or your overall experience here during that period? If so, please elaborate.	(Comment)	Free-text responses
Q52	Do you have any other comments or suggestions? If so, please elaborate.	(Comment)	Free-text responses

Questions and Response Options from Designated Representative Questionnaire			
Question	Question Text	Answers	Theme
Q1	Is the nursing home a homely place to live?	Yes, definitely Yes, to some extent No	The living environment in the nursing home
Q2	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
Q3	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
Q4	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
Q5	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
Q6	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
Q7	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
Q8	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
Q9	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
Q10	If you need to get information from the nursing home, do you receive it in a timely manner?	Yes, always Yes, sometimes No I haven't requested information from the nursing home	Moving into the nursing home
Q11	Before your relative or friend moved in, did you receive	Yes, definitely Yes, to some extent	Your experience of caregivers and

	enough information about the nursing home?	No Don't know/can't remember	staff in the nursing home
Q12	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
Q13	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
Q14	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
Q15	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
Q16	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
Q17	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
Q18	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
Q19	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
Q20	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
Q21	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

Q22	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
Q23	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
Q24	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
Q25	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
Q26	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
Q27	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
Q28	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
Q29	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
Q30	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
Q31	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

Q32	Is your relative or friend offered a choice of food?	Yes, always Yes, sometimes No Don't know	Food and nutrition
Q33	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
Q34	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
Q35	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
Q36	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
Q37	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
Q38	Why does your relative or friend live in this nursing home?	(Comment)	About your relative or friend
Q39	In what year was your relative or friend born?	(Select Year)	About your relative or friend
Q40	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
Q41	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:	About your relative or friend

		<p>African Any other black background Asian or Asian Irish: Chinese</p> <p>Indian/Pakistani/Bangladesh i Another Asian background Other, including mixed group/background: Arabian Mixed, please specify: Other, please write your ethnic group here: Prefer not to say</p>	
Q42	What is your relationship to the resident?	<p>Husband / Civil Partner / Partner Wife / Civil Partner / Partner Son / Daughter Brother / Sister Son in Law / Daughter in law Parent Other relative Friend Neighbour Staff in care home Other:</p>	About you
Q43	Are you:	<p>Male Female Other Prefer not to say</p>	About you
Q44	In what year were you born?	(Select Year)	About you
Q45	Please could you indicate which ethnic group you belong to:	<p>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:</p>	About you

		Arabian Mixed, please specify: Other, please write your ethnic group here: Prefer not to say	
Q46	Overall, is there anything particularly good about the care in the nursing home?	(Comment)	Free-text responses
Q47	Is there anything that could be improved?	(Comment)	Free-text responses
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?	(Comment)	Free-text responses
Q49	Do you have any other comments or suggestions?	(Comment)	Free-text responses

Appendix 3 Process Guide



Process guide for
Nursing Homes 2022

National Nursing Home Experience Survey

Process guide

Reference No: 04-002-00-GLS6

Revision No: 01

Author: National Nursing Home Experience Survey Team

Approved by: Rachel Flynn, Director, National Care Experience Programme

Effective from: December 2021

Review date: December 2023

National Nursing Home Experience Survey contact details

For queries regarding uploading your lists, please contact:

Contact: Tina Boland (Project Lead)

Email: tboland@hiqa.ie

Phone: 085 876 4265

Or:

Contact: Alice Reetham (Project Officer)

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1. Introduction

What is the National Nursing Home Experience Survey?

The National Nursing Home Experience Survey will offer nursing home residents and their family members or friends (designated representatives) the opportunity to share their experiences of nursing home care in Ireland. The purpose of the survey is to learn from their experiences in order to improve the safety and quality of care provided in nursing homes.

How does the Survey work?

The survey takes place in February 2022 and will use two different questionnaires:

The first questionnaire will capture residents' experiences of their nursing home and will comprise of a face-to-face interview which will be carried out by trained interviewers from Behaviour and Attitudes (B&A); a data processor which HIQA has contracted to administer the survey.

The second questionnaire will capture the experience of one family member or friend (a designated representative) of each resident. They will be sent a survey pack in the post. The pack will include an invitation letter, a Frequently Asked Questions leaflet, a hard copy survey questionnaire and a Free post envelope.

2. Informing residents and designated representatives about the National Nursing Home Experience Survey

2.1 What are nursing homes asked to do to?

- Nursing homes will be asked to inform residents and family members or friends (designated representatives) about the survey.
- In January 2022, compile and upload a dataset of participating resident contact details (Resident Contact Dataset) and a separate dataset of participating family members or friends contact details (Designated Representative Contact Dataset) to Behaviour & Attitudes. This process is outlined in more detail later.

2.2 What will the NCEP team do to support nursing homes?

- The NCEP team will provide ongoing support throughout the entire process and also provide all promotional material to support nursing homes to inform residents and designated representatives.
- We will send you information packs which you can distribute to residents and nominated family members to support nursing homes in communicating the survey with residents and designated representatives (family members/friends).

2.3 Opt-out process

Participation in the survey is voluntary. If a resident or a designated representative does not wish to take part in the survey, there are processes to facilitate opt-outs.

1. Nursing home residents can opt-out by:
 - informing a member of nursing home staff when initially informed about the survey by the nursing home or upon receipt of the information pack.
2. Family members or friends (designated representatives) can opt-out by:
 - informing the nursing home upon receipt of the information pack.
 - calling the National Nursing Home Experience Survey Freephone number: 1800 314 093.
 - logging on to www.yourexperience.ie
 - emailing info@yourexperience.ie

No further communication will be sent to any individual who has opted out. The participant's details will be destroyed at the end of the survey cycle.

3. National Nursing Home Experience Survey contact datasets

In order to organise face-to-face interviews with nursing home residents and to administer a postal survey to family members or friends (designated representatives), nursing homes will be asked to compile two contact lists/datasets:

1. **The Resident Contact Dataset**, which will consist of:

- the contact details of residents from the nursing home who are eligible to take part in the survey (face-to-face interviews).

Each nursing home will be asked to inform residents about the survey prior to uploading their contact details.

2. **The Designated Representative Contact Dataset**, which will consist of:

- the contact details of designated representatives of residents from the nursing home who wish to take part in the survey (postal survey).

Each nursing home will be asked to inform designated representatives about the survey prior to uploading their contact details.

3.1 National Nursing Home Experience Survey eligibility criteria

In order to take part in the survey, eligible participants must be:

- **Resident eligibility:**
a resident of a participating nursing home with the functional ability⁴ to participate in an interview.
- **Designated representative⁵ eligibility:**
one family member or friend of a resident in a participating nursing home.

The family member or friend (designated representative) can take part in the postal survey, independent of whether the resident takes part in an interview or not and vice versa.

Table 1 below sets out the criteria for those who **should not** be included in the National Nursing Home Experience Survey contact datasets:

- residents who do not have the functional ability to participate in an interview.
- designated representatives who do not have a postal address in the Republic of Ireland.

Table 1: National Nursing Home Experience Survey exclusion criteria

⁴ The functional ability of residents to participate will be based on their physical, psychological, cognitive, and social ability to perform normal daily activities required to meet basic needs, and maintain health and wellbeing.

⁵ The designated representative may include a family member, a friend, or any other individual who acts as a point of contact for the resident.

4. Compiling and uploading the contact datasets

The guidelines for collating and uploading the 1) Resident Contact Dataset, and 2) Designated Representative Contact Dataset, are as follows:

Please use the Microsoft Excel template provided to create your dataset.

Please refer to Appendix 2 for instructions on how to upload the dataset.

4.1 Resident Contact Dataset

- The names of all residents who are taking part in an interview will be compiled into a **Resident Contact Dataset** by each nursing home. The required information for this dataset is shown in Table 2 below:

Name	Format - example
First name	Ciara
Family name	Murphy
Nursing home name	Oak Nursing Home
Nursing home code A unique code has been assigned to each nursing home in due course.	onh

Table 2: Required information for the Resident Contact Dataset

The Resident Contact Dataset will then be uploaded to your secure folder in January 2022 (see Appendix 2 for instructions). A specific upload date will be assigned to each nursing home.

A code has been assigned by email to each nursing home, which must be used in the file names for the contact dataset. Please contact Tina if you need your code resent.

Files should be titled on the **resident contact dataset** as follows:

- your assigned nursing home code_date of upload to B&A_RES_QA.
For example, Oak Nursing Home should have the following filename:
ONH_190122_RES_QA

Please ensure you put QA (quality assurance) at the end of your filename. This confirms that your contact dataset is ready for download. You can then upload your dataset to your secure folder which we will set up for you.

4.2 Designated Representative Contact Dataset

- The names of family members or friends (designated representatives – one for each resident) who wish to take part in the postal survey will be compiled into a **Designated Representative Contact Dataset** by each nursing home. The required information for this dataset is shown in Table 4 below:

Name	Format - example
First name	James
Family name	Murphy
Address line 1	Current address
Address line 2	Current address
Address line 3	Current address, if applicable
Address line 4	Current address, if applicable
Address line 5	Current address, if applicable
Eircode (if available)	A65 F4E2
Nursing home name	Oak Nursing Home
Nursing home code A unique code has been assigned to each nursing home in due course.	ONH

Table 4: Required information for the Designated Representative Contact Dataset

The Designated Representative Contact Dataset will then be uploaded to your secure folder on the assigned date as per Table 5 below. This date applies to all nursing homes. Please see Appendix 2 for instructions on how to upload your list.

Task for nursing homes	Deadline for upload of contact dataset
Upload the Designated Representatives Contact Dataset.	Upload contact dataset by 5pm on Wednesday, 12 January 2022

Table 5: Schedule for submitting the Designated Representative Contact Dataset

A code has been assigned by email to each nursing home, which must be used in the filenames for the contact dataset. Please contact Tina if you need your code resent.

Files should be titled on the **designated representative contact dataset** as:

- your assigned nursing home code_date of upload to B&A_DESREP_QA.

For example, Oak Nursing Home should have the following filename:

ONH_120122_DESREP_QA

Please ensure you put QA (quality assurance) at the end of your filename following your data quality check outlined in Section 5 on the next page. This confirms that your National Nursing Home Experience Survey contact dataset is ready for download.

You can then upload your dataset to your secure folder.

4.3 Security arrangements for contact datasets

The National Nursing Home Experience Survey complies with data protection laws including the General Data Protection Regulation (GDPR) and the Data Protection Act 2018. Eligible participants' information will be used for the sole purpose of the survey and will be deleted as soon as the survey is complete. Further details can be found on www.yourexperience.ie. Each nursing home is responsible for ensuring that their National Nursing Home Experience Survey contact datasets are secure.

5. Review of data quality

Below is a checklist of items to remember before uploading your datasets.

Data quality check	Description
1. All required fields are captured and complete.	<ul style="list-style-type: none"> All fields should be recorded in the format as per Table 2 and Table 4 above.
2. The dataset is free of unnecessary characters.	<ul style="list-style-type: none"> Examples include commas, full stops, etc., as these can interfere with the recognition of your nursing home by the software collating the contact datasets.
3. The nursing home name and nursing home code is correct.	<ul style="list-style-type: none"> Please note the assigned code for your nursing home.
4. Check the file is saved appropriately with the correct filename and nursing home code.	<ul style="list-style-type: none"> For example, Oak Nursing Home: XXX_190122_RES_QA. XXX_190122_DESREP_QA.

Please ensure you put QA (quality assurance) at the end of your filename. This confirms that your National Nursing Home Experience Survey contact dataset is ready for download.



National
Nursing Home
Experience
Survey



Appendix 4 – National Nursing Home Experience Survey Frequently Asked Questions

General

What is the National Nursing Home Experience Survey?

The National Nursing Home Experience Survey is a new survey of nursing home care in Ireland. The survey asks nursing home residents and their loved ones about their experiences in order to improve the safety and quality of nursing home care.

Who is running the survey?

The National Nursing Home Experience Survey is part of the National Care Experience Programme – a partnership between the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health.

Who was invited to participate in the 2022 survey?

A selection of nursing homes, representative of the entire population of nursing homes in Ireland, was selected to participate in the survey.

People who lived in participating nursing homes at the time of the survey, and one family member or friend (a designated representative) of each resident, were invited to take part in the survey.

When did the survey take place?

The survey took place between March and May 2022.

Where can I find the results of the survey?

The [results](#) of the National Nursing Home Experience Survey are published on our website.

For survey participants

What types of questions were asked in the survey?

You can view the survey questionnaires on our website:

[2022 Resident survey questionnaire](#)

[2022 Designated Representative survey questionnaire](#)

What will you do with my answers?

Responses to the National Nursing Home Experience Survey will be analysed and reported on. The information we get from this survey will help improve the quality of

care provided in nursing homes in Ireland. The findings will be acted on to introduce improvements at local and national level.

You can [sign up here](#) to be notified when the results are available.

Will my answers be treated confidentially?

Yes. Your answers will be processed in strict confidence and kept separately from your contact details. Your answers will be solely used for analysis to improve the care provided in nursing homes. Anonymised data from the National Nursing Home Experience Survey may be used for secondary analysis in the future by health service researchers under agreed conditions. They will not be shared with commercial entities or used for commercial purposes.

Does the National Nursing Home Experience Survey comply with data protection laws?

Yes. The National Nursing Home Experience Survey complies with data protection laws, including the General Data Protection Regulation (GDPR) and Data Protection Act 2018. Your contact details will be used for the sole purpose of inviting you to take part in the National Nursing Home Experience Survey. Further details can be found at www.yourexperience.ie.

Where can I find out more?

More information is available on our nursing home survey section [Link [About the survey - National Care Experience Programme \(yourexperience.ie\)](#)]

Freephone

1800 314 093

Email

info@yourexperience.ie

Postal Address

The National Nursing Home Experience Survey
c/o Health Information and Quality Authority
George's Court George's Lane Dublin 7 D07 E98Y

Appendix 5

[Date]

Survey Code: [Survey Code]

Nursing home name: [Nursing Home Name]

Dear [Name]

Tell us about your experience and help us improve nursing home care

We are delighted to invite you to take part in the National Nursing Home Experience Survey – the first ever national survey capturing the experiences of residents in nursing homes in Ireland.

The survey is being carried out by the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health. Your feedback is very important to us and will help us to identify where improvements to nursing home care are necessary. The results of the survey will be published on www.yourexperience.ie.

We have chosen a selection of nursing homes, representing the national profile of nursing homes in Ireland, and we are very pleased to let you know that [Nursing Home Name] has been selected to take part. You have been identified as a family member or friend (a designated representative) of a resident in [Nursing Home Name] and we would like to hear about your unique experience of this nursing home.

Over the next few weeks, we also look forward to holding short interviews with residents who wish to share their own experience. By understanding the perspectives of both residents and their family or friends, the National Nursing Home Experience Survey will provide a rich understanding of life in Ireland's nursing homes.

Participation in the survey is voluntary and takes approximately 20 minutes of your time to complete. The survey is completely **confidential** and the answers you provide will be **anonymised**. It is very important to hear the views of family members and friends as part of this survey and this is why we are contacting you. All personal contact details will be deleted once the survey is complete.

There are two ways to complete the survey:

1. **Online** at survey.yourexperience.ie. Log on using your unique Survey Code, which can be found in the top right-hand corner of this letter.
2. By **Freepost** by returning the completed survey in the enclosed Freepost envelope (no stamp needed).

Please complete the survey within two weeks of receiving this letter.

Participation is voluntary and, while we would love to hear about your experience, it is possible to opt out by:

- going to www.yourexperience.ie and entering your Survey Code,
- calling our Freephone number on 1800 314 093, or
- returning the blank survey in the Freepost envelope.

If you choose not to take part in the survey, it will not affect the care your family member or friend receives in the nursing home now or in the future.

Once anonymised, responses will be retained for additional analysis, including comparisons with future National Nursing Home Experience Surveys.

Many thanks for participating in the National Nursing Home Experience Survey 2022.

We look forward to hearing about your experience.

Yours sincerely,



Rachel Flynn

Director of the National Care Experience Programme

Appendix 6 Reminder letters for designated representatives

[NAME & ADDRESS]

[Date]

Survey Code: [Survey Code]

Nursing Home Name: [Nursing Home
Name]



Scan to complete
online

Dear [Name]

Tell us about your experience and help us improve nursing home care

About two weeks ago, you received an invitation to take part in the National Nursing Home Experience Survey to tell us about your experience of the care provided in [Nursing Home Name].

We have not yet received your response and would like to ask you to tell us about your experience by filling out the survey.

If you have already completed the survey, thank you, and please accept our apologies for sending you this reminder.

There are two ways to complete the survey:

1. **Online** at survey.yourexperience.ie. Log on using your unique Survey Code, which can be found in the top right-hand corner of this letter.
2. By **Freepost** by returning the completed survey in the Freepost envelope which was enclosed in our first letter to you.

Your response is really important as it will provide a deeper understanding of the experience of residents within Ireland's nursing homes, helping us to identify areas for improvement. The survey will close on 30 May 2022.

If you would like further information or have any questions on how to complete the survey, please email us at info@yourexperience.ie or call our Freephone number on 1800 314 093 (Monday-Friday, 9am-5pm).

Participation in the survey is voluntary and takes approximately 20 minutes to complete. The survey is completely confidential and the answers you provide will be anonymised.

If you do not want to take part in this survey and would prefer not to receive further information about it, you can opt-out by:

- going to www.yourexperience.ie and entering your Survey Code,
- calling our Freephone number on 1800 314 093, or
- returning the blank survey in the Freepost envelope.

If you choose not to take part in the survey, it will not affect the care your family member or friend receives now or in the future in any way. By participating in this survey, you are helping to improve care for all nursing home residents in Ireland.

Thank you for taking the time to read this letter.

Yours sincerely,



Rachel Flynn

Director of the National Care Experience Programme

[NAME & ADDRESS]

[Date]

Survey Code: [Survey Code]

Nursing Home Name: [Nursing Home
Name]



Scan to complete
online

Dear [Name]

Tell us about your experience and help us improve nursing home care

Around four weeks ago, you received an invitation to take part in the National Nursing Home Experience Survey to tell us about your experience of the care provided in [Nursing Home name].

We have not yet received your response and would like to ask you to tell us about your experience by filling out the survey. Knowing more about your experience will help us improve nursing home care for all residents.

If you have already returned your survey, thank you, and please accept our apologies for sending you this reminder.

There are two ways to complete the survey:

1. **Online** at survey.yourexperience.ie. Log on using your unique Survey Code, which can be found in the top right-hand corner of this letter.
2. By **Freepost** by returning the completed survey in the enclosed Freepost envelope (no stamp needed).

Your response is really important as it will provide a deeper understanding of the lived experience within Ireland's Nursing Homes and therefore will help to identify what improvements are necessary to improve the experience within Irish nursing homes. The survey will close on 30 May 2022 and we would be grateful if you would return the survey online or by post by then.

If you would like further information or have any questions on how to complete the survey, please email us at info@yourexperience.ie or call our Freephone number on 1800 314 093 (Monday-Friday, 9am-5pm).

Participation in the survey is voluntary and takes approximately 20 minutes to complete. The survey is completely confidential and the answers you provide will be anonymised.

If you choose not to take part, it will not affect the care your family member or friend receives now or in the future in any way.

By participating in this survey, you are helping to improve care for all nursing home residents in Ireland.

Thank you for taking the time to read this letter.

Yours sincerely,



Rachel Flynn

Director of the National Care Experience Programme

Appendix 7 – Use of the Survey Findings resource

The National Nursing Home Experience Survey

This process has been developed to support management and staff in nursing homes in Ireland to identify, prioritise, implement and evaluate initiatives that aim to improve the experiences of nursing home residents and their families and friends.

The process is presented in four sections:

1. Identifying areas for improvement
2. Prioritising areas for improvement
3. Selecting improvement initiatives
4. Implementing improvement initiatives

This process can be used by all nursing homes in Ireland – those who participated in the National Nursing Home Experience Survey and those who did not. Those who participated in the National Nursing Home Experience Survey will be able to use findings from the survey directly relevant to their own nursing home, whereas other nursing homes may have to find out more about the current situation in their own nursing homes.

The HSE has developed a Quality Improvement Toolkit which can be used to further support the development of quality improvement initiatives in a range of healthcare settings.

1. Identifying Areas for Improvement

This portion of the process is organised according to the main themes in the survey. For each theme in the survey, the process asks the user to:

- Describe the current context in relation to that theme
- Note any reflections on the theme (for example, are some issues in the theme of particular concern, or is some specific segment of the resident population more affected by a particular issue than others)
- identify if there is an opportunity for improvement under that theme. If possible the opportunity for improvement should be specifically stated (e.g., make snacks available to all nursing home residents outside of specified mealtimes). At this stage of the process, however, it is acceptable for the 'opportunity for improvement' identified to be broad (e.g., improve resident's involvement in decision making).

An additional row is included in the table for nursing homes to address an issue or theme that they feel is important in their nursing home, but is not encompassed by the themes in the National Nursing Home Experience Survey.

Theme	Issues Addressed	Current Context	Reflection	Opportunity for improvement
Admission	Involvement in the decision to move Information received Support to settle in to the nursing home			
Caregivers	Confidence and trust in staff Treated with dignity and respect Knowing who to contact Feeling safe and protected from harm Receiving information in a timely manner Staff are knowledgeable about the care required Staff check in on residents Residents feel they can talk to staff Communication Emotional wellbeing			
Spending Time	Residents get help when they need it Residents can decide how they spend their day Residents are supported to take part in activities that interest them Residents have control over the visits they receive			

	<p>There are sufficient opportunities to visit</p> <p>Residents are supported to keep in contact through means other than visits</p> <p>Residents can find a private space for a visit outside of their bedroom</p> <p>Visitors feel welcomed</p> <p>Residents can mark special occasions</p>			
Living Environment	<p>Homeliness</p> <p>Privacy</p> <p>Cleanliness</p> <p>Control over finances</p> <p>Belongings are safe</p>			
Person Centred Care	<p>Involvement in decisions</p> <p>Involvement in care planning</p> <p>Opportunity to ask questions</p> <p>Choice in daily routine</p> <p>Encouraged to be independent</p> <p>Support with personal care</p> <p>Support with daily routine</p> <p>Access to GP and other healthcare professionals</p> <p>Advocacy organisations</p> <p>Family involvement</p>			

	<p>Supported to practice religion</p> <p>Advocacy organisations</p> <p>Family involvement in care</p> <p>Encouraged to voice concerns</p> <p>Making complaints</p>			
Food	<p>Dietary needs</p> <p>Food rating</p> <p>Food choices</p> <p>Support when eating</p> <p>Drinking water available</p> <p>Snacks available outside of mealtimes</p>			
Overall Experience	<p>Rating of overall experience</p>			
Other	<p>An issue in the nursing home not covered by the themes in the National Nursing Home Experience Survey.</p>			

2. Prioritising Areas for Improvement

This portion of the process assists nursing home staff in prioritising the opportunities for improvement identified in first portion of the process. Users of the process are asked to rank the identified opportunities for improvement in terms of priority, under the column titled 'Priority Rank'. The opportunities for improvement are ranked in numerical order in terms of priority, under the column titled 'priority rank' (1 meaning that the needs are the highest priority, etc.).

In determining this ranking, the user should consider the impact of the issue on residents, and whether it is something that is under the control of the nursing home to address.

The 'Rationale' column allows the user to provide a clear and succinct statement for the rating applied to each opportunity for improvement. For example, if an opportunity for improvement may have a relatively low impact on nursing home residents, but may improve the experience of their family and friends with the nursing home and the issue could easily be addressed by the nursing home so it may receive a higher priority than an issue than an issue that has a high impact on residents but is beyond the control of the nursing home to address by themselves (e.g., national policies).

Opportunity for improvement	Impact on residents (or family & friends)	Causes of issues	Priority Rank	Rationale

3. Selecting improvement initiatives

This portion of the process supports nursing homes in identifying projects or initiatives to respond to the issues prioritised in the second portion of the process.

The process asks the user to consider:

- current activities within the nursing home relevant to the priority issue.
- the desired future state (for example, what outcome is desired from addressing the priority issue?)
- what different options there are to address the identified priority issue.
- the preferred course of action in relation to the priority (issues such as feasibility, budget, staffing levels, resident preferences will inform this decision).

Priority issue	Current Activities	Desired future state	Options	Preferred Course of Action

4. Implementing Improvement Initiatives

This portion of the process supports nursing homes to implement the preferred course of action identified in the third portion of the process.

The following should be considered when completing this portion of the process:

1. Have the perspectives of a variety of people (e.g. residents, staff, family members and friends), been taken into account?
2. Is there a clear connection between the priority issue, the aims and objectives, what will be done and the changes expected?
3. Have measures been identified to help to inform the outcome of the review?

Priority issue	Aim and objectives	What are we going to do?	What changes will we see?	Who is responsible for what?	Review dates to check we are on track	Outcome of review



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