Making sense of patient experience evidence

Our scoping review identified 37 different types of PE feedback 'on offer' to staff within UK hospitals... within these types, there are currently no 'ready to use' data sets for informing and monitoring improvements to [patient experience], apart from mandated data relating to high level organizational trends.

Marsh, C. et al., 2019. Patient experience feedback in UK hospitals: What types are available and what are their potential roles in quality improvement (QI)? Wiley Health Expectations.
http://pexlib.net/?198366

Indeed, the distinction between different uses of data within improvement is not a new one and in 1997, "The 3 Faces of Performance Measurement" were outlined: data used for accountability (outcome measurements of interest to external parties, eg, funders and regulators), data for improvement process (detailed information to aid identification of problems, opportunities for change and monitoring of success) and data for research (generating universal knowledge)

Marsh, C. et al., 2019. Patient experience feedback in UK hospitals: What types are available and what are their potential roles in quality improvement (QI)? Wiley Health Expectations.
http://pexlib.net/?198366

...quantitative surveys [are] the most frequently collected type of patient experience data (often mandated) but the least acceptable to healthcare teams with respect to use within quality improvement". On the other hand, there is "an apparent sense of nervousness amongst hospital teams surrounding the use of qualitative data as it is regarded as time-consuming to collect and difficult to interpret without bias".

Marsh, C. et al., 2019. Patient experience feedback in UK hospitals: What types are available and what are their potential roles in quality improvement (QI)? Wiley Health Expectations.
http://pexlib.net/?198366

If feedback is to be used more frequently within quality improvement, more attention must be paid to obtaining and making available the most appropriate types.

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http://pexlib.net/?198366

Patient feedback is a potentially useful source of information which could be used to drive improvement [however] enthusiasm for its collection is not quite matched by the capacity to turn data into insight... the eagerness for collecting [data] dissipates into confusion as busy staff struggle to transform reams of patient comments into useful information. The inevitable result is that, despite the best efforts of staff, information which patients share in good faith is wasted.

http://pexlib.net/?168288
Previous research has highlighted the disconnect between the collection of patient feedback, a relatively straightforward endeavour and its subsequent use to drive improvement activity - a far more elusive task.

http://pexlib.net/?168288

Staff across health systems consider patient feedback to be valuable but have neither the time nor the expertise to use it... In order for patient-reported feedback to be an effective improvement tool, and avoid the ethical grey zone around soliciting patient input and not acting on it, feedback programs need to make efforts to facilitate data comprehension and use.

Flott, K. et al., 2018. Improving the Usefulness and Use of Patient Survey Programs: National Health Service Interview Study. Journal of Medical Internet Research Volume 20, Issue 4
http://pexlib.net/?174569

The value of data for organizational quality improvement is not commensurate to the volume of data the system supplies. This misalignment is... in many ways, the consequence of national survey programs being set up to satisfy a national agenda rather than being designed with respect to local circumstances.

Flott, K. et al., 2018. Improving the Usefulness and Use of Patient Survey Programs: National Health Service Interview Study. Journal of Medical Internet Research Volume 20, Issue 4
http://pexlib.net/?174569

...gleaning information from experience data requires the same analytical capability as interpreting clinical data; however, that capability is often unavailable. Staff across health systems consider patient feedback to be valuable but have neither the time nor the expertise to use it.

Flott, K. et al., 2018. Improving the Usefulness and Use of Patient Survey Programs: National Health Service Interview Study. Journal of Medical Internet Research Volume 20, Issue 4
http://pexlib.net/?174569

The paradigm regarding patient experience feedback is heavily rooted in large national initiatives... which are accompanied by a sluggish bureaucracy and political concerns. It is likely that these initiatives are neither capturing, nor producing, what is most useful to the organizations trying to use patient feedback to improve care.

Flott, K. et al., 2018. Improving the Usefulness and Use of Patient Survey Programs: National Health Service Interview Study. Journal of Medical Internet Research Volume 20, Issue 4
http://pexlib.net/?174569

Considering the data set as a whole, possibly the most striking element is the overwhelming nature of the industry of patient experience feedback... Ward staff... reported feeling overwhelmed and fatigued by the volume and variety of data that the Trust collected.

http://pexlib.net/?181784
...only around one-quarter [of patient experience leads] were able to collect, analyse and use patient experience data in inpatient settings to support change.

University of Birmingham, October 2019. Evaluating the Use of Patient Experience Data to Improve the Quality of Inpatient Mental Health Care (Euripides).
http://pexlib.net/?201827

...the most striking element is the overwhelming nature of the industry of patient experience feedback. Ward staff... reported feeling overwhelmed and fatigued by the volume and variety of data that the Trust collected
http://pexlib.net/?181784

...you're flying blind with your service and you're just picking out bits of data from everywhere
http://pexlib.net/?49012

We are data rich, but we don’t bring it all together... It's a nightmare to see what's going on. Trying to triangulate between 12 different data sources coming from different angles, presented differently
http://pexlib.net/?49012

...staff find interpretation of [patient experience] data sets difficult or impossible... but there was no strategy in place or forthcoming at any of the three organizations we studied to address this issue
http://pexlib.net/?181784

...timeliness was seen as one of the main concerns with it being difficult to engage ward staff with data that are not real time. A specific example of this is the NHS Inpatient Survey where patient feedback is viewed months after it has been collected
http://pexlib.net/?181784

Despite many countries employing the use of national and large scale regional surveys to explore women's experiences of their maternity care, with the results informing national maternity policy and practice, the concept itself is ambiguous and ill-defined having not been subject of a structured concept development endeavour.

http://pexlib.net/?207968
We found that meaningful and sustained change occurred only when patient experience feedback was analysed alongside other performance data. In almost all case sites, different types of data were being held in silos. The triangulation of patient experience feedback with other data such as patient safety data, clinical outcomes data and complaints helped staff to spot trends or hotspots. Cause-and-effect relationships as regards serious incidents were much easier to link, and staff were more engaged in using data to understand and innovate within their services.

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Without the triangulation of data, quality improvement risks were being driven by targets alone. If a trust centralises its patient experience recording and reporting system and allows its quality improvement to be driven by external drivers, such as the CQC, complaints and serious incidents, staff disengage from collecting feedback and develop a siege mentality motivated by fear.

http://pexlib.net/?216782

......services need more systematic ways of using learning from patient experience data to translate this intelligence into effective action plans

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NHS trusts are required to collect experience data from patients. Currently, there is little understanding of what data are most important, what processes are in place to collect them and whether such data make any difference to the quality of patient experience. There are no widely established principles of data collection and analysis, and there is variability in how such data are used to inform and improve services.

http://pexlib.net/?216782