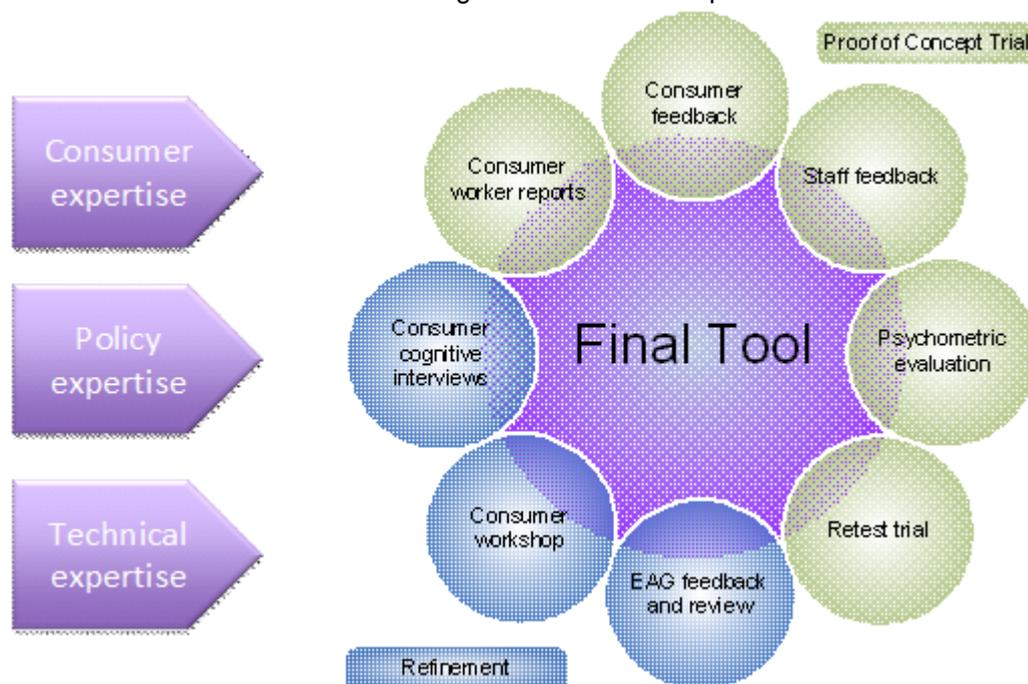


6. Survey Instrument Refinement

The EAG adopted a number of changes to the survey following review of the psychometric testing and the findings from the qualitative evaluation activities with consumer workers, consumers and staff, as outlined in this section. These changes were not unanticipated.



Questions were considered in terms of deletion and or revision.

Deletion of questions

We know from consumer feedback during the PoC trial that while the survey completion results were not adversely affected by the number of questions, consumers would have preferred the survey to be shorter and that a number of consumers reported not wanting to participate in the PoC because of perceived burden. There are also time and cost advantages of a shorter survey.

Questions were analysed to identify the contribution they made to the overall survey⁵ (see Table 19 which lists question item performance in rank order and Table 24 which lists impact of demographics on questions). As a result of this review six questions were deleted.

As part of the consideration to delete these questions, the impact on domain coverage (using the policy map of questions constructed at the commencement of the project) was also considered (see Table 11). As shown in the accompanying table, all experience domains retained target question coverage following survey revision.

⁵ While Q2 (Your opinions about the involvement of family or friends in your care were respected) was identified as of lower contribution to the survey statistically, it was retained unaltered as this question forms part of a group of questions about family and friends involvement, was unique and was important to both consumers and their carers.

Table 26: Impact of deleted questions on experience domains

Policy mapping of questions to Domains	Individuality	Choice and involvement	Attitudes, rights and respect	Information	Partnerships	Access	Safety	Physical environment	Outcome and recovery	Overall
Initial number of target questions per domain	5	5	6	2	2	5	2	1	3	1
Deletions per domain	(2)	(1)	-	-	-	(2)	-	-	-	-
Revised number of questions per domain	3	4	6	2	2	3	2	1	3	1

(see also Attachment 6 for experience domain coverage of refined questions)

The rationale for each question's deletion is provided in the accompanying table.

Table 27: Deletion of questions

Initial questions	Discussion
Q5. You were able to get in contact with this service when you needed (Domain: Access)	This question was highly correlated to questions related to seeing staff when you wanted and access to your treating doctor (Q4 and Q6). Consumer feedback had identified that consumers considered the staff to be the core aspect of the service. As consumers were currently accessing the service when completing the survey, the question of unmet need in terms of service entry or timely assessment may require an alternative audience and may be better targeted through specific surveys
Q7. You had access to a range of other professional services if you needed... (Domain: Access)	This question was not highly correlated to any other questions. In development this question had been described as including services from allied health to complementary therapists. On review, many of the issues intended to be covered by this question were seen as being covered in the Q27: development of a care plan that considers all of your needs.
Q10. You were able to do the things that were important to you while using this service (Domain: Individuality)	While not highly correlated with other questions, it was considered that the intent of this question was similar to that of Q22 around meaningful activities. Q22 was referred for further development through cognitive interviewing.
Q11. Staff caring for you took the time to get to know you as a person (Domain: Individuality)	This question was highly correlated with six other questions that covered the concept of individuality and respect. It was considered that this topic was well covered through these existing questions.
Q14. You were involved in planning your future care (Domain: Choice and involvement)	This question was highly correlated to six others, including questions related to opportunities to discuss progress (Q15) and being listened to in all aspects of care and treatment (Q13). The original intention of the question had been to explore discharge planning. Earlier versions of this question had performed poorly in cognitive testing. Poor performance of the question may have related to the timing of survey administration which was prior to service exit rather than at service exit. Other aspects of this question were felt to be covered in the Q27 about the development of a holistic care plan. Discharge planning may be better targeted through specific surveys.

Initial questions	Discussion
Q40. Is this the first time you have been a consumer of this service? (Domain: Demographics)	This demographic question was found to have no significant impact on how consumers rated experience questions. It was also found that consumers in the survey were three times more likely to identify themselves as first time users than found in service population figures. The discrepancy was higher for community consumers. This question lacked face validity and relevance to the consumer experience. First time users may be better targeted through specific surveys.

Changes to question wording

Utilising the evaluation framework previously noted, three questions were found to be under performing. These were questions that had been identified as of high importance to consumers during the survey development phase. Structured cognitive interviews facilitated by a consumer and technical researcher, were held with 8 Victorian mental health consumers to test any proposed question changes in a similar manner to that utilised in the survey development. Changes made to each question are outlined in the accompanying table.

Table 28: Changes to question wording

Initial questions	Discussion	Changed to
Q3. You felt safe to ask questions, provide feedback or make a complaint if you wanted	This question did not test well, and was noted to be unduly complex. It was felt the question had strayed from the original intent of freedom from reprisals if making a complaint.	You believe that you would receive fair treatment if you made a complaint
Q18. Staff ensured you understood the effects of your treatment options (including any medication, talking therapies, etc)	This question fell just short of the threshold for review. However, due to its importance to consumers (and relative underperformance) it was decided to do further cognitive interviewing to improve the question and its utility to the survey.	Staff discussed the effects of your medication and other treatments with you
Q22. You had things to do that were meaningful for you*	This question was only offered in the in-patient settings. It contributed little to the survey overall despite covering an important concept: relief from boredom. In the PoC many consumers reiterated the importance of activities in both the positive and negative open ended feedback	There were activities you could do that suited you

Question ordering

The order of questions, and how they are grouped or banked, has an impact on the ratings provided. It is therefore important that questions are maintained in fixed order once the survey is finalised and that additional questions that may be included from time to time (for example, service specific questions) are presented after the rating questions. Ideally, new questions should use the same scales as existing questions or clearly explain and highlight the change in scale to consumers.

In discussions with the EAG it was decided that, a logical order should be applied to the survey to assist consumers' ease of survey completion and that questions should be grouped around the consumer journey through a mental health service. To understand how consumers see this journey and the questions that would be relevant to each stage, a focus group was held with 15 NSW mental health consumers. During this focus group, consumers identified the major stages of the consumer journey (as themes for banking questions) and then ordered the questions within each bank to produce the final survey structure.

In open-ended questions, it will remain important that negative questions precede positive questions so consumers are able to express their poor experiences before moving on to note positive experiences. This was effective in the PoC.

Question numbering

It is likely that new questions will be included in the survey from time to time to update the content, capture local issues or new policy directions. To assist in managing this process each section of the survey has been labelled with a letter. This will allow new questions to be added to the end of a group without effecting the numbering of subsequent questions. It will also help identify the purpose of each question. The following labels have been used:

- E-1 to E-2 = Experience questions
- O-1 to O-4 = Outcome questions
- S-1 to S-n = Service questions
- F-1 to F-2 = Open ended or free test questions
- D-1 to D-7 = Demographic questions

New question

Through the PoC trial, consumers reinforced the importance of the opportunity for assistance to complete the survey to ensure that people of different levels of English literacy, cognitive impairment, etc, are able to provide their experience to the service. A question for assisted administration has been included at the end of the survey (which was tested in the consumer focus group) so that the potential impact of assistance on the results can be controlled.