



WEST LOTHIAN COUNCIL OCCUPATIONAL THERAPY (OT) SERVICE CUSTOMER CONSULTATION – SUMMARY REPORT

1 Introduction

The OT Service has participated in the council's own quality framework: West Lothian Assessment Model to assist in scrutiny of its performance and effectiveness. This encourages continuing year on year improvement. The service also currently holds Chartermark status and is working towards achieving the criterion for the new Customer Service Excellence Award. Key to these latter two areas is the requirement to evidence that the OT service is actively listening to 'customers' so that improvements in service delivery can be facilitated. A draft Consultation Strategy has been developed. A working group consisting of one manager and three staff has been instigated as the best interim means to take forward consultation that the service wishes to conduct. A consultation exercise has recently concluded. Information on this will be expanded on below.

2 Research Background

The OT service is currently generic, working across all age groups including Paediatrics and across the whole of West Lothian. Prior to this there were separate Adults and Older People services. The current assessment documents consist of a 'Complex' assessment document completed by Occupational Therapists and a 'Basic' assessment document completed by appropriately trained community care assistants dedicated to the OT service. The service wished to examine the customer's experience of the assessment process, the value of explaining criteria and the explicitness of the link to service standards within the assessment process. The aim was also to capture customer feedback prior to commencing a new assessment tool currently used in the main by Social Work colleagues i.e. the Single Shared Assessment carenap tool.

3 Methodology

3.1 Postal Survey

A questionnaire was endorsed, as it would allow respondents to submit opinion in confidence and with anonymity. There was no extra resourcing available; therefore this was the most cost effective mode. The working group chose to adapt an 'Assessment Experience Questionnaire' which had been part of a validated University research project (brought to the group's attention by one of its members). The questionnaire is divided into three distinct parts – 'before your assessment', 'during your assessment' and 'following your assessment'. The questionnaire was based on 12 questions to provide quantitative data from the respondents and also generate qualitative data via requests from comments. One question was designed to obtain a broad measure of current performance by asking customers to give an overall rating of the service. They were sent with a SAE, allowing customers a 3-week window of opportunity to respond before the cut off date of 21/08/09.

3.2 Piloting

As it is considered good practice the group decided to conduct a pilot before embarking on the consultation proper. During the pilot survey 50 questionnaires were posted and 18 returned. The response rate was 36% which is above the predicted average response rate of 24% (Robson 2002). Analysis of the pilot did not indicate that the questionnaire required amendment.

3.3 Covering Letter

To meet the requirements of the Data Protection Act, a covering letter stating the purpose for which the data was being collected was included, this would also encourage participation.

4 Sample Profile

4.1 Size

The group therefore choose a sample size of 300 with expectation (based on pilot survey) that return rate would be approximately a third i.e. 100. This was considered a representative customer sampling. The sample was derived from a statistical report provided on the customers who had received an OT assessment between 01/04/09 and 30/06/09.

4.2 Exclusions

Self-assessments and customers under the age of 18 years. It also did not include customers with a designated client category of Learning Disability, Dementia, Autism or Language & Communication Disorder. A postal survey is not the best methodology to capture feedback from these customers.

5 Analysis

135 questionnaires were returned, a 45% response rate; approximately 10% higher than the pilot response rate. The OT consultation achieved what is considered to be a good responses rate. In addition most questions within the questionnaire were fully responded to providing a relatively robust sampling for data analysis.

5.1 Quantitative Data

The established quantitative data was drawn from the specifically posed questions. See appendix: A

Responses covering scheduling of the assessment were encompassed in 3 questions. **Satisfaction rates across the questions posed ranged from 93–96% positive.**

Opinions on the actual assessment process were addressed via six questions. **Customer opinion was affirmative (positive) in the range 88–96%.**

Responses re experiences following assessment were addressed in two questions. **These elicited a positive acclamation ranging from 73–96%**

Finally a summative question was used to establish the customer's overall opinion of the service received. **This ranged from 1% poor to 75% excellent. In aggregate 96% rated the service either good or excellent.** See appendix: B

5.2 Qualitative Data

Obviously the breadth of quantitative data can be cross-referenced against more personalised qualitative data. Opportunity was afforded the customer to provide their personal opinion within the format.

Of the 135 people who responded, 54 took the time to write a comment(s). Specifically positive comments were made by 41 of these customers. For example "the whole process completed in a competent and professional manner", "empathetic in addition to being professional and diligent", "assessment was thorough", "the service is first class I could not wish for anything better", and "overall very high standard" being indicative of their satisfaction. In contrast 6 people viewed their experience negatively (2 people felt they were not listened to and 1 person stated they weren't offered advice re other possible help).

6 Conclusion

Outcomes: Overall analysis of the feedback received suggests that the vast majority of its customer base positively regards the O.T. service. In combination with a Score of 351 out of 500 in the WLAM assessment model, it appears that it is within the Council's own expectations for service delivery also. The well above average return on the survey can be indicative of the services connection with the customers, allowing specific conclusions to be drawn.

While qualitative acclamation of specific staff indicates that at the closest interface with the customer a sound rapport is achieved. Consideration however will have to be given to segmentation of customers groups in future consultations and the methodology for customers considered to be 'harder to reach' by dint of cognitive ability, sensory impairments etc, otherwise there is a risk of discriminatory practice.

The service has amended its referral acknowledgement letter to include a section for customers to denote if they would be willing to take part in consultation exercises in the future. It is hoped to build up a bank of willing participants that we could ask to assist us with customer feedback on the OT service and suggestions for improvements.

7 Objectives

Given the resultant data, conclusions extrapolated have a high veracity factor. The working group suggests the service takes forward the following:

1. Publish consultation results on the council's and CHCP websites and share consultation results with appropriate partners.

2. Focus be given to improving the receipt of assessments by customers.

The group suggests the service sets an improvement target of 80% up from 73%.

3. Strive to improve the level of customers who feel they are kept informed

The group suggests the service sets an improvement target of 95% up from 91%.

4. Strive to improve the overall customer satisfaction rating of "Excellent" for the service *The group suggests the service sets an improvement target of 80% up from 74%.*

5. An OT workshop scheduled for 25/11/09 will now include input re listening skills, giving advice to customers on other options possibly available.

6. Complete an evaluation of the consultation activity itself i.e. what worked well, what didn't. This will inform future consultations and lessons learned can be shared with colleagues.

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CONSULTATION OCCUPATIONAL THERAPY SERVICE
QUESTIONS POSED & RESPONSES

Before Your Assessment

1. **Where you notified who would be visiting?**

134 Answered
127 yes (95%)
7 no (5%)

2. **Was an acceptable time arranged for your Occupational Therapy Assessment?**

134 Answered
128 yes (96%)
6 no (4%)

3. **Did you feel that you were seen quickly enough?**

131 Answered
122 yes (93%)
9 no (7%)

During Your Assessment

4. **How long did the Occupational Therapists Assessment take?**

Range from 10 mins to 2 hours
118 Answered
mean 53.2 mins

5. **Did you feel that the Occupational Therapist listened to your needs?**

132 Answered
124 yes (94%)
8 no (6%)

6. **Was the Council Criteria for Provision Explained to you?**

128 Answered
116 yes (91%)
12 no (9%)

7. **Were you made to feel central to the Assessment?**

133 Answered
126 yes (95%)
7 no (5%)

8. **Were the Options for Provision of Equipment or Adaptations discussed with you in relation to your condition?**

125 Answered
120 yes (96%)
5 no (4%)

9. **Were you informed about what happens next?**

127 Answered
112 yes (88%)
15 no (12%)

Following your Assessment

10. **Were the Recommendations Relevant to your Assessment?**

116 Answered
111 yes (96%)
5 no (4%)

11. **Did you Receive a Copy of your Assessment?**

124 Answered
91 yes (73%)
33 no (27%)

12. **Overall how would you rate the Service you received (Please circle your Response where 1 is poor and 4 is excellent)?**

130 Answered
4 (excellent) – 98 (74%)
3 (good) – 27 (22%)
2 (adequate) – 4 (3%)
1 (poor) – 1 (1%)

CONSULTATION OVERALL RATING OF OCCUPATIONAL THERAPY SERVICE

