

How satisfied are carers/families with a Night Team Service as part of 24/7 Hospice at home care?

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KEY MESSAGES

- 1 Within palliative and end-of-life care, it is important to provide for both quality of life and quality of death. Satisfaction with services contributes to the attainment of both quality of life and quality of death.
- 2 Rennie Grove Hospice Care is a charity providing care and support for patients diagnosed with cancer and other life limiting illnesses, and their families. Every year through their 24/7 Hospice at Home service, Family Support services and the range of Day Services they give thousands of patients the choice to stay at home, surrounded by their families and friends.
- 3 A main component of Rennie Grove Hospice Care (RGHC) is the provision of 24/7 care, with a night service available from 9.15pm to 7.15am. An independent evaluation of the night service was commissioned to identify the quality, cost-effectiveness and value of the service.
- 4 A key objective of the evaluation was
 - To establish levels of satisfaction with care received from the Night Service
- 5 To access information with respect to this objective, the following Research Question was designed:
 - RQ: How satisfied are carers/family members with the Night Service?

WHAT WE DID

A **mixed method approach** was taken to the evaluation (all methods used are shown below). With respect to the evaluation of service satisfaction qualitative and quantitative methods were used.

Quantitative data collection: A questionnaire was designed in collaboration with the Rennie Grove staff team and management. This was piloted, amended then sent to 268 carers who had experienced the death of a relative under the care of RGHC within the last 6 weeks to one year. 84 completed questionnaires were returned constituting a success rate of 31%.

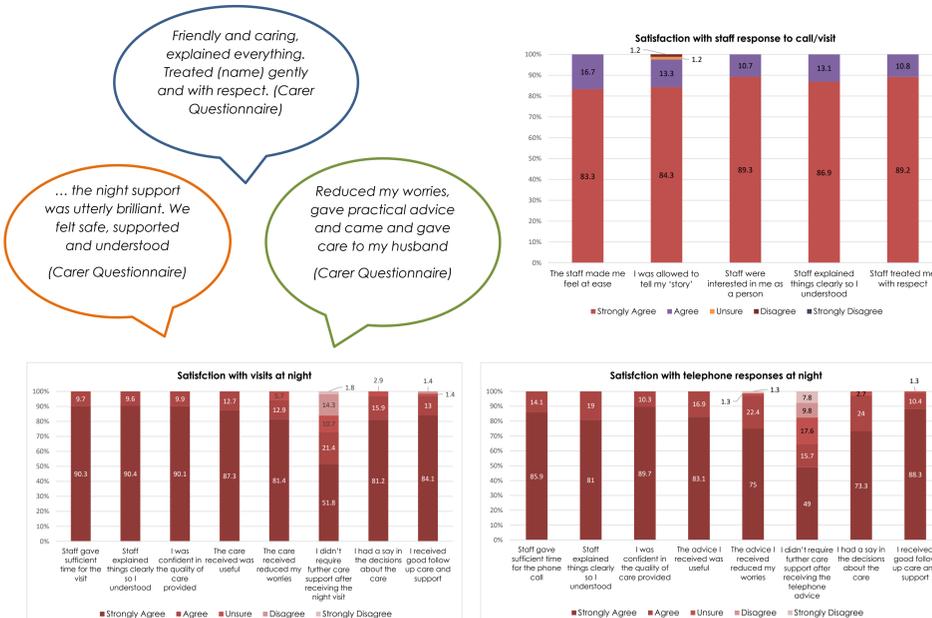
Qualitative data collection: Follow-up face-to-face semi-structured interviews were carried out with 20 carers who self identified as willing to take part in interviews about their experience of the service. These were conducted by volunteers who were trained by the research team. A further 18 interviews were carried out by telephone.

Analysis: Quantitative data was analyzed using SPSS v 22, while qualitative data was thematically analysed. Analysis workshops were conducted in collaboration with Rennie Grove staff to ensure nuances of meaning were captured.

Data Collection Method			
Diary of health care	35 distributed	17 completed	48% response rate
Telephone call and visit template	351 night contacts reported	145 nights completed	249 patient/carers contacts reported
Patient records review	255 night contacts	42 patients reviewed	1701 day/eve contacts
Carer questionnaire	268 distributed	84 completed	31% response rate
Carer face-to-face interviews	30 contacted	20 completed	66% response rate
Carer telephone interviews	48 contacted	18 completed	38% response rate
Staff interviews	9 contacted	9 completed	100% response rate

FINDINGS: SERVICE SATISFACTION

- The carer questionnaire findings report that:
 - 71% thought the speed of the response by the night team was fast.
 - Overall satisfaction with telephone call response was high with 82% very satisfied.
 - Carers also agreed strongly that the telephone calls provided:
 - Good quality of care (90%)
 - Good follow-up care (88%)
 - That they were given sufficient time (88%) and
 - Received useful advice (83%).
 - 93% of carers were highly satisfied with at-home visits and 7% were satisfied.
 - Carers strongly agreed that at in-home visits they were given sufficient time (90%), and were confident in the care provided (90%),
 - The night service team care was perceived as:
 - Useful (87%)
 - Follow-up was good (84%),
 - Worries were reduced (81%) and
 - They had a say in decisions made (81%).
 - During the interviews, carers described the night service as:
 - Supportive
 - Amazing
 - Caring
 - Reassuring
 - Professional
 - Kind and compassionate
 - Excellent
 - Loving and
 - Calm.
 - Carers perceived the service to be holistic
 - Carers rated the service highly for supporting them to ensure family members could be cared for at home, as preferred.
 - For comparison, of those dying in hospital, only 46% were highly satisfied.



Three themes on satisfaction emerged from the qualitative data from carers: Service Responsiveness, Psychological Reassurance and Integrated care

Service responsiveness

"I phoned them when I required them and they were with, they were prompt in replying and coming to our help"

"I would either leave a message or, with the receptionist and they would get someone to ring me back, or, and that was always quite instant, it was always within half an hour or, you know, they were very quick and they were always, they always came back to you"

(Carer interview responses)

Psychological Reassurance

"... whoever answers the call at Rennie Grove says well they're with somebody or they should ring back within this amount of time, that sort of thing. So the communication and the information was excellent"

"They did put you at ease and they said we will get to you, you know, don't feel that you know, because we haven't got there in an hour we're not coming, we are on our way, you're on our, you'll be next on our list"

"every time I did ring, you got reassured, don't worry, we'll just come out and you need to ring us again in, do it, so they were very reassuring about that, don't, it's not an issue, it's not a problem" "so I think the night time service for me was an absolute blessing in all ways, one because you've got the main contact, they know [patient name], they've got all his history, or they know the person, they've got the history, and they'll come out, you know, and do whatever they need to do"

(Carer interview responses)

INTEGRATED CARE

In general, carers felt that the Rennie Grove night team acted as the service which mediated between other services to provide a relatively smooth wrap around, more family tailored service.

However, frustrations were voiced when problems arose in communications between services which translated into Loved ones receiving less than optimal care.

CARERS VOLUNTEERING

Satisfaction with the service was also expressed by many of the carers in their willingness to volunteer and raise money for the charity.

"That shows you how much I value their service that I want to help to raise money for them now" (Carer interview)

BARRIERS & FACILITATORS

Interview data indicated several barriers and facilitators to the service which impacted levels of satisfaction, anxiety and stress reduction. Barriers and facilitators could be mutually defined such that perceived barriers could also be perceived as facilitators depending on context. Barriers and facilitators identified by carers were:

- Reluctance/lack of confidence to telephone, especially at night, as they were: not sure of the process; concerned they would they be waking staff up; not sure who were they contacting; not sure what constituted a valid reason to contact the night service.
- The vast geographical area covered meant occasional slow service. Staff could cover between 5-157 miles per night (data derived from staff completions of the visit template).
- Being kept informed was a key facilitator in terms of: being given information about the care/treatment; being informed of travel times; knowing that the night team were there to contact; knowing the night team were on their way to provide care.

CONCLUDING REMARKS

- A night team service can provide excellent, reassuring and holistic care that meets the care needs and wishes of the patient and family. Psychological reassurance is as important as actual care activities, and can be delivered over the telephone as well as in home visits at night-time.
- Service responsiveness is a key feature of service satisfaction, however this can be compromised by the large geographical distances the night team cover.
- The high levels of carer satisfaction identified in questionnaires and interviews suggest a high quality night service which enabled carers to manage the care of a family member more confidently at home; which they wanted to be; reducing the level of stress which can often result when caring for a loved one at the end of life.
- Brokering between different services was an aspect of carer satisfaction.
- Carer satisfaction was expressed not just verbally, but in terms of volunteering activity.