RMH Family Centered Care Surveys

Highlights of Clinician, Patient and Family Surveys
Survey Method

- Survey completed February 2011
- Purpose: To assess our progress in implementing a Family Centered Care service model
- Clinicians, Patients and Family members surveyed through survey forms
- Clinicians surveyed first to prevent bias by seeing questions for families
- Responses were “Yes/No,” Five-point Likert type scale, or open ended
Clinician Surveys

- 29 completed surveys
- 75% return rate
Clinician Surveys

- 69% of MHIP staff feel they have the tools and needed to provide information to families and direct families to needed supports
Clinic Surveys: Values and Attitudes

- 69% of clinicians felt it was very important for family to be involved.
- 100% of clinicians felt it was at least somewhat important for family to be involved.
Clinician Surveys: Supportive Actions

- 55% of clinicians often give information for families
- 97% of clinicians give information for families at least sometimes
- This is compared to Dixon and colleague’s, 1999 study that found only 30% of clients with schizophrenia reported families received information about their illness or treatment
Clinicin Surveys: Supportive Actions

- 29% of clinicians often suggest family members attend sessions
- 86% of clinicians suggest family members attend sessions at least sometimes
- 76% of clinicians say family members attend sessions at least sometimes
Clinician Surveys:
Overall Impressions

- These results suggest a good openness on the part of clinicians to involving family members in treatment and to providing family with needed information and resources.
Clinician Surveys:
Knowledge and Use of Resources

- 86% of clinicians are aware of Journeying Together Program
- 76% of clinicians have recommended Journeying Together Program
- 79% of clinicians have provided clients with the Mental Health Supports for Families information sheet
Clinician Surveys: Knowledge and Use of Resources

- 41% of clinicians have recommended clients view the online resources for families on the RMH web site
- 66% of clinicians say they know how to find these web sites
- 55% of clinicians have reviewed these websites themselves
Clinician Surveys:
Knowledge and Use of Resources

- 72% of clinicians say they know how to find patient education handouts on their desktop computers
- 48% of clinicians have given clients copies of these patient education handouts
- 34% of clinicians have suggested families or clients view family mental health videos
Clinician Surveys: Inter-item Correlations

- No strong correlation between how important staff feel it is for family to be involved and how often they suggest family attend sessions.
- Moderately high correlation (.77) between how often clinicians suggest family members attend sessions and how often they attend.
- The biggest predictor of whether family members are involved in treatment is whether they are invited or not!
Dixon et al, 2000 – Survey of 36 therapists at a Community Mental Health Centre, in 52% of cases in which family members not contacted, therapists believed such contact would not benefit the client, yet clients refused consent to share info in only 10% of cases.
Clinician Surveys: Inter-item Correlations

- There is a moderate correlation (.49) between how important clinicians think it is for family to be involved in the treatment process, and how often clinicians recommend books, websites and give information to family members.

- Clinicians who don’t endorse the importance of family involvement are less likely to give information for families.
Patient Surveys: Demographics

- 81 completed survey forms
Family Surveys: Demographics

- 13 completed survey forms
- Use caution in interpreting these results as there is selection bias, most families who completed forms are actively engaged in treatment at RMH
Some significant differences between clinician perceptions and perceptions of patients and clients

76% of clinicians say family members attend sessions at least sometimes

In contrast, only 35% of patients say family has attended sessions (this is higher than Dixon and colleague’s 30%)
Family & Patient Surveys: Results

- 86% of clinicians report they suggest family members attend sessions at least sometimes.
- However, only 21% of patients report their clinician suggested a family member attend sessions.
Family & Patient Surveys: Results

- Comments from patients about why family didn’t attend sessions was mixed.
- Reasons include patient preference and family refusal or lack of interest.
- Five patients specifically commented that family didn’t attend as they were never asked, one family member said they had never been asked.
Family & Patient Surveys: Results

- 55% of clinicians indicate they often give information for families and 97% say they give information at least sometimes.
- Only 23% of clients say they or their family were given information about their illness or treatment (this is considerably higher than Dixon et al’s 1999 findings).
- 54% of family members indicated they received information.
Family & Patient Surveys: Results

- 26% of patients thought their family had a very good understanding of their illness and treatment, 70% thought family had at least a fair understanding.
- 62% of families thought they had a very good understanding of their loved one’s illness and treatment, 100% thought they had at least a fair understanding.
- Families think they understand their loved one’s illness better than the patient thinks they do.
Family & Patient Surveys: Results

- 62% of patients felt it was very important that family members understand their illness and support their treatment, 94% felt it was at least somewhat important.

- 84% of families felt it was very important to their mentally ill family member that they understand their family member’s illness and treatment, 100% felt it was at least somewhat important.
92% of family members said it was very important to them to understand their loved one’s illness and treatment, 100% felt it was at least somewhat important.

These high percentages indicate the importance to both patients and family of information and involvement for family members in treatment and support the importance of a family centered care approach.
Family & Patient Surveys: Results

- 30% of patients felt it was very important for family to be involved in their treatment, 77% felt it was at least somewhat important.
- 85% of family members believe it is very important to be involved in their loved one’s treatment, 100% believe it is at least somewhat important.
Family & Patient Surveys: Results

- There appears to be a much higher desire for involvement in their loved one’s treatment by family members than by patients.
- Some of this difference may be due to sampling bias in the family surveys.
- While patients want family to be informed and supportive, some may not want direct family involvement, possibly due to a desire to handle their problems independently.
- From open ended comments, some patients find their families toxic, critical, and unsupportive and for this reason may prefer no family involvement.
Family & Patient Surveys: Awareness of Resources

- Only 20% of patients were aware of the Journeying Together Program.
- This is despite 76% of clinicians saying they had recommended the program and provided information.
- Only 10% of patients indicated they had been given a brochure on this program.
- Only 4% of patients indicated a family member had attended this program.
Family & Patient Surveys: Awareness of Resources

- Only 15% of families surveyed indicated they were aware of the Journeying Together Program.
- Only 8% indicated they had been given literature on this program.
- 8% of family indicated they had attended this program, and 8% found it helpful, this is likely the same 8% who were given information.
Family & Patient Surveys: Awareness of Resources

- The statistics on Journeying Together suggest that when families are given information on this program, they do go and they do find it helpful.
- This valuable resource is being underutilized, we need to make more of an effort to get information about this program to clients.
Family & Patient Surveys: Awareness of Resources

- Only 10% of patients indicated they had received a copy of our RMH Mental Health Resources for Families information sheet (despite this information sheet being sent out with our intake package)
- Only 15% of families reported having seen or been given this information sheet
- 79% of clinicians report they have given this information sheet to clients
- Clients who receive this information sheet report they find it helpful
Family & Patient Surveys: Awareness of Resources

- Only 14% of patients were aware of our RMH web pages listing resources, only 8% of families were aware of these web based resources.
- One of the best ways of reaching clients and families is through brochures and pamphlets in our waiting areas.
- 60% of patients have picked up information from our brochure racks and 49% found this information helpful.
- 62% of family members have picked up brochures or pamphlets and 62% found this information helpful.
Family & Patient Surveys: Awareness of Resources

- Clients also use library resources
- 41% of patients were aware of the library resources and 19% found this helpful
- 31% of families were aware of library resources and 23% found them helpful
- Only 14% of patients and 15% of families were aware of our video resources, patients who accessed these resources found them helpful
A number of open ended comments, particularly in the patient surveys, reflect challenges clients face with family and societal views of mental illness

Comments:
- “He is not interested”
- “Did not care”
- “Will have nothing to do with me because of my mental illness”
- “Family member wasn’t interested”
A family centered care approach, where appropriate, that provides information and education for family members may help family members better understand their loved one’s illness.

Improved supports for families earlier in treatment process may help prevent family “burnout” leading to this type of uncaring attitude.
Clinician Surveys: Recommendations

- An indexed/tabbed resource binder with hard copies of patient education material in MHIP, Day Program and CCS
- More material from CMHA including info on Journeying Together in all areas
- Shortcuts to Patient Education material on all clinician computers
- More educational handouts on medications for patients and family
Clinician Surveys: Recommendations

- Staff need time to educate themselves on resources available (this was a frequent comment in surveys)
- Need for basic training in how to conduct a family interview, some staff lack confidence in these skills, and so may be reluctant to invite family to sessions or raise family related issues
Family & Patient Surveys: Recommendations

- Need to make more of an effort to increase awareness of resources already available
- Copies of Mental Health Supports for Families information sheet, journeying together brochures, info on web and library resources more available at intake
- Keep brochure racks in waiting areas well stocked, expand racks to include more information sheets
Family & Patient Surveys: Recommendations

- Educational material should address stigma and counter negative family and social judgments
- Provide information as early as possible in the admission process, open comments suggest some families need this information ASAP
- Find ways to make media information (e.g., family mental health videos) more available to clients
Family & Patient Surveys: Recommendations

- Consider using old computers in waiting areas (no internet access) for clients to browse patient educational materials.
- Continue to encourage staff to suggest opportunities for family and patients to meet with treatment providers.
Further Readings:

- Caring Together: Families as Partners in the Mental health and Addiction System (Family Mental Health Alliance, Centre for Addiction & Mental Health, Canadian Mental Health Association Ontario, Ontario Federation of Community Mental Health & Addiction Programs)

- Putting Family-Centered Care Philosophy into Practice (Centre for Addiction & Mental Health)
Think Families....

- What can they tell you?
- How can they help?
- What do they need?