



## CPD handbook appendix 2DHM

# Patient experience survey (diving and hyperbaric medicine practice) - guidelines

### Purpose

The purpose of the patient experience survey is to obtain feedback from patients about the care they received from their hyperbaric physician. This activity contributes to the completion of one practice evaluation activity, directly relevant to the participant's practice, equivalent to 20 credits.

Completion of the activity requires an administrator to distribute the survey and collate results. It is recommended, but not mandated, that a feedback provider is selected to discuss the results with the hyperbaric physician; specialists can choose to complete the patient experience surveys as a group over a two to six week period (depending on case load).

### Related documentation

- [Patient experience survey](#)
- [Patient experience survey summary form](#)
- [Patient experience survey confidentiality and CPD verification form](#)

### Prior to conducting the survey

1. A co-worker or assistant is invited to be the administrator of the survey. For example, this could be an administrative staff member or nurse. The role of the administrator is to:
  - Select a broad cross section of patients to be involved.
  - Distribute the survey.
  - Ensure patients to do not feel under pressure to respond positively.
  - Follow up on completed surveys.
  - Collate results when the minimum number of surveys have been returned and/or completed.
2. It is recommended, but not mandated, that a feedback provider be used. It is expected the feedback provider will be a trusted colleague, who ideally has some experience in providing feedback.
3. The administrator and feedback provider (if applicable) sign the confidentiality section of the *Patient experience survey confidentiality and CPD verification form*.

### Conducting the survey

4. Determine method of administration. To obtain the most meaningful result, the survey should be administered within two weeks of hyperbaric treatment (HBOT). This prevents recall bias and satisfaction scores being correlated with the outcome of treatment.
  - Alternatively, immediately following the patient's last hyperbaric treatment.
  - Post discharge, via telephone or using a postal return system.

Please note: response rates differ depending on timing and method of administration. It is recommended that the same timing and method be used for each patient experience survey activity. If the survey is to be administered via a telephone after discharge, the same survey administrator should be used to contact all patients selected to participate in the survey.

5. The administrator should pre-determine a system to select patients to minimise bias. Ideally, all patients in the defined period of time above should be offered the survey.
6. It is suggested that administrators distribute approximately 20-30 surveys per specialist. Responses from a minimum of 15 surveys per specialist must be included on the survey summary form.
7. The administrator should provide the following information to patients:

Patients undergoing HBOT should be informed in advance that they might be asked to complete a patient experience survey regarding the care provided by the hyperbaric physicians. Patients could be notified at the time they make their pre-treatment assessment appointment.

Should a patient be unable to complete the survey independently, the administrator could read the questions and record the patient's response for them. It is preferable for the administrator to provide help rather than family members, as they may influence the response of the patient.

The following is an **example** of statements that could be used to facilitate discussion:

*"Your hyperbaric physician is the specialist doctor responsible for your care during your course of hyperbaric oxygen treatment (HBOT).*

*He or she does this by:*

- *Considering your medical history before commencing HBOT and performing an examination to make sure it is okay for you to have hyperbaric oxygen treatment.*
- *Being immediately available if you have any concerns.*
- *Managing problems if they arise.*

*After your course of treatment you may be asked to complete a patient experience survey about your hyperbaric physician*

*<Select administration method and advise patient accordingly>*

*The survey will be given to you before you go home.*

*It should only take 10 minutes to complete and the purpose of the survey is to identify areas of improvement and focus on professional development. We would appreciate your time to participate. Your feedback will remain anonymous.*

8. Collecting surveys administered in hard copy:

Patients are more likely to provide honest, valid and reliable responses if they are assured their responses will remain confidential. Along with the survey, patients should be provided with an envelope in which they can seal the completed survey.

A survey deposit box would be the ideal way for patients to submit their response. If a survey deposit box were used, it would be helpful to have the name of the hyperbaric physician and the administrator on the envelope. The sealed envelopes can then be forwarded to the administrator. This is especially helpful if the department is conducting the survey as a group activity.

## Results and feedback

9. The administrator collates the results on the Patient experience survey summary form.
10. After a minimum of 15 surveys has been entered on the survey summary form, the administrator sends the completed summary to the participant and the feedback provider (if applicable) so they can review the results.
11. After receiving the results, the feedback provider organises a feedback meeting as soon as possible after the summary has been received.
12. The participant and the feedback provider should meet for approximately 20-30 minutes to talk about the results of the survey. It is suggested that the participant be asked about any particular items on the survey they may be concerned about and aspects of their practice they could improve upon.
13. The feedback provider then talks through the summary results for each item, discussing any issues that arise from the results. The feedback provider may ask the participant to consider why they may have received negative results (if any) and discuss examples of how they approach those aspects of practice. The feedback provider should also help to prompt the participant to consider how they could improve the results (if needed) and possibilities for professional development.
14. The participant asks the administrator and feedback provider to sign the verification section of the *Patient experience survey confidentiality and CPD verification form*.

## Recording this CPD activity

Completion of this activity can be recorded on the CPD portfolio system. Participants will be asked to provide the following information:

- Number of forms collected.
- Start and end date along with total hours.
- A copy of the survey used.
- A completed patient experience survey confidentiality and CPD verification form.

If a participant is selected to be involved in the random audit of CPD activities, the participant must provide evidence of the review. A copy of the survey used and the survey confidentiality and CPD verification form is acceptable. This form can then be uploaded to the CPD portfolio system.

The feedback provider may be contacted by the College to verify the activity took place.