



THE WASHINGTON INSTITUTE
FOR MENTAL ILLNESS RESEARCH & TRAINING

PATIENT AND FAMILY SATISFACTION SURVEYS
AT WESTERN STATE HOSPITAL
(October -December, 1998)

The Washington Institute, Western Branch
Western State Hospital

and

Division of Research and Data Analysis
Department of Social and Health Services

AUGUST 1999

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EXECUTIVE SUMMARY

INTRODUCTION

The first two patient and family surveys were conducted at WSH in 1995 and 1996. The third, conducted in Fall 1998, had total returns of 238 consumer and 243 family questionnaires. The demographic and institutional characteristics of the consumer sample were similar to the hospital population.

CONSUMER SURVEY RESULTS

The results reflected strong views by patients about the hospital, treatment, ward transfers, staff, educational programs, medical care, and medications. Some opinions were consistent across units while others differed between units.

Highest Rated Items: Consumers rated highest the way language issues have been addressed, how they feel welcome when transferred to another ward, the hard work of staff, helpfulness of the ward program, and educational/learning opportunities.

Lowest Rated Items: Consumers rated lowest their overall hospital stay, the respect staff show for their romantic feelings, patient input into treatment, the explanation of the ward program, medication and mental illness education, and discharge planning.

Best Things about WSH: Consumers thought the best things about WSH were: (1) patient care/medications/education/groups; (2) food/meals/snacks; and (3) and staff.

Worst Things about WSH: Consumers thought the worst things about WSH were: (1) patient interaction with staff/doctors; (2) not enough free, smoking or outing time; (3) patient care/treatment/medications; and (4) seclusion/restraint/punishment.

Suggestions for Treatment Improvement: The top three recommendations by patients to improve treatment were that they wanted: (1) more freedom in and out of WSH; (2) less, better, or alternative medications; and (3) more time with staff and physicians.

Compared to the 1996 survey, the areas of greatest improvement were ward transfers, educational opportunities, and staff relations. The areas of decline were the rating for the overall hospital stay, answering patients' questions about medications, and care for patients' medical concerns.

FAMILY SURVEY RESULTS

The 1998 family survey had twice as many completed questionnaires as 1995 and three times as many as 1996 - a considerable difference since patient population declined only slightly during the period. Unlike earlier surveys, an attempt was made in 1998 to

interview families of patients of all units. Like patients, families also expressed strong views about the hospital, staff, and treatment conditions.

Highest Rated Items: Families rated highest the way patients' language issues have been addressed, staff friendliness and dedication, discharge planning, handling agitated patients, and the therapeutic nature of campus life at WSH.

Lowest Rated Items: The items families rated least were the education they receive on mental illness, explanation of the ward program to them, medication education for families, and information about educational opportunities for families.

Best Things about WSH: The best things families reported about WSH were: (1) patient care/medications/groups/education; (2) safety/security/shelter; and (3) staff.

Worst Things about WSH: The worst things families reported about WSH were that: (1) families have little contact with the staff/doctors; (2) staff ignore or abuse patients; and (3) patients have too much idle, non-productive time.

Suggestions for Treatment Improvement: The top three suggestions by families for improving treatment at WSH were for the hospital to provide: (1) more regular and constant communication between families and staff/doctors; (2) productive use of patients' time; and (3) more treatment for patients' psychiatric and medical illnesses.

CONCLUSION

Both consumers and families have strong views about treatment at WSH, the staff, and hospital conditions. Some views, such as improvements in language issues, ward transfers, and the hard work of staff, are quite positive. However, other views on communication, medication and mental illness education, discharge planning, and use of patients' time, are quite skeptical. Both consumers and families want the ward program to be explained to them, and information to be provided to them to learn about mental illness.

Both consumers and families think that the best things about WSH are the treatment program, food/meals, safety/security, and staff. They also think that the worst things are staff to patient interaction, lack of contact particularly with families, and the lack of freedom or free time in or out of the hospital.

Consumers and families disagree about what could be done to improve treatment. For consumers, the most important things are: (1) more freedom; (2) less/better alternative medications; and (3) more time with staff/doctors. For families, the most important things are: (1) more, regular and constant communication between them and staff/doctors; (2) more productive use of patients' time; and (3) more treatment for patients' psychiatric and physical illnesses.

CHAPTER 1

BACKGROUND

INTRODUCTION

The effectiveness of inpatient treatment in a psychiatric hospital depends on the quality of treatment, staff dedication, and to a large extent patient willingness to participate in treatment. Patient willingness is a function of need as well as perceptions about treatment, the hospital, and staff. With skeptical views, regardless of the quality of care, patient cooperation might be difficult, thus delaying recovery and making positive outcomes elusive.

Lovell (1995) notes that, unlike health services, there is a paucity of patient satisfaction literature in mental health research. This problem is due partly to the impression that mood and cognition problems may limit decision-making capacity and therefore interfere with the ability of mentally ill persons to express a true perspective on treatment effectiveness. However, a number of studies (Hermann et al., 1998; Holley et al., 1998; Perrault et al., 1999) have shown that mentally ill persons are very capable of providing useful input into their treatment process. They are reported to express less satisfaction with healthcare services than people without mental disorders (Hermann et al., 1998), and a preference for their relatives' involvement in their treatment (Perrault et al., 1999). Psychiatric inpatients are reported to express clear preferences about aspects of community care, and different from the views of their parents or clinicians (Holley et al., 1998). In addition, older and healthier psychiatric inpatients are reported to express greater satisfaction with mental health services than younger and sick ones (Rosenheck et al., 1997).

Many gero-psychiatric patients may be unable, physically or cognitively, to express true perceptions or feelings about their treatment experience in a self-report survey. Studies conducted at Western State Hospital show a preponderance of physical illness among gero-psychiatric patients (Kamara et al., 1998; Kamara, 1997), some of whom may be too ill to express an objective opinion. However, those who are able and willing can provide useful insights before they are ultimately unable to do so in due course as a result of aging and illness. Finally, whether a patient can provide input, or in addition to that, the views of family members who know and have cared for the patient for years, will provide useful input in the treatment process. For instance, when an elderly psychiatric patient can no longer speak, his/her non-verbal communication might best be understood by a family member or guardian.

Obtaining feedback from patients and families about the quality of inpatient treatment is crucial in a psychiatric hospital. At Western State Hospital, this feedback is

sought through the implementation of the consumer and family satisfaction surveys. The two survey questionnaires contain 46 and 43 questions respectively, with a likert-type response format. The first two sets of surveys were conducted during Spring 1995 and Summer 1996 respectively. Data collected from them gave some indications about clinical, social, and environmental issues of concern to patients and family members, such as treatment and ward conditions, medications, staff relations, and the physical hospital environment. Although the intent was to conduct the surveys annually, due to administrative and staffing problems, none was implemented in 1997. This report presents the analysis of the third set of surveys conducted during October-December, 1998.

The Patient Satisfaction Sub-Committee, which is responsible for the surveys, deliberated considerably whether to exclude some questions from the patient surveys based on some previous negative feedback. After considerable thought and planning, and for reasons of comparability, the 1996 survey questionnaires were administered intact in 1998 to both consumers and families. As a result, responses from the 1998 surveys are quite comparable to the 1996 surveys. This report presents the results of the Fall 1998 consumer and family surveys and compares the response patterns with those of the previous two surveys.

The report is organized into four chapters. The background section (Chapter 1) presents details about the questionnaires and the rating scheme. The results of the consumer and family surveys are presented separately in Chapters 2 and 3 respectively. For the most part, tables depicting hospital-wide trends are included in the narrative, while data aggregations by unit are presented in separate tables in the appendix. Chapter four summarizes the findings.

THE 1998 SURVEYS

The planning for the Fall 1998 surveys started during Summer 1998 with the recruitment and training of student interviewers. During late Summer and early Fall, the interviewers compiled the lists of patients consenting to the interview, and the addresses and telephone numbers of family members to be contacted. Patient interviews commenced in October and concluded by December 31, 1998. At the same time patient interviews were being conducted, family members were contacted by telephone. Surveys were mailed out to consenting families and telephone follow-up calls were made. The family questionnaires analyzed in this study comprised of responses received by December 31, 1998. The data were analyzed during January to April, 1999.

The patient questionnaire included questions about the demographic and institutional characteristics of the respondent. The family survey did not include demographic questions so as not overwhelm respondents.

The Patient Survey Questionnaire

The development of the survey questionnaires was the collaborative effort of staff from Western State Hospital (WSH), Eastern State Hospital (ESH), the Mental Health Division (MHD), and the Washington Institute for Mental Illness Research and Training (WIMIRT). The version administered in both 1996 and 1998 contains a demographic screening section and 46 survey questions. Sixteen questions constitute core items common to both Eastern and Western State Hospital. Ten of these in the WSH questionnaire

(Questions 3, 7, 8, 19, 20, 27-31) measure general satisfaction with treatment, and six (Questions 2, 11, 32-35) measure treatment helpfulness. Of the remaining 30 questions, 17 are further measures of satisfaction with the hospital, the wards, treatment, and medications; three measure treatment helpfulness; seven measure opinions about staff; and three are open-ended questions about the best and worst things about WSH and suggestions for improvement.

The survey has been found to have good face validity, reliability, and internal consistency in measuring the performance of one institution. Its application in comparing patient satisfaction between institutions is limited by the few demographic, clinical, and institutional variables it covers. Much of that information though can be collected from clinical files using respondent identifiers. In terms of stability over time, more work needs to be done to measure test-retest reliability.

The Family Questionnaire

The family survey questionnaire is similar structurally to the patient questionnaire. It contains 43 questions, most of which are the same in content and flow as the consumer questions, with the exception that in most cases families are asked to express an opinion about the treatment experience of their family member at the hospital. For instance, the question "The hospital stay has helped me" in the consumer survey is framed in the family questionnaire as "This hospitalization has helped my family member." Although a few questions ask about the family member's experience, say with staff for instance, the family member's perception of the patient's experience at the hospital still remains the focus and object of concern. The few exceptions to this pattern elicit the family member's opinion about staff relations, communication between staff and families, education families receive at the hospital on mental illness and medications, what families think are the best and worst things about WSH, and what families think could be done to make treatment better.

SURVEY RATING

The items on the 1998 consumer and family surveys were rated on a four-point scale ranging from strongly agree to strongly disagree, with no neutral category. This was different from the 1996 rating system of A, B, C, D, and F letter grades. The category "F" (or zero) in 1996 was not included in the 1998 surveys. To make the 1998 survey rating comparable to 1996, the scores published in this report have been converted as follows: 4 = strongly agree, 3 = agree, 2 = disagree, and 1 = strongly disagree. This re-coding makes the 1998 scores somewhat comparable to the numeric values assigned to the A, B, C, D rating used in 1996, with the exclusion of the category "F". Where compared, the rankings of survey questions in all years (1995, 1996, and 1998) have been adjusted appropriately to reflect the four point scoring system.

CHAPTER 2

THE 1998 PATIENT SATISFACTION SURVEY

INTRODUCTION

The students recruited to conduct the surveys were trained in direct patient interviewing techniques, safety procedures, and precautions for contacting and dealing with patients. During the Summer of 1998, a careful review of patient medical charts was done by the student surveyors to determine the patients who were able to respond to survey questions. The research team also compiled mailing addresses and telephone numbers of the respective family members and legal guardians of the patients. Throughout the interviewing period, the list of patients to be interviewed in each ward was updated daily using a computer printout of the daily ward roster.

The hospital average daily census (ADC) during October-December 1998 was 1,005 patients. Of that number, current patients who were determined to be eligible to participate in the survey based on their physical and mental abilities to respond to questions was 865. Of that number, 615 patients were successfully contacted during Fall 1998 and asked to participate in the study. Of those, 377 patients refused to participate and 238 consented and completed the patient survey.

This chapter presents the demographic and institutional background of the patient sample in comparison to the hospital patient population, the 1998 survey response rates in comparison to 1995 and 1996, and the 1998 survey results. The 1998 results are presented in two parts. Part 1 covers the first 43 questions whose responses were based on the four-point scale. Part 2 covers the open-ended questions about the best and worst things about the hospital and suggestions for improvement.

DEMOGRAPHIC CHARACTERISTICS OF THE PATIENT SAMPLE

Gender

A total of 238 patients completed the survey questionnaire, of whom 25% were female, 67% were male, and 8% did not state a gender (see Table 1). The corresponding gender ratio for the hospital population as a whole during October-December 1998 was 31% female to 69% male. Both the gender proportions of the population are slightly higher than the corresponding sample proportions due to the 8% of sample cases that did not indicate a gender.

TABLE 1. GENDER COMPARISON BETWEEN PATIENT SAMPLE AND HOSPITAL POPULATION (OCTOBER-DECEMBER 1998)

Gender	Patient Sample		Hospital Population* (Oct.-Dec. 1998)	
	No.	%	No.	%
Female	59	24.8	309	30.7
Male	160	67.2	696	69.3
No Response	19	8.0	0	0.0
Total	238	100.0	1,005	100.0

* Average Daily Count (ADC), including PALS.

Race/Ethnicity

The sample composition by race/ethnicity was 67% White non-Hispanic, 10% African-American, 6% Native American, 4% Hispanic, 4% Asian, and 0.8% "other" (see Table 2). In comparison to the hospital ADC, the proportions of White non-Hispanic in the sample and population were identical. However, slightly smaller proportions of African-Americans and the undefined category of "other" were sampled than their share of the hospital population. On the other hand, the sample proportions of all other identified groups were slightly larger than the corresponding hospital population proportions.

TABLE 2. RACE/ETHNICITY OF THE SAMPLE AND HOSPITAL POPULATION (OCTOBER-DECEMBER 1998)

Race/Hispanic Origin	Patient Sample		Hospital Population* (Oct.-Dec. 1998)	
	No.	%	No.*	%
White Non-Hispanic	181	76.0	767	76.3
African-American	23	9.7	123	12.2
American Indian/Alaska Native	14	5.9	18	1.8
Hispanic	9	3.8	19	1.9
Asian/Pacific Islander	9	3.8	34	3.4
Other	2	0.8	44	4.4
Total	238	100.0	1,005	100.0

* ADC, including PALS.

Minority Status

Patients were asked to indicate whether or not they considered themselves minority. Sixty six percent of the sample indicated a non-minority status, 27% indicated a minority status, and 7% either did not respond or indicated that they did not know (see Table 3).

TABLE 3. MINORITY STATUS

Status	No.	%
Minority	63	26.5
Non-Minority	158	66.4
No Response/Don't Know	17	7.1
Total	238	100.0

INSTITUTIONAL CHARACTERISTICS OF THE PATIENT SAMPLE

Sample and Hospital Population by Program

Table 4 shows the sample distribution by hospital unit in comparison to the hospital population. APU, the largest unit with 39% of the hospital ADC, comprised 37% of the sample - slightly less than its share of the population. GMU, which houses seriously medically compromised elders, many of whom are unable to respond to a survey, comprised 27% of hospital patients by ADC and nearly 13% of the sample. GMU patients, traditionally excluded from the last two surveys, were aggressively recruited in the 1998 survey, with extra effort made to contact the few able and willing participants. This resulted in the relatively high number of GMU respondents.

TABLE 4. INSTITUTIONAL CHARACTERISTICS OF THE SAMPLE AND POPULATION (OCTOBER-DECEMBER 1998)

Program	Patient Sample		Hospital Population*	
	No.	%	No.	%
APU	88	37.0	395	39.3
GMU	30	12.6	273	27.2
MIO/LOU	79	33.2	232	23.0
PALS	41	17.2	105	10.5
Total	238	100.0	1,005	100.0

*ADC including PALS

MIO/LOU and PALS, the two smaller hospital units by ADC, respectively had 23% and 11% of the hospital population during the study period. These programs, with corresponding sample proportions of 33% and 17% respectively, were over-represented by 44% and 64% respectively.

Language Proficiency of the Sample

About 81% of the sample indicated that they spoke primarily English, 11% were bilingual, 1 person was non-English-speaking, and 8% did not respond to the question (see Table 5). Comparable information was not readily available for the hospital population.

TABLE 5. LANGUAGE PROFICIENCY

Language Ability	No.	%
Primary English	192	80.7
Bilingual	26	10.9
Non-English	1	0.4
No Response	19	8.0
Total	238	100.0

Interpreter Needs of the Sample

By far the majority of the sample (85%) indicated that they had no need for interpreter services. Only about 6% of the sample indicated a need for interpreter services. About 9% did not respond to the question (see Table 6). Data on interpreter needs for all patients were not readily available for the hospital.

TABLE 6. INTERPRETER NEEDS

Need	No.	%
Yes	14	5.9
No	203	85.3
No Response	21	8.8
Total	238	100.0

Comprehension Ability of the Patient Sample

Sample patients were asked to rank their level of comprehension on a four-point scale – none, low, medium, and high. Nearly half (about 48%) indicated high comprehension level, over one-quarter (28%) indicated medium comprehension level, about one-sixth (15%) indicated low level of comprehension. Three patients (1%) indicated that they had no comprehension level. The rest of the respondents (8%) gave no indication of their level of comprehension (see Table 7). Comparable data were not available for the hospital population.

TABLE 7. COMPREHENSION LEVEL

Comprehension Level	No.	%
None	3	1.3
Low	35	14.7
Medium	67	28.2
High	113	47.5
No Response	20	8.4
Total	238	100.0

SURVEY RESPONSE RATES

The 1998 patient survey response rates are shown on Table 8. Based on medical records and patient databases, 86% of hospital patients were eligible and able to participate in the survey. Of those eligible, 71% were contacted. Of those contacted, 61% either refused or were unable to be interviewed, or did not provide useful responses to the interview. The number of completed and useful interviews was 238, representing about 39% of hospital patients who were contacted and asked to participate in the study. Thus the 238 completed interviews also represent about 24% of the hospital population by ADC during the period, and about 28% of those eligible and able to participate in the survey.

TABLE 8. CONSUMER SURVEY RESPONSE RATES

Category	Number	% of ADC	% of those Eligible	% of those Contacted
ADC	1,005	100.0	-	-
Eligible, able	865	86.1	100.0	-
Contacted	615	61.2	71.1	100.0
Refused	377	37.5	43.6	61.3
Completed surveys	238	23.7	27.5	38.7

Comparison of 1998 Patient Survey Response Rates with Prior Surveys

Data on Table 9 show response rates for the 1995, 1996, and 1998 patient surveys. The 1995 data show the number of completed surveys without information on total contacts and refusals. However, the 1996 and 1998 surveys tracked contacts, refusals or unable to be interviewed, as well as completions. The numbers of completed interviews in the three years were respectively 339, 409, and 238.

TABLE 9. COMPARISON OF RESPONSE RATES (1995, 1996, AND 1998)

	1998		1996		1995	
	No.	%	No.	%	No.	%
Contacted	615	100.0	512	100.0	-	-
Refused/not interviewed	377	61.3	103	20.1	-	-
Completed Surveys	238	38.7	409	79.9	339	-

More patients completed questionnaires in 1996 with fewer refusals than in 1998. Whereas there were up to 377 refusals in 1998, there were only 103 in 1996. Completion rates for the two years were respectively 80% and 39%. Two reasons explain the high completion rate in 1996. First, patients contacted were actually fewer in 1996 than 1998 by 103. But the second and key reason was the significantly larger number of completed surveys in 1996 due to the hard work, persistence, and experience of the consumer interviewers used. They worked full-time on flexible schedules, and conducted interviews at times when patients were more available, such as in the evening hours. On the other hand, in 1998 no funds were allocated for hiring full-time interviewers. As such, the 1998 surveys were conducted by work-study, internship, or volunteer students, working half-time and available only a few hours a day. Often they were not available in the evenings when some patients were more responsive. Whereas they performed well when available, the availability of at least one full-time research assistant to supervise interviewers and ensure patient contact during evening hours, is highly desirable if return rates are to be improved.

CONSUMER SURVEY RESULTS PART 1: SATISFACTION WITH TREATMENT

The 1998 consumer survey instrument was divided into two parts. The first part, comprising of 43 questions, included questions about patient perceptions, and required the patient to rate on a four-point scale their satisfaction with the hospital, treatment, ward conditions, and staff relations. The second part comprised of open-ended questions about what the patient thought were the best and worst things about the hospital, and suggestions on what could be done to make treatment better. The results of the survey are also presented here in two respective sections corresponding to the two parts of the questionnaire

The data from consumer survey responses were tabulated and analyzed by hospital and major program area. Hospital-wide results are presented with and without PALS. The

reason is that since PALS is a transitional unit for teaching community living skills, and is not a typical treatment unit, it is often necessary to separate its effects from the rest of the program units. In addition to the two hospital-wide categories, the rest of the four programs are presented separately, resulting in the following six categories: (1) hospital-wide including PALS, (2) hospital-wide excluding PALS, (3) APU, (4) GMU, (5) MIO/LOU, and (6) PALS. The summary of the means and standard deviations of the 43 items are presented by program area on Table 10 and in Appendix 4.

Hospital-Wide Including PALS

Hospital-wide data including PALS (Table 10) show mean ratings ranging from 2.51 (between disagree and agree) for Q43 to 3.35 (between agree and strongly agree) for Q26. The six items with the highest ratings were respectively questions 26, 15, 14, 36, 37, and 42. Perceptions about how the hospital has addressed language issues (Q26) comprised the highest rating of all, with an overwhelming approval of the hospital's achievement in that arena. The next highest approval ratings were for how welcome patients feel when transferred to a new ward (Q15), helpfulness of ward transfers (Q14), staff dedication (Q36), helpfulness of staff (Q37), and the hard work of staff (Q42). These ratings ranged from 2.99 to 3.14.

The item with the least score was patients' views about their current hospital stay (Q43), rated on the scale of "very good", "good", "so-so (average)", "poor", and "very poor". This item was the only one out of 43 rated on a five-point scale. Even so, it still rated the least with a mean of 2.51. The next five lowest ratings were respectively staff respect for romantic feelings between patients (Q17; 2.58), patient input in treatment (Q8; 2.59), staff inclusion of patients' ideas in treatment plans (Q9; 2.66), patient satisfaction with discharge planning (Q30; 2.67), and answering patients' questions about discharge (Q29; 2.67).

Four items had mean scores coincident with the median value of 2.85. These were program helpfulness (Q5), accommodation of patients' special needs (Q13), helpfulness of treatment in the patient's functioning (Q33), and the respectfulness of staff to patients (Q40). Among the items in the upper half of the spread are those relating to staff, educational opportunities, medications, and safety. Among the items in the lower half are explanation and fairness of the ward program (Q3, Q4), education and medication (Q23, Q10), medical care (Q12), respect for patient's rights (Q28), staff encouragement of free expression (Q21), and friendship concerns (Q16). The findings of dissatisfaction with the lack of information on treatment and services (Q7, Q10, Q12, and Q23) are consistent with findings elsewhere (Lovell, 1995).

Hospital-Wide Excluding PALS

Hospital-wide trends with and without PALS (Table 10) were similar, with the latter having slightly lower mean scores. This means that the approval ratings of PALS respondents were higher than those of other respondents in other programs. With the exclusion of PALS, the means ranged from 2.45 (Q43) to 3.39 (Q26). The highest ratings in the hospital-wide responses excluding PALS were again respectively Q26, Q15, Q14, Q37, Q36, and Q42 in addition to Q18.

TABLE 10. CONSUMER SATISFACTION SURVEY, 1998: MEAN RATINGS OF RESPONSES FOR THE HOSPITAL AND MAJOR PROGRAMS

No.	QUESTION	HOSPITALWIDE INCLUDING PALS (n=238)		HOSPITALWIDE EXCLUDING PALS (n=197)		ADULT PSYCHIATRIC UNIT (APU) (n=88)		GERIATRIC/MEDICAL UNIT (GMU) (n=30)		LEGAL OFFENDER UNIT (LOU) (n=79)		PROGRAM FOR ADAPTIVE LIVING SKILLS (PALS) (n=41)	
		Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.
1	This hospital stay has helped me.	2.88	0.90	2.85	0.89	2.74	0.99	2.87	0.51	2.97	0.89	2.98	0.94
2	I am learning things that will help me stay out of the hospital.	2.90	0.87	2.92	0.85	2.62	0.89	3.00	0.64	3.02	0.88	2.80	0.93
3	The ward program has been explained to me.	2.84	0.77	2.81	0.75	2.69	0.75	2.50	0.57	3.05	0.73	3.00	0.87
4	The ward program is fair.	2.74	1.00	2.74	1.00	2.66	1.08	3.10	0.96	2.68	0.90	2.78	0.99
5	The ward program is helpful.	2.85	0.92	2.84	0.94	2.73	1.02	3.20	0.96	2.83	0.81	2.90	0.83
6	There are plenty of groups/other activities.	2.74	0.86	2.71	0.85	2.58	0.93	2.87	0.73	2.78	0.80	2.95	0.87
7	My questions about treatment have been explained to me.	2.69	0.86	2.67	0.82	2.47	0.91	2.77	0.68	2.87	0.72	2.78	1.01
8	I have enough say about my treatment.	2.59	0.95	2.55	0.93	2.31	0.95	2.80	0.85	2.72	0.88	2.78	1.06
9	The staff have included my ideas in my treatment.	2.66	0.84	2.59	0.78	2.48	0.80	2.73	0.79	2.65	0.75	3.02	1.04
10	My questions about medications have been explained to me.	2.78	0.93	2.75	0.93	2.57	0.94	2.77	0.82	2.95	0.92	2.90	0.92
11	My medications are helping me.	2.88	1.00	2.88	0.99	2.60	1.03	3.03	0.67	3.12	0.96	2.90	1.07
12	The care I receive for my medical concerns is adequate.	2.81	0.93	2.81	0.90	2.76	0.99	2.83	0.75	2.86	0.84	2.80	1.10
13	Accommodations for my special needs have been provided.	2.85	0.91	2.83	0.89	2.74	1.00	2.90	0.61	2.91	0.85	2.95	1.02
14	Ward transfers have been helpful to me.	3.08	1.20	3.09	1.27	2.78	1.25	3.13	1.33	3.42	1.21	3.00	0.95
15	When I move to another ward, I feel welcome there.	3.14	1.20	3.19	1.81	3.00	1.15	3.17	1.26	3.40	1.21	2.93	0.85
16	Friendships between patients are encouraged by staff.	2.76	0.91	2.74	0.88	2.56	0.91	2.97	0.81	2.86	0.84	2.85	1.06
17	Romantic feelings between patients are respected by staff.	2.58	1.05	2.53	1.06	2.50	1.10	2.83	1.02	2.46	1.01	2.78	1.01
18	The wards I have been on are clean and in good repair.	2.98	0.81	2.96	0.80	2.98	0.91	2.93	0.45	2.96	0.78	3.05	0.89
19	I have enough privacy on the ward.	2.71	0.87	2.65	0.85	2.59	0.92	2.80	0.55	2.66	0.88	3.00	0.92
20	I feel safe on the ward.	2.88	0.90	2.84	0.88	2.82	0.94	2.90	0.61	2.83	0.91	3.07	0.99
21	Staff encourage me to express my feelings even when I am upset.	2.77	0.96	2.73	0.96	2.62	1.14	2.83	0.59	2.81	0.83	3.00	0.95
22	Staff handle agitated patients well.	2.75	1.00	2.73	1.00	2.64	1.04	3.00	0.95	2.73	0.96	2.83	1.00
23	I have received education about medications while here.	2.84	0.94	2.81	0.93	2.58	1.04	2.60	0.77	3.15	0.74	3.00	0.98
24	I have learned about mental illness while here.	2.90	0.87	2.84	0.86	2.65	0.98	2.70	0.65	3.11	0.70	3.17	0.89

Note: The rating Scale is 1=strongly disagree, 2=disagree, 3=agree, and 4=strongly agree. The higher the mean score, the more respondents agreed with the question.

TABLE 10. (Continued)

No.	QUESTION	HOSPITALWIDE INCLUDING PALS (n=238)		HOSPITALWIDE EXCLUDING PALS (n=197)		ADULT PSYCHIA-TRIC UNIT (APU) (n=88)		GERIATRIC/ MEDICAL UNIT (GMU) (n=30)		LEGAL OFFENDER UNIT (LOU) (N=79)		PROGRAM FOR ADAPTIVE LIVING SKILLS (PALS) (N=41)	
		Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.
25	Educational opportunities are available here at the hosp	2.96	0.95	2.91	0.94	2.83	1.00	2.87	0.82	3.02	0.91	3.19	1.01
26	My language issues have been addressed.	3.35	1.11	3.39	1.11	3.40	1.21	3.47	0.90	3.35	1.09	3.17	1.00
27	Hospital staff treat me with respect.	2.90	0.91	2.90	0.88	2.98	0.99	2.83	0.65	2.83	0.82	2.93	1.03
28	My rights as a patient are respected.	2.78	0.98	2.76	0.94	2.70	1.05	2.77	0.68	2.82	0.89	2.85	1.15
29	My questions about discharge are answered.	2.67	1.04	2.64	1.03	2.58	1.14	2.70	0.88	2.70	0.95	2.77	1.07
30	I am satisfied with my discharge plan.	2.67	1.16	2.68	1.13	2.68	1.19	3.07	1.26	2.53	0.99	2.61	1.28
31	The staff listen to me.	2.94	0.92	2.93	0.90	2.86	1.03	2.80	0.71	3.05	0.78	3.00	1.05
32	My physical problems are being treated.	2.97	0.98	2.94	0.96	2.92	1.12	2.80	0.76	3.01	0.84	3.10	1.04
33	My treatment is helping me function better.	2.85	0.98	2.81	0.97	2.60	1.06	2.80	0.93	3.05	0.83	3.02	1.04
34	I get the help I need.	2.88	0.90	2.84	0.87	2.80	0.96	2.70	0.70	2.95	0.82	3.07	1.03
35	The groups/activities are helping me.	2.97	0.91	2.96	0.90	2.94	1.01	3.13	0.73	2.92	0.83	3.02	0.99
36	WSH staff are dedicated to their work.	3.00	0.98	2.99	0.95	3.01	1.07	3.00	0.74	2.97	0.88	3.08	1.12
37	WSH staff are helpful.	2.99	0.91	3.00	0.86	3.02	1.01	3.03	0.67	2.96	0.75	2.94	1.10
38	WSH staff are available.	2.97	0.88	2.94	0.85	2.99	0.97	2.80	0.61	2.94	0.79	3.13	0.99
39	WSH staff are responsive.	2.94	0.91	2.93	0.88	2.97	0.99	2.93	0.69	2.89	0.81	2.96	1.06
40	WSH staff are respectful of others.	2.85	0.96	2.83	0.94	2.95	1.06	2.77	0.73	2.73	0.86	2.96	1.08
41	WSH staff are friendly.	2.95	0.90	2.94	0.84	3.03	0.94	2.70	0.60	2.93	0.79	3.01	1.15
42	WSH staff are hard working.	2.99	0.92	2.96	0.89	3.04	1.03	3.10	0.61	2.81	0.80	3.16	1.03
43	Overall, how would you rate this stay at WSH?	2.51	1.40	2.45	1.40	2.33	1.60	2.77	1.14	2.46	1.25	2.85	1.39

Note: The rating Scale is 1=strongly disagree, 2=disagree, 3=agree, and 4=strongly agree. The higher the mean score, the more respondents agreed with the question.

Four items attained the median score of 2.84. These were: helpfulness of the ward program (Q5), ward safety (Q20), learning about mental illness (Q24), and getting needed help (Q34). In both hospital-wide trends, there were three areas of dissatisfaction with ratings between agree and disagree. These were: overall rating for hospital stay (Q43), respect for romantic feelings between patients (Q17), and patient input into treatment (Q8). Item 43 received the least rating of all hospital-wide with or without PALS.

It is worth noting that not only are the means for hospital-wide excluding PALS generally lower, the standard deviations are also smaller, implying slightly more consistency in the response pattern of the group.

Adult Psychiatric Unit (APU)

In APU, the mean scores ranged between 2.31 (Q8) and 3.40 (Q26) (see Table 10 and Appendix 4a). The overall trend in APU was somewhat similar to the hospital-wide ratings in terms of both the highest and lowest rated items. Additionally, while rating the same items lowest as in the hospital-wide data, APU patients also rated more items very low. By far the highest rated item in APU was language issues (Q26), with a rating of 3.40 (between agree and strongly agree). The next highest approval ratings were in the domain of staff relationships with patients. APU patients felt that staff are hard working (Q42; 3.04), friendly (Q41; 3.03), helpful (Q37; 3.02), and dedicated to their work (Q36; 3.01). They also felt welcome when moved to another ward (Q15; 3.00). On the other hand, the items APU patients rated lowest were also, as in hospital-wide trends, input into treatment (Q8 – 2.31; Q7 – 2.47; and Q9 – 2.48), overall hospital stay (Q43; 2.33), and respect for patients' romantic feelings (Q17; 2.50).

Gero-Psychiatric/Medical Unit (GMU)

The mean ratings in GMU were higher than APU, ranging between 2.50 (Q3) and 3.47 (Q26) (see Table 10 and Appendix 4b). In GMU, up to thirteen items (Q2, Q4, Q5, Q11, Q14, Q15, Q22, Q26, Q30, Q35, Q36, Q37, and Q42) received the highest ratings, with mean scores of 3.00 or better (i.e. between “agree” and “strongly agree”). The three items that received the highest ratings were respectively language issues (Q26; 3.47), helpfulness of the ward program (Q5; 3.20), and feeling welcome when transferred to another ward (Q15; 3.17). Although many more items received very high ratings in GMU, most items that received high rating in the hospital-wide and APU sub-samples (e.g., Q15, Q26, Q36, Q37, and Q42) were equally rated high in GMU. Further, GMU respondents had high approval ratings for the helpfulness of groups and activities (Q35; 3.13), satisfaction with the discharge plan (Q30; 3.07), fairness and helpfulness of the ward program (Q4; 3.10, and Q5; 3.20), helpfulness of medications (Q11; 3.03), learning things that will help the patient stay out of hospital (Q2; 3.00), and how well staff handle agitated patients (Q22; 3.00).

Four items were coincident with the median value of 2.83. These were: medical care (Q12), respect for romantic feelings (Q17), encouraging the patient to express their feelings (Q21), and treating patients with respect (Q27). The items rated lowest by GMU patients were quite different from the hospital-wide or APU ratings. These items of dissatisfactions were explanation of the ward program (Q3; 2.50), receiving education about medications at the hospital (Q23; 2.60), learning about mental illness (Q24; 2.70), answering questions

about discharge (Q29; 2.70), getting needed help (Q34; 2.70), and staff friendliness (Q41; 2.70).

Legal Offender Unit (LOU)

The mean scores for LOU responses ranged between 2.46 (Q43 – overall hospital stay) and 3.42 (Q14 – helpfulness of ward transfers) (see Table 10 and Appendix 4c). Ratings of items by LOU patients were somewhat different from the hospital-wide trends. Like other hospital patients, LOU patients were basically most satisfied with ward transfers (Q14; 3.42), feeling welcome on another ward (Q15; 3.40), and the way the hospital has addressed language issues (Q26; 3.35). But in addition, they rated other items very high, quite contrary to the views of hospital-wide patients, or patients of APU. These were helpfulness of medications (Q11 – 3.12, which also received high rating by GMU but not by APU), learning about mental illness (Q24 – 3.11, which was among the lowest rated in GMU, and moderately rated in APU and hospital-wide), and medication education (Q23 – 3.15, also among the lowest rated in GMU and moderate hospital-wide).

The median score in LOU was 2.91 (Q13 - accommodation of the patient's special needs). Just above the median was the helpfulness of groups and activities (Q35; 2.92), while just below the median was staff responsiveness (Q39; 2.89).

Like the hospital-wide and APU data, LOU patients had low approval ratings for the assessment of their overall stay at the hospital (Q43; 2.46) and staff regard for patients' romantic feelings (Q17; 2.46). In addition, LOU patients were not quite satisfied with a number of other items. These low-rated items were satisfaction with discharge plan (Q30; 2.53), inclusion of the patient's ideas in treatment by staff (Q9; 2.65), privacy on the ward (Q19; 2.66), and the fairness of the ward program (Q4; 2.68).

Program for Adapted Living Skills (PALS)

Ratings for PALS ranged from 2.61 for satisfaction with discharge plan (Q30) to 3.19 for availability of educational opportunities at the hospital (Q25) (see Table 10 and Appendix 4d). In general, the response pattern in PALS was somewhat similar to LOU but different from other programs. The items PALS patients rated highest, in addition to educational opportunities, were learning about mental illness (Q24; 3.17), language issues (Q26; 3.17), and staff qualities (Q42 – 3.16; and Q38 – 3.13). Unlike all other programs and the hospital average, PALS patients rated the hospital's treatment of their physical problems sixth.

The median of the ratings in PALS was 2.96, which was shared by two items relating to staff issues, namely staff responsiveness (Q39) and respectfulness of staff to others (Q40).

The two items PALS residents rated lowest were in the domain of discharge issues: satisfaction with discharge plan (Q30; 2.61) and answering questions about discharge (Q29; 2.77). The lowest, Q30, was also an issue of dissatisfaction among LOU patients, while the second (Q29) among GMU patients. Four items tied for the third lowest score of 2.78 in PALS: fairness of the ward program (Q4), explanation of treatment-related questions (Q7), patient input into treatment (Q8), and staff respect for patients' romantic feelings (Q17).

Of these four, fairness of the ward program was also an issue only in LOU, whereas in GMU it was rated among the best. Explanation of treatment-related questions (Q7) was also an issue only in APU, while patient input (Q8) and respect for romantic feelings (Q17) were among the lowest rated in the hospital-wide and APU responses.

CONSUMER SURVEY RESULTS PART 2: THE BEST AND WORST THINGS ABOUT THE HOSPITAL, AND SUGGESTIONS FOR IMPROVEMENT

Part two of the survey asked patients about their views regarding the best and worst things about WSH, and what could be done to make treatment better. They were asked to indicate as many choices as possible. The percentage frequencies were tabulated by major category by unit. The results for the first choice indicated by the respondent for each question are shown on Table 11. (Detailed results for the first three suggestions by respondents by unit are shown in Appendix 5).

The Best Things about the Hospital

Overwhelmingly, patients hospital-wide and in individual units agree that the best thing about the hospital was the combination of patient care/medication/groups/educational activities. The percentage frequencies of this ranged between 14.8% in APU and 33.3% in GMU (see Table 11). Hospital-wide frequencies with or without PALS for first choice were identical at 21.8%. Including PALS, the next best category was food/meals/snacks, while excluding PALS, staff was the next best substantive response. Staff was also the next best in the individual units of APU and GMU. In LOU, the negative response or “nothing” category was the second highest. Excluding that, the next best response was food, meals, and snacks. In PALS, two categories tied for second choice. These were food, meals, and snacks combined and freedom.

The remaining categories (see Appendix 5) had moderate response frequencies. The “no response/don’t know” category ranged from 4% of LOU to 13% of APU. The most important component of the category “other” was making friends, with frequencies ranging up to 9% in hospital-wide excluding PALS, and 10% in APU.

In summary, the three best things patients reported about the hospital were (1) patient care (including medications, groups and education); (2) food, meals and snacks; and (3) the staff.

The Worst Things about the Hospital

In the hospital-wide data with or without PALS (as well as in APU and PALS), the “other” category was the first choice for the worst thing about the hospital (see Table 11 and Appendix 5). This category was composed of a number of subcategories the largest of which were staff respect for patients’ rights and overcrowding or lack of privacy in wards. Up to 14% of hospital patients (with or without PALS), 16% of APU, and 15% of PALS reported this choice. Besides the “other” category, staff to patient interaction was the next reported worst thing about WSH among hospital-wide, APU, and LOU patients, with frequencies of 1% and 12% respectively for the hospital with and without PALS, 10% for APU, and 17% for LOU.

TABLE 11. RESPONSES TO OPEN-ENDED QUESTIONS (% FREQUENCY OF RESPONSES)

SURVEY QUESTION	Hospitalwide Including PALS (N=238)	Hospitalwide Not Including PALS (n=197)	Adult Psychiatric Unit (n=88)	Gero-Psychiatric/Medical Unit (n=30)	Legal Offender Unit (n=79)	Program for Adaptive Living Skills (n=41)
44. The Best Things about WSH						
. Patient care/medication/groups/education	21.8	21.8	14.8	33.3	25.3	22.0
. Food/meals/snacks	10.9	9.6	8.0	6.7	12.7	17.1
. Staff	10.5	11.7	13.6	13.3	8.9	4.9
. Negative response/nothing	8.8	10.2	5.7	10.0	15.2	2.4
. Facilities/buildings/wards	8.4	7.1	10.2	13.3	1.3	14.6
. Freedom/levels/PALS	8.0	6.1	6.8	3.3	6.3	17.1
. Safety/security/shelter	7.6	7.6	6.8	0.0	11.4	7.3
. Activities/work/outings	7.6	8.1	10.2	3.3	7.6	2.4
. Other	8.4	9.6	11.4	10.0	7.6	2.4
. Making friends	(4.2)	(9.1)	(10.2)	(6.7)	(6.9)	(2.2)
. No response/don't know	8.0	8.1	12.5	6.7	3.8	7.3
45. The Worst Things about WSH						
. Staff to patient interaction	10.5	11.7	10.2	3.3	16.5	4.9
. Not enough freedom/smoking/outings	9.2	10.2	12.5	6.7	8.9	4.9
. Patient care/treatment/medication/groups	8.8	7.6	9.1	3.3	7.6	14.6
. Seclusion/restraint/punishment	8.8	8.6	10.2	10.0	6.3	9.8
. Food/meals, quantity and quality	8.4	7.6	5.7	13.3	7.6	12.2
. Nothing	6.7	6.6	3.4	16.7	6.3	7.3
. Patient to patient conflict/fights	4.6	5.1	3.4	6.7	6.3	2.4
. Not enough activities/work/education	3.8	3.0	3.4	0.0	3.8	7.3
. Wards/rules/levels/conditions	3.8	3.0	4.5	0.0	2.5	7.3
. Facilities/buildings/grounds/conditions	2.9	3.0	1.1	3.3	5.1	2.4
. Safety/security/staffing	2.5	3.0	3.4	3.3	2.5	0.0
. Length of stay	2.5	3.0	1.1	3.3	5.1	0.0
. Other	14.1	13.7	15.9	10.0	12.7	14.6
. 1. Staff don't respect patient rights	(6.3)	(9.7)	(10.2)	(3.3)	(6.5)	(4.9)
. 2. Ward overcrowded/lack of privacy	(5.0)	(2.6)	(2.3)	(6.7)	(4.4)	(2.4)
No response/don't know	13.4	13.7	15.9	20.0	8.9	12.2
46. What Could be Done to Make Treatment Better						
. More freedom/free time/outside time	17.6	17.3	12.5	16.7	22.8	19.5
. Less/better alternative medications	9.7	11.2	15.9	3.3	8.9	2.4
. More time with staff/physicians	5.9	5.1	5.7	3.3	5.1	9.8
. More programs/medication education	5.0	5.6	5.7	3.3	6.3	2.4
. More groups and treatment	4.6	5.6	4.5	3.3	7.6	0.0
. More training of staff/physicians	2.9	2.0	1.1	3.3	2.5	7.3
. Other	29.0	28.4	31.8	20.0	27.8	31.7
. 1. Better/more communication with Dr./staff	(8.4)	(12.2)	(12.5)	(3.3)	(15.2)	(14.6)
. 2. To be released	(6.3)	(10.2)	(17.0)	(3.3)	(5.1)	(2.4)
No response/don't know	24.4	24.4	21.6	46.7	19.0	24.4

In GMU, with the exception of the 17% who indicated nothing as the worst thing, the category of food/meals/snacks was the worst thing reported by 13%, followed by seclusion/restraint/punishment by 10% respondents. In PALS, the combined category of patient care/treatment/medications/groups and the “other” category tied for first place in terms of the worst thing about WSH.

In summary, the two worst things for all programs except GMU and PALS were staff interaction with patients and the lack of enough freedom or time for smoking and groups. In GMU, the two worst things were seclusion/restraint and food/meals/ snacks. In PALS on the other hand, patient care and foods/meals/snacks were the two worst things.

What Could be Done to Make Treatment Better

In all responses hospital-wide and in every unit except APU, the first suggestion by patients about what to do to make treatment better, was that they wanted more freedom, more free time, and more time outside (see Table 11 and Appendix 5). The frequencies were 17%-18% hospital-wide with or without PALS, 17% GMU, 20% PALS, 23% LOU, and 13% APU. Patients in LOU (the most restrictive environment) and PALS felt most strongly about this, while patients in APU felt the least about this. In APU, what was most important to patients was to be released (17%), followed by medication management - less or better alternative medications (16%). Among hospital-wide patients, less or better alternative medications was the second important suggestion. In LOU and PALS, the second important suggestion was better or more communication with doctors and staff.

In summary, the most important suggestions by patients were freedom (both within the hospital and on release), medication management, and improved communications between patients and doctors and staff.

PROPORTIONS OF VALID RESPONSES

The proportions of valid responses to the family survey were quite high, ranging from 78% for language issues (Q26) to 99.6% (237 out of 238) for helpfulness of hospital stay (Q1), learning things at the hospital that will help patients stay out of the hospital (Q2), and explaining questions about treatment (see Table 12). Even the lowest response rate of 79% (for language issues) implies that up to 187 of the 238 respondents answered the question. The 51 respondents who did not answer that question were likely to be members of the majority group who have no language problems. With the exception of Q26, only five items had less than 90% of valid responses.

COMPARISON OF 1998 CONSUMER SURVEY RESULTS WITH 1995 AND 1996

Table 13 shows item rankings for the 1998 survey for hospital-wide responses including PALS, compared to 1995 and 1996. The first notable observation is that the top three items in 1998 signify a considerable improvement over the last two surveys. This means that according to patients' perceptions, the hospital has done a relatively good job in the last two years in those areas.

TABLE 12. 1998 CONSUMER SURVEY: PROPORTIONS OF VALID RESPONSES

No.	Question	Frequency	
		No.	%
1	This hospital stay has helped me.	237	99.6
2	I am learning things that will help me stay out of the hospital.	237	99.6
3	The ward program has been explained to me.	236	99.2
4	The ward program is fair.	228	95.8
5	The ward program is helpful.	228	95.8
6	There are plenty of groups/other activities.	235	98.7
7	My questions about treatment have been explained to me.	237	99.6
8	I have enough say about my treatment.	234	98.3
9	The staff have included my ideas in my treatment.	229	96.2
10	My questions about medications have been explained to me.	233	97.9
11	My medications are helping me.	231	97.1
12	The care I receive for my medical concerns is adequate.	233	97.9
13	Accommodations for my special needs have been provided.	231	97.1
14	Ward transfers have been helpful to me.	194	81.5
15	When I move to another ward, I feel welcome there.	196	82.4
16	Friendships between patients are encouraged by staff.	232	97.5
17	Romantic feelings between patients are respected by staff.	224	94.1
18	The wards I have been on are clean and in good repair.	235	98.7
19	I have enough privacy on the ward.	235	98.7
20	I feel safe on the ward.	234	98.3
21	Staff encourage me to express my feelings even when I am upset.	230	96.6
22	Staff handle agitated patients well.	229	96.2
23	I have received education about medications while here.	232	97.5
24	I have learned about mental illness while here.	233	97.9
25	Educational opportunities are available here at the hospital.	223	93.7
26	My language issues have been addressed.	185	77.7
27	Hospital staff treat me with respect.	229	96.2
28	My rights as a patient are respected.	230	96.6
29	My questions about discharge are answered.	224	94.1
30	I am satisfied with my discharge plan.	215	90.3
31	The staff listen to me.	215	90.3
32	My physical problems are being treated.	209	87.8
33	My treatment is helping me function better.	227	95.4
34	I get the help I need.	229	96.2
35	The groups/activities are helping me.	226	95.0
36	WSH staff are dedicated to their work.	221	92.9
37	WSH staff are helpful.	223	93.7
38	WSH staff are available.	225	94.5
39	WSH staff are responsive.	224	94.1
40	WSH staff are respectful of others.	223	93.7
41	WSH staff are friendly.	224	94.1
42	WSH staff are hard working.	221	92.9
43	Overall, how would you rate this stay at WSH?	227	95.4
44	The best things about WSH are:	223	93.7
45	The worst things about WSH are:	213	89.5
46	What could be done to make your treatment better?	212	89.1

TABLE 13. RANKINGS OF 1998 CONSUMER RESPONSES, AND COMPARISON WITH 1995 AND 1996, HOSPITAL-WIDE INCLUDING PALS

Q No.	Question	1998			1998	1996	1995
		Mean	S.D.	N	Rank	Rank	Rank
26	My language issues have been addressed.	3.35	1.11	238	1	4	12
15	When I move to another ward, I feel welcome there.	3.14	1.15	238	2	21	15
14	Ward transfers have been helpful to me.	3.08	1.22	238	3	37	21
36	WSH staff are dedicated to their work.	3.00	0.98	238	4	4	5
37	WSH staff are helpful.	2.99	0.91	238	5	9	4
42	WSH staff are hard working	2.99	0.92	238	5	28	7
18	The wards I have been on are clean and in good repair.	2.98	0.81	238	7	2	1
32	My physical problems are being treated.	2.97	0.98	238	8	17	-
35	The group and activities are helping me.	2.97	0.91	238	8	20	-
38	WSH staff are available	2.97	0.88	238	8	17	11
25	Educational opportunities are available here at the hospital.	2.96	0.95	238	11	41	17
41	WSH staff are friendly.	2.95	0.90	238	12	12	3
31	The staff listen to me.	2.94	0.92	238	13	21	-
39	WSH staff are responsive.	2.94	0.91	238	13	15	10
2	I am learning things that will help me stay out of the hospital.	2.90	0.87	238	15	12	-
24	I have learned about mental illness while here.	2.90	0.87	238	15	9	8
27	Hospital staff treat me with respect.	2.90	0.91	238	15	3	-
1	This hospital stay has helped me.	2.88	0.90	238	18	4	23
11	My medications are helping me.	2.88	1.00	238	18	17	6
20	I feel safe on the ward.	2.88	0.90	238	18	21	13
34	I get the help I need.	2.88	0.90	238	18	31	-
5	The ward program is helpful.	2.85	0.92	238	22	9	27
13	Accommodations for my special needs have been provided.	2.85	0.91	238	22	28	15
33	My treatment is helping me function better.	2.85	0.98	238	22	21	-
40	WSH staff are respectful of patients	2.85	0.96	238	22	28	18
3	The ward program has been explained to me.	2.84	0.77	238	26	15	19
23	I have received education about medications while here.	2.84	0.94	238	26	12	1
12	The care I receive for my medical concerns is adequate.	2.81	0.93	238	28	4	13
10	My questions about medications have been explained to me.	2.78	0.93	238	29	4	-
28	My rights as a patient are respected.	2.78	0.98	238	29	34	-
21	Staff encourage me to express my feelings, even when I'm upset.	2.77	0.96	238	31	32	29
16	Friendships between patients are encouraged by staff.	2.76	0.91	238	32	34	28
22	Staff handle agitated patients well.	2.75	1.00	238	33	21	26
4	The ward program is fair.	2.74	1.00	238	34	34	30
6	There are plenty of groups and activities.	2.74	0.86	238	34	21	20
19	I have enough privacy on the ward.	2.71	0.87	238	36	32	25
7	My questions about treatment have been explained to me.	2.69	0.86	238	37	21	24
29	My questions about discharge are answered.	2.67	1.04	238	38	40	-
30	I am satisfied with my discharge plan.	2.67	1.16	238	38	42	-
9	The staff has included my ideas in my treatment plan.	2.66	0.84	238	40	38	32
8	I have enough say about my treatment.	2.59	0.95	238	41	39	-
17	Romantic feelings between patients are respected by staff.	2.58	1.05	238	42	43	33
43	Overall, how would you rate this stay at WSH?	2.51	1.41	238	43	1	21

At the other end of the spectrum, with the exceptions of Questions 14 and 25, most of the lowest ranking items in 1995 and 1996 continued to rank lowest in 1998. Questions ranked 38-42 were more or less the same in 1996 and 1998 except for Q41. Questions at the middle of the distribution also did not change much. For instance, three items of the four-way tie for 18th place in 1998 (Q11, Q20, and Q34) were ranked respectively 14th, 17th, and 31st, in 1996. Also, three items of the four-way tie for 22nd in 1998 (Q13, Q33, and Q40), ranked 28th, 21st, and 28th respectively in 1996.

CHANGES IN ITEM RANKINGS FROM 1996 TO 1998

Identical survey questionnaires were used in 1996 and 1998. As such the results, with the converted scores for 1998, are comparable. Changes in item rankings between these two surveys for the entire hospital (including PALS) are shown on Table 14 and Figure 1. (The breakdowns by unit are shown in Appendix 7.) Two questions, Q14 (helpfulness of ward transfers) and Q25 (educational opportunities), had the greatest improvement in ranking. Q14 improved by 34 notches, while Q25 by 30. Next were questions 42, 15, 34, and 35, which increased between 12 and 23 notches. These highly improved items center around the major themes of ward transfers, educational activities, and staff issues.

Items that showed moderate improvement in ranking, i.e. between 4 and 9, were related to physical problems (Q13 and Q32), patient-staff relations (Q31, Q37, Q38, and Q40), patient rights (Q28), and discharge planning (Q30). Seven items made slight improvement (1-3 levels) in ranking, and these were related mostly to affect (Q17, Q21, and Q39), safety (Q20), language problems (Q26), discharge (Q30), and staff issues (Q16). Three items which had no change in ranking were fairness of the ward program (Q4) which ranked 34th in both years, friendliness of staff (Q12) which ranked 12th in both years, and staff dedication to work (Q36) which ranked a respectful 4th in both years.

The six items which declined slightly (between -1 and -4) had to do with treatment (Q8, Q9, and Q33), medications (Q11), learning things while at the hospital (Q2), and privacy (Q19). With the exception of Q2 and Q11, these items were consistently at the bottom half of the rankings for both surveys. This implies that patients are indeed somewhat consistent in their views about treatment and medication, and they continue not to hold a high opinion about them.

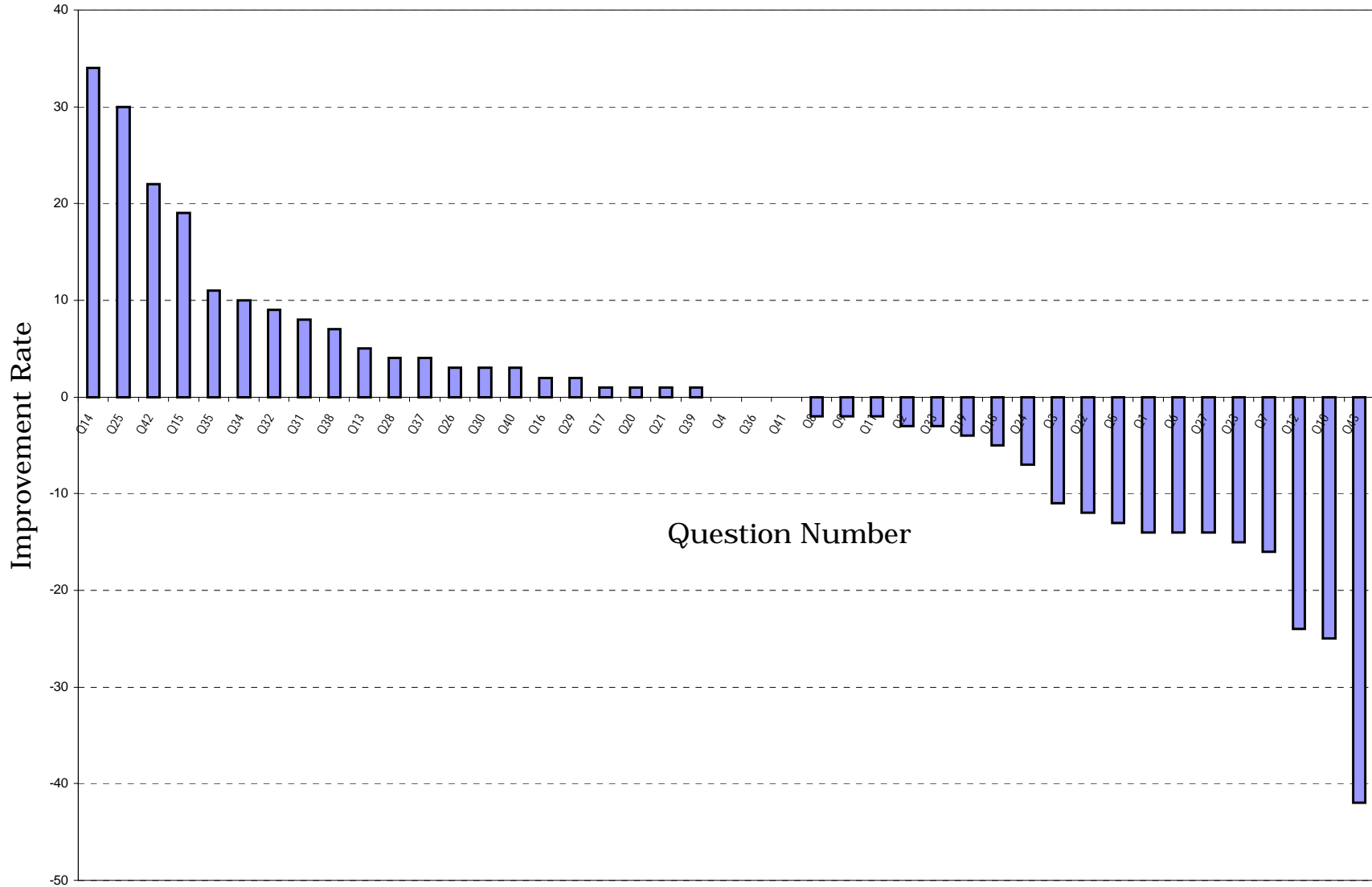
There were moderate declines (between -5 and -12) in five items, mostly dealing with ward conditions (Q3 and Q18), learning about mental illness (Q24), and staff relations (Q22 and Q27). The rest of the questions (eight in all) fell drastically in ranking. These were questions relating to medication education, treatment, groups, and programs (Q5, Q6, Q7, Q10, Q12, and Q23), and views about the hospital stay (Q1, and Q43).

It must be noted that a change in ranking does not necessary reflect a marked improvement or decline in rating, especially if the mean scores of an item in the two surveys are different. If the means in both surveys are similar, then a change in ranking would reflect a corresponding improvement or decline in the item's new rating. On the other hand, if the mean is significantly higher in one survey than in the other, then a change in ranking would reflect a corresponding improvement or decline in the item's rating.

TABLE 14. CONSUMER SURVEY: CHANGE IN ITEM RANKINGS, 1996-1998

Q No.	Question	RANKING		CHANGE
		1996	1998	1996-1998
14	Ward transfers have been helpful to me.	37	3	34
25	Educational opportunities are available here at the hospital.	41	11	30
42	WSH staff are hard-working.	28	5	23
15	When I move to another ward, I feel welcome there.	21	2	19
34	I get the help I need.	31	18	13
35	The group/activities are helping me.	20	8	12
32	My physical problems are being treated.	17	8	9
38	WSH staff are available.	17	8	9
31	The staff listen to me.	21	13	8
13	Accommodations for my special needs have been met.	28	22	6
40	WSH staff are respectful of patients.	28	22	6
28	My rights as a patient are respected.	34	29	5
37	WSH staff are helpful.	9	5	4
30	I am satisfied with my discharge plan.	42	38	4
26	My language issues have been addressed.	4	1	3
20	I feel safe on the ward.	21	18	3
29	My questions about discharge are answered.	40	38	2
16	Friendships between patients are encouraged by staff.	34	32	2
39	WSH staff are responsive.	15	13	2
17	Romantic feelings between patients are respected by staff.	43	42	1
21	Staff encourage me to express my feelings, even when I'm upset.	32	31	1
4	The ward program is fair.	34	34	0
41	WSH staff are friendly.	12	12	0
36	WSH staff are dedicated to their work.	4	4	0
33	My treatment is helping me function better.	21	22	-1
11	My medications are helping me.	17	18	-1
8	I have enough to say about my treatment.	39	41	-2
9	The staff have included my ideas in my treatment plan.	38	40	-2
2	I am learning things that will help me stay out of the hospital.	12	15	-3
19	I have enough privacy on the ward.	32	36	-4
18	The wards I have been on are clean and in good repair.	2	7	-5
24	I have learned about mental illness while here.	9	15	-6
3	The ward program has been explained to me.	15	26	-11
27	Hospital staff treat me with respect.	3	15	-12
22	Staff handle agitated patients well.	21	33	-12
6	There are plenty of groups/other activities.	21	34	-13
5	The ward program is helpful.	9	22	-13
23	I have received education about medications while here.	12	26	-14
1	This hospital stay has helped me.	4	18	-14
7	My questions about treatment have been explained to me.	21	37	-16
12	The care I receive for my medical concerns is adequate.	4	28	-24
10	My questions about medications have been explained to me.	4	29	-25
43	Overall, how would you rate this stay at WSH?	1	43	-42

FIGURE 1. CONSUMER SURVEY: IMPROVEMENT IN RANKING, 1996-1998



In comparing means between the 1996 and 1998 surveys, the means of the 1998 survey were slightly higher than those of the 1996 survey. This denotes that patients generally expressed a slightly higher level of satisfaction to all survey items in 1998 than in 1996. This can also be viewed as an overall higher approval rating for the hospital in general, ward conditions, the staff, and programs. Since the 1995 questionnaire was not quite comparable to 1996 and 1998, the difference in means between the 1995 survey and the latter two surveys cannot be established. However, the results of the next round of surveys (hopefully to be conducted in the Fall of 1999) will provide a third comparable data point which will give a clearer picture of this trend.

CHAPTER 3

THE 1998 FAMILY SATISFACTION SURVEY

INTRODUCTION

At the start of the study, the research assistants read a total of 930 patient charts to collect addresses and phone numbers of family members (families, relatives, and legal guardians) of current patients. Family members with valid contact information during Fall 1998 were 865. These were selected for the study. The rest were families of short-term patients who had been discharged. Telephone calls were made to verify addresses, and obtain consent of families to participate in the study. A total of 585 families consented, and questionnaires were mailed out to them. Of the 585 questionnaires mailed, 17% were returned for bad addresses or further refusals, 41% were never returned, and 42% were completed and returned (see Table 15).

TABLE 15. FAMILY SURVEYS: COMPLETION RATES FOR 1995, 1996, AND 1998

	1998		1996		1995	
	No.	%	No.	%	No.	%
Mailed	585	100.0	190	100.0	203	100.0
Refusals/bad address	101	17.3	-	-	-	-
No Returns	238	40.7	106	55.8	81	39.9
Completed Surveys	243	41.5	84	44.2	122	60.1

The response rate for the 1998 family survey was 42% of the questionnaires mailed. In comparison, of the 190 family questionnaires mailed in 1996, 56% were never returned, and 44% were completed and returned. In 1995, of the 203 family questionnaires mailed, 40% were never returned, and 60% were completed and returned. Thus in absolute terms, the 1998 completed surveys were three times as many as 1996 and twice as many as 1995.

In the 1995 and 1996 surveys, only families of GMU patients were interviewed. The rationale was that since GMU patients were unable to participate and therefore excluded from the patient surveys, the families might provide information which would complement the views of patients interviewed in the other clinical units. In the 1998 survey, an attempt was made to contact all family members of patients in all units. This resulted in a larger number of completed family interviews, and certainly more diverse views as all units were represented.

FAMILY SURVEY RESULTS PART 1: FAMILY SATISFACTION WITH PATIENT TREATMENT CONDITIONS

About 68% of the 1998 family respondents were family members of patients in APU, 18% were of GMU patients, and 14% were mostly of LOU and PALS patients, but also including a few family members who did not indicate their relative's ward or unit. Like the consumer survey, data were aggregated by hospital and unit, with a second hospital-wide aggregation including PALS but excluding GMU. In addition to the hospital-wide groupings, only GMU and APU had sufficient cases individually to be reported as separate units. The results are shown on Table 16.

Hospital-Wide Results

Hospital-wide results including PALS and GMU (Tables 16 and 17) show means ranging from 2.44 (Q21: mental illness education) to 3.85 (Q23: language issues) - generally higher than in the consumer survey. Only seven means were less than 3.00. Like patients, families agree strongly that patients' language issues had been addressed. The next best ratings were staff friendliness (Q38; 3.38), the handling of agitated patients by staff (Q19; 3.37), family satisfaction with patient's discharge plan (Q27; 3.36), the hard working nature of staff (Q39; 3.35), helpfulness of staff (Q34; 3.33), and respectfulness of staff to patients (Q37; 3.33). Except for language issues and discharge planning, the top ten responses were family approval of staff relations with patients. The lowest rankings were family education on mental illness (Q21; 2.44), medication education (Q22; 2.61), ward program explanation (Q4; 2.61), and information on mental illness (Q20; 2.65). Five of the seven lowest ranked items were related to learning things from staff about opportunities, or education about medications and mental illness.

Hospital-Wide Excluding GMU

Item ratings hospital-wide with and without GMU were similar, with language issues (Q23) ranked highest in each case. Also, items ranked at the bottom half of the range were practically the same, except for the rank-order of the items and the range of the means. Without GMU, the means of items were higher, ranging from 2.54 (Q21: mental illness education) to 3.87 (Q23: improvements in language issues) (see Tables 16 and 18). Also, without GMU, satisfaction with the family member's discharge plan (Q27) was second, and staff friendliness (Q38) third, whereas with GMU staff friendliness (Q38) was second and staff handling of agitated patients (Q19) third.

TABLE 16. FAMILY SATISFACTION SURVEY, 1998: MEAN RATINGS OF RESPONSES FOR THE HOSPITAL AND TWO MAJOR UNITS

No.	QUESTION	HOSPITAL-WIDE INCLUDING PALS (n=243)		HOSPITAL-WIDE EXCLUDING (GMU) (n=199)		ADULT PSY-CHIATRIC UNIT (APU) (n=166)		GERIATRIC/MEDICAL UNIT (GMU) (n=44)	
		Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.
1	WSH staff contacted me about my family member's hospitalization here.	2.94	0.98	2.79	1.01	2.93	1.00	3.20	0.77
2	This hospital stay has helped my family member.	3.19	0.84	3.16	0.85	3.20	0.79	3.34	0.78
3	My family member is learning things that will help him/her out of the hospital.	2.89	1.23	2.91	1.20	2.96	1.20	2.79	1.34
4	The ward program (level system) has been explained to me.	2.61	1.04	2.61	1.05	2.60	1.07	2.61	1.04
5	The ward program is fair to my family member.	3.22	0.98	3.20	1.00	3.29	0.98	3.32	0.91
6	The ward program is helpful to my family member.	3.23	0.96	3.23	0.96	3.25	0.95	3.32	0.93
7	There are plenty of groups/other therapeutic activities for my family member.	3.04	1.15	3.00	1.16	3.04	1.15	3.20	1.09
8	My family member's treatment has been explained to me.	2.76	1.07	2.70	1.10	2.74	1.08	3.00	0.89
9	Staff are receptive to my input.	3.10	0.94	3.07	0.95	3.11	0.95	3.23	0.86
10	My input has been incorporated into the treatment of my family member.	3.11	1.20	3.09	1.24	3.11	2.42	3.20	1.00
11	My questions about my family member's medications have been answered.	3.09	1.06	3.05	1.08	3.08	1.08	3.25	0.97
12	The medications are helping my family member.	3.16	0.86	3.16	0.88	3.17	0.88	3.16	0.81
13	The care provided for my family member's medical concerns is adequate.	3.10	0.86	3.08	0.89	3.09	0.90	3.16	0.75
14	Accommodations for my family member's special needs have been provided.	3.17	0.95	3.11	0.96	3.16	0.93	3.45	0.88
15	Ward transfers (if any) have been therapeutic for my family member.	3.21	1.15	3.22	1.19	3.22	1.19	3.18	0.97
16	The facilities at WSH (wards, other buildings) are clean and in good repair.	3.22	0.79	3.19	0.74	3.21	0.74	3.39	0.97
17	Accommodation for visiting on the ward are good.	3.08	0.83	3.05	0.81	3.10	0.79	3.23	0.91
18	"Campus life" on WSH grounds seems therapeutic.	3.23	1.09	3.18	1.10	3.20	1.14	3.49	0.99
19	Staff handle agitated patients well.	3.37	0.95	3.34	0.94	3.34	0.92	3.52	1.00
20	Staff have informed me about educational opportunities for me to learn about mental illness.	2.65	1.18	2.64	1.20	2.64	1.22	2.70	1.11
21	I have received education here on mental illness.	2.44	1.16	2.54	1.17	2.54	1.18	2.66	1.10
22	I have received education about my family member's medications.	2.61	1.07	2.58	1.09	2.60	1.11	2.75	0.94
23	The language issues for my family member have been addressed.	3.85	1.17	3.87	1.18	3.82	1.18	3.75	1.10
24	Hospital staff treat my family member with respect.	3.29	0.77	3.29	0.77	3.29	0.77	3.32	0.77
25	My family member's rights as a patient are respected.	3.26	0.81	3.24	0.80	3.25	0.77	3.39	0.84
26	My questions about my family member's discharge are answered.	3.24	1.25	3.20	1.26	3.20	1.24	3.39	1.22
27	I am satisfied with my family member's discharge plan.	3.36	1.39	3.36	1.42	3.35	1.42	3.34	1.26
28	WSH staff listen to my family member.	3.29	1.01	3.28	1.04	3.28	1.01	3.29	0.88
29	My family member's physical problems are being treated.	3.23	0.96	3.23	0.96	3.20	0.94	3.27	0.95
30	My family member's treatment is helping him/her function better.	3.08	0.88	3.07	0.90	3.10	0.89	3.11	0.84
31	My family member gets the help he/she needs.	3.18	0.93	3.16	0.96	3.13	0.91	3.27	0.82
32	The groups and activities are helping my family member.	3.26	1.07	3.22	1.06	3.23	1.07	3.25	1.13
33	WSH staff are dedicated to their work.	3.26	0.87	3.25	0.88	3.26	0.87	3.29	0.88
34	WSH staff are helpful.	3.33	0.79	3.33	0.78	3.32	0.77	3.34	0.83
35	WSH staff are available.	3.15	0.84	3.13	0.84	3.16	0.85	3.25	0.84
36	WSH staff are responsive.	3.23	0.87	3.22	0.89	3.25	0.88	3.27	0.82
37	WSH staff are respectful of others.	3.33	0.87	3.32	0.87	3.34	0.84	3.40	0.88
38	WSH staff are friendly.	3.38	0.80	3.36	0.80	3.39	0.78	3.48	0.79
39	WSH staff are hard working.	3.35	0.94	3.34	0.95	3.35	0.94	3.41	0.92
40	Overall, how would you rate this stay at WSH for your family member?	3.02	1.12	2.98	1.14	3.02	1.11	3.19	1.03

Note: These are the converted scores. 1=strongly disagree, 2=disagree, 3=agree, and 4=strongly agree.

TABLE 17. RANKINGS OF 1998 FAMILY RESPONSES, AND COMPARISON WITH 1995 AND 1996 - HOSPITAL-WIDE RESPONSES

Q No.	Question	1998			1998	1996	1995
		Mean	S.D.	N	Rank	Rank	Rank
23	The language issues for my family member have been addressed.	3.85	1.17	243	1	31	13
38	WSH staff are friendly.	3.38	0.94	243	2	1	1
19	Staff handle agitated patients well.	3.37	0.8	243	3	16	-
27	I am satisfied with my family member's discharge plan.	3.36	0.79	243	4	28	-
39	WSH staff are hard working	3.35	0.87	243	5	4	7
34	WSH staff are helpful.	3.33	1.15	243	6	2	2
37	WSH staff are respectful of patients.	3.33	0.84	243	6	5	3
24	Hospital staff treat my family member with respect.	3.29	0.98	243	8	6	-
28	WSH staff listen to my family member.	3.29	0.84	243	8	19	-
33	WSH staff are dedicated to their work.	3.26	1.23	243	10	8	4
25	My family member's rights as a patient are respected.	3.26	1.04	243	10	6	-
32	The groups and activities are helping my family member.	3.26	0.98	243	10	33	-
26	My questions about my family member's discharge are answered.	3.24	0.96	243	13	30	-
6	The ward program is helpful to my family member.	3.23	1.15	243	14	11	-
18	"Campus life" on WSH grounds seems theapeutic.	3.23	1.07	243	14	26	15
29	My family member's physical problems are being treated.	3.23	0.94	243	14	23	-
36	WSH staff are responsive.	3.23	1.2	243	14	10	6
5	The ward program is fair to my family member.	3.22	1.06	243	18	14	-
16	The facilities at WSH (e.g., the ward, other buildings) are clean and in good repair.	3.22	0.86	243	18	12	-
15	Ward transfers have been therapeutic for my family member.	3.21	0.86	243	20	27	12
2	This hospitalization has helped my family member.	3.19	0.95	243	21	3	-
31	My family member gets the help he/she needs.	3.18	0.79	243	22	22	-
14	Accomodations for my family member's special needs have been provided.	3.17	0.83	243	23	20	14
12	The medications are helping my family member.	3.16	1.09	243	24	14	-
35	WSH staff are available	3.15	0.95	243	25	8	5
10	My input has been incorporated into the treatment of my family member.	3.11	1.18	243	26	32	17
9	Staff are receptive to my input.	3.10	1.16	243	27	13	11
13	The care provided for my family member's medical concerns is adequate.	3.10	1.07	243	27	20	-
11	My questions about my family member's medications have been answered.	3.09	0.77	243	29	17	-
17	Accommodations for visiting on the ward are good.	3.08	0.81	243	30	18	10
30	My family member's treatment is helping him/her function better.	3.08	1.25	243	30	23	-
7	There are plenty of groups and other therapeutic activities for my family member.	3.04	1.39	243	32	34	18
40	Overall, how would you rate this stay at WSH for your family member?	3.02	1.01	243	33	40	-
1	WSH staff contacted me about my family member's hospitalization here.	2.94	0.96	243	34	25	16
3	My family member is learning things that will help him/her stay out of the hospital.	2.89	0.88	243	35	38	-
8	My family member's treatment has been explained to me.	2.76	0.93	243	36	28	19
20	Staff have informed me about educational opportunities for me to learn about mental illness.	2.65	1.07	243	37	35	21
4	The ward program (level system) has been explained to me.	2.61	0.87	243	38	36	20
22	I have received education about my family member's medications.	2.61	0.87	243	38	37	-
21	I have received education here on mental illness.	2.44	1.12	243	40	39	22

TABLE 18. FAMILY SURVEY, 1998: RESPONSE RANKINGS
HOSPITAL-WIDE EXCLUDING GMU

Q No.		Mean	S.D.	RANK
23	The language issues for my family member have been addressed.	3.87	1.18	1
27	I am satisfied with my family member's discharge plan.	3.36	1.42	2
38	WSH staff are friendly.	3.36	0.80	3
19	Staff handle agitated patients well.	3.34	0.94	4
39	WSH staff are hard working.	3.34	0.95	4
34	WSH staff are helpful.	3.33	0.78	6
37	WSH staff are respectful of others.	3.32	0.87	7
24	Hospital staff treat my family member with respect.	3.29	0.77	8
28	WSH staff listen to my family member.	3.28	1.04	9
33	WSH staff are dedicated to their work.	3.25	0.88	10
25	My family member's rights as a patient are respected.	3.24	0.80	11
6	The ward program is helpful to my family member.	3.23	0.96	12
29	My family member's physical problems are being treated.	3.23	0.96	12
15	Ward transfers (if any) have been therapeutic for my family member.	3.22	1.19	14
32	The groups and activities are helping my family member.	3.22	1.06	14
36	WSH staff are responsive.	3.22	0.89	14
5	The ward program is fair to my family member.	3.20	1.00	17
26	My questions about my family member's discharge are answered.	3.20	1.26	17
16	The facilities at WSH (wards, buildings) are clean and in good repair.	3.19	0.74	19
18	"Campus life" on WSH grounds seems therapeutic.	3.18	1.10	20
2	This hospital stay has helped my family member.	3.16	0.85	21
12	The medications are helping my family member.	3.16	0.88	21
31	My family member gets the help he/she needs.	3.16	0.96	21
35	WSH staff are available.	3.13	0.84	24
14	Accommodations for my family member's special needs have been provided.	3.11	0.96	25
10	My input has been incorporated into the treatment of my family member.	3.09	1.24	26
13	The care provided for my family member's medical concerns is adequate.	3.08	0.89	27
9	Staff are receptive to my input.	3.07	0.95	28
30	My family member's treatment is helping him/her function better.	3.07	0.90	28
11	My questions about my family member's medications have been answered.	3.05	1.08	30
17	Accommodation for visiting on the ward are good.	3.05	0.81	30
7	There are plenty of groups and other therapeutic activities for my family member.	3.00	1.16	32
40	Overall, how would you rate this stay at WSH for your family member?	2.98	1.14	33
3	My family member is learning things that will help him/her out of the hospital.	2.91	1.20	34
1	WSH staff contacted me about my family member's hospitalization here.	2.79	1.01	35
8	My family member's treatment has been explained to me.	2.70	1.10	36
20	Staff have informed me about educational opportunities to learn about mental illness	2.64	1.20	37
4	The ward program (level system) has been explained to me.	2.61	1.05	38
22	I have received education about my family member's medications.	2.58	1.09	39
21	I have received education here on mental illness.	2.54	1.17	40

Adult Psychiatric Unit

The APU and hospital trends were similar, with APU having a lower maximum score (3.82; Q23) and a higher minimum score (2.54; Q21) (see Tables 16 and 19). The top four items were language issues (3.82), staff friendliness (3.39), family satisfaction with patients' discharge plan (3.35), and the hard working nature of staff (3.35). The nine lowest items hospital-wide with and without GMU were identical with those of APU except for the order. In sum, the only difference between APU and hospital wide responses is that family satisfaction with patients' discharge plan (Q27) was ranked third in APU, but fourth hospital-wide with GMU and second hospital-wide without GMU.

Gero-Psychiatric/Medical Unit

The families of GMU patients considered a few things more important than other units (see Tables 16 and 20). While still ranking language issues (Q23) highest, albeit with a lower mean (3.75), their next two highest rankings were the proper handling of agitated patients by staff (Q19) and the therapeutic nature of WSH campus life (Q18). On the contrary, therapeutic nature of campus life (Q18) was ranked 14th by families hospital-wide (with PALS and GMU), 20th by families hospital-wide without GMU, and 18th by APU families. Similarly, explanation of the ward program to family members (Q4) was ranked last (40th) by GMU families compared to 38th by hospital-wide and APU families. Whereas most of the questions about staff were ranked in the upper half of the distribution, in general questions about medication and mental illness education to families, or learning opportunities for families were ranked among the lowest by GMU families. Questions relating to the ward program, discharge issues, hospital stay, getting needed help were clustered around the middle of the range.

CHANGES IN ITEM RANKINGS OF HOSPITAL-WIDE RESPONSES

Comparing the 1996 and 1998 family surveys, items with the greatest improvements in rankings (by ten notches or more), were questions 23, 27, 32, 26, 19, 18, and 28 (see Table 21 and Figure 2). Among them, three items - language issues, satisfaction with discharge plan, and groups and activities - increased by over 20 notches. One item, getting the help a family member needs (Q31), had no change in ranking, while five items (Questions 38, 39, 21, 37, and 22) declined by one level. The items with the greatest decline (by ten notches or more) were questions 12, 11, 17, 9, 35, and 2. These questions had to do with medications, hospitalization and accommodation, family input into patient treatment, and staff relations. Interestingly, even though the items on staff friendliness (Q38) and dedication (Q39) had high mean scores and rankings, they actually declined by one notch since 1996, meaning that they were among the high rankings in 1996 and continued to be ranked high in the 1998 surveys.

TABLE 19. FAMILY SURVEY, 1998: RESPONSE RANKINGS - APU

Q No.	Question	Mean	S.D.	Rank
23	The language issues for my family member have been addressed.	3.82	1.18	1
38	WSH staff are friendly.	3.39	0.78	2
27	I am satisfied with my family member's discharge plan.	3.35	1.42	3
39	WSH staff are hard working.	3.35	0.94	3
19	Staff handle agitated patients well.	3.34	0.92	5
37	WSH staff are respectful of others.	3.34	0.84	5
34	WSH staff are helpful.	3.32	0.77	7
5	The ward program is fair to my family member.	3.29	0.98	8
24	Hospital staff treat my family member with respect.	3.29	0.77	8
28	WSH staff listen to my family member.	3.28	1.01	10
33	WSH staff are dedicated to their work.	3.26	0.87	11
6	The ward program is helpful to my family member.	3.25	0.95	12
25	My family member's rights as a patient are respected.	3.25	0.77	12
36	WSH staff are responsive.	3.25	0.88	12
32	The groups and activities are helping my family member.	3.23	1.07	15
15	Ward transfers (if any) have been therapeutic for my family member.	3.22	1.19	16
16	The facilities at WSH (e.g., the ward, other buildings) are clean and in good repair.	3.21	0.74	17
2	This hospital stay has helped my family member.	3.20	0.79	18
18	"Campus life" on WSH grounds seems therapeutic.	3.20	1.14	18
26	My questions about my family member's discharge are answered.	3.20	1.24	18
29	My family member's physical problems are being treated.	3.20	0.94	18
12	The medications are helping my family member.	3.17	0.88	22
14	Accommodations for my family member's special needs have been provided.	3.16	0.93	23
35	WSH staff are available.	3.16	0.85	23
31	My family member gets the help he/she needs.	3.13	0.91	25
9	Staff are receptive to my input.	3.11	0.95	26
10	My input has been incorporated into the treatment of my family member.	3.11	2.42	26
17	Accommodation for visiting on the ward are good.	3.10	0.79	28
30	My family member's treatment is helping him/her function better.	3.10	0.89	28
13	The care provided for my family member's medical concerns is adequate.	3.09	0.90	30
11	My questions about my family member's medications have been answered.	3.08	1.08	31
7	There are plenty of groups and other therapeutic activities for my family member.	3.04	1.15	32
40	Overall, how would you rate this stay at WSH for your family member?	3.02	1.11	33
3	My family member is learning things that will help him/her out of the hospital.	2.96	1.20	34
1	WSH staff contacted me about my family member's hospitalization here.	2.93	1.00	35
8	My family member's treatment has been explained to me.	2.74	1.08	36
20	Staff have informed me about educational opportunities to to learn about mental illness.	2.64	1.22	37
4	The ward program (level system) has been explained to me.	2.60	1.07	38
22	I have received education about my family member's medications.	2.60	1.11	39
21	I have received education here on mental illness.	2.54	1.18	40

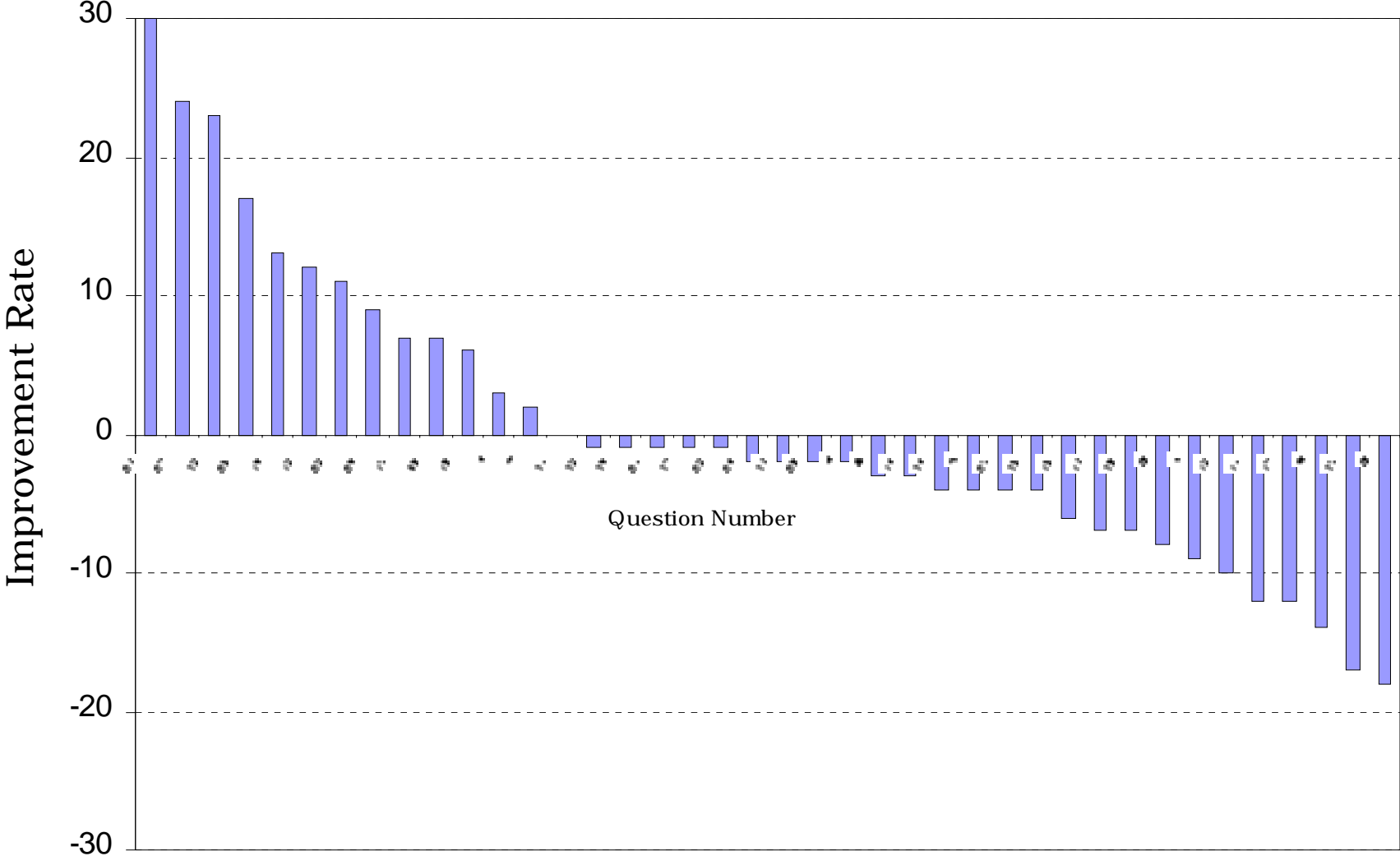
TABLE 20. FAMILY SURVEY, 1998: RESPONSE RANKINGS - GMU

Q No.		Mean	S.D.	Rank
23	The language issues for my family member have been addressed.	3.75	1.10	1
19	Staff handle agitated patients well.	3.52	1.00	2
18	"Campus life" on WSH grounds seems therapeutic.	3.49	0.99	3
38	WSH staff are friendly.	3.48	0.79	4
14	Accommodations for my family member's special needs have been provided.	3.45	0.88	5
39	WSH staff are hard working.	3.41	0.92	6
37	WSH staff are respectful of others.	3.40	0.88	7
16	The facilities at WSH (e.g., the ward, other buildings) are clean and in good repair.	3.39	0.97	8
25	My family member's rights as a patient are respected.	3.39	0.84	8
26	My questions about my family member's discharge are answered.	3.39	1.22	8
2	This hospital stay has helped my family member.	3.34	0.78	11
27	I am satisfied with my family member's discharge plan.	3.34	1.26	11
34	WSH staff are helpful.	3.34	0.83	11
5	The ward program is fair to my family member.	3.32	0.91	14
6	The ward program is helpful to my family member.	3.32	0.93	14
24	Hospital staff treat my family member with respect.	3.32	0.77	14
28	WSH staff listen to my family member.	3.29	0.88	17
33	WSH staff are dedicated to their work.	3.29	0.88	17
29	My family member's physical problems are being treated.	3.27	0.95	19
31	My family member gets the help he/she needs.	3.27	0.82	19
36	WSH staff are responsive.	3.27	0.82	19
11	My questions about my family member's medications have been answered.	3.25	0.97	22
32	The groups and activities are helping my family member.	3.25	1.13	22
35	WSH staff are available.	3.25	0.84	22
9	Staff are receptive to my input.	3.23	0.86	25
17	Accommodation for visiting on the ward are good.	3.23	0.91	25
1	WSH staff contacted me about my family member's hospitalization here.	3.20	0.77	27
7	There are plenty of groups and other therapeutic activities for my family member.	3.20	1.09	27
10	My input has been incorporated into the treatment of my family member.	3.20	1.00	27
40	Overall, how would you rate this stay at WSH for your family member?	3.19	1.03	30
15	Ward transfers (if any) have been therapeutic for my family member.	3.18	0.97	31
12	The medications are helping my family member.	3.16	0.81	32
13	The care provided for my family member's medical concerns is adequate.	3.16	0.75	32
30	My family member's treatment is helping him/her function better.	3.11	0.84	34
8	My family member's treatment has been explained to me.	3.00	0.89	35
3	My family member is learning things that will help him/her out of the hospital.	2.79	1.34	36
22	I have received education about my family member's medications.	2.75	0.94	37
20	Staff have informed me about educational opportunities to learn about mental illness.	2.70	1.11	38
21	I have received education here on mental illness.	2.66	1.10	39
4	The ward program (level system) has been explained to me.	2.61	1.04	40

**TABLE 21. FAMILY SURVEY: CHANGE IN RANKINGS OF
HOSPITAL-WIDE RESPONSES, 1996-1998**

Q No.	Question	RANKINGS		CHANGE
		1996	1998	1996-1998
23	The language issues for my family member have been addressed.	31	1	30
27	I am satisfied with my family member's discharge plan.	28	4	24
32	The groups and activities are helping my family member.	33	10	23
26	My questions about my family member's discharge are answered.	30	13	17
19	Staff handle agitated patients well.	16	3	13
18	"Campus life" on WSH grounds seems therapeutic.	26	14	12
28	WSH staff listen to my family member.	19	8	11
29	My family member's physical problems are being treated.	23	14	9
15	Ward transfers have been therapeutic for my family member.	27	20	7
40	Overall, how would you rate this stay at WSH for your family member?	40	33	7
10	My input has been incorporated into the treatment of my family member.	32	26	6
3	My family member is learning things that will help him/her stay out of the hospital.	38	35	3
7	There are plenty of groups and other therapeutic activities for my family member.	34	32	2
31	My family member gets the help he/she needs.	22	22	0
38	WSH staff are friendly.	1	2	-1
39	WSH staff are hard working	4	5	-1
21	I have received education here on mental illness.	39	40	-1
37	WSH staff are respectful of patients.	5	6	-1
22	I have received education about my family member's medications.	37	38	-1
24	Hospital staff treat my family member with respect.	6	8	-2
33	WSH staff are dedicated to their work.	8	10	-2
20	Staff have informed me about educational opportunities for me to learn about mental illness.	35	37	-2
4	The ward program (level system) has been explained to me.	36	38	-2
6	The ward program is helpful to my family member.	11	14	-3
14	Accommodations for my family member's special needs have been provided.	20	23	-3
34	WSH staff are helpful.	2	6	-4
5	The ward program is fair to my family member.	14	18	-4
25	My family member's rights as a patient are respected.	6	10	-4
36	WSH staff are responsive.	10	14	-4
16	The facilities at WSH (e.g., the ward, other buildings) are clean and in good repair.	12	18	-6
13	The care provided for my family member's medical concerns is adequate.	20	27	-7
30	My family member's treatment is helping him/her function better.	23	30	-7
8	My family member's treatment has been explained to me.	28	36	-8
1	WSH staff contacted me about my family member's hospitalization here.	25	34	-9
12	The medications are helping my family member.	14	24	-10
11	My questions about my family member's medications have been answered.	17	29	-12
17	Accommodations for visiting on the ward are good.	18	30	-12
9	Staff are receptive to my input.	13	27	-14
35	WSH staff are available	8	25	-17
2	This hospitalization has helped my family member.	3	21	-18

FIGURE 2: FAMILY SURVEYS: CHANGE IN RANKING, 1996-98



FAMILY SURVEY RESULTS PART 2: FAMILY VIEWS ABOUT THE BEST AND WORST THINGS ABOUT THE HOSPITAL, AND SUGGESTIONS FOR IMPROVEMENT

Like the patient survey, Part 2 of the family survey asked for opinions on the best and worst things about WSH, and what could be done to make treatment better. Families were asked to list as many suggestions as possible. The first three responses by each respondent were tabulated and analyzed, and the frequency distributions are shown on Table 22.

The Best Things About the Hospital

Twenty-two percent of families indicated no choice, 58% no second choice, and 82% no third choice (see Table 22). The combined category of patient care/medications/groups/education had the highest frequency for the top three choices. Of the 78% reporting a first choice, 23% chose that category as the best thing, 17% chose safety/security/shelter, and another 17% chose staff. Of the 42% indicating a second choice, 13% chose patient care/medications/groups/education, 15% chose staff, and 4% chose safety/security/shelter. Of the 18% who indicated a third choice, 6% chose patient care/medication/groups/education.

There was considerable similarity between consumer and family views on the best things about the hospital (see Tables 11 and 23). Both groups agreed that the combined category of patient care/medications/groups/education was the best thing about WSH. Whereas consumers chose food/meals/snacks second, families chose safety/security/shelter. Both groups felt staff was third.

The Worst Things About the Hospital

Fewer families indicated worst things than best things about WSH. About 33% reported nothing, 64% indicated no second choice, and 86% no third choice (see Table 22). About 13% of families reported that they had little or no contact with staff and doctors, 12% stated that staff ignore or abuse patients, and 8% noted that patients have too much idle time. Just over 7% reported staff to patient interaction as first choice, 7% reported patient care/treatment/medications/education, and 6% indicated “nothing”. Fourteen percent indicated choices that could not be collapsed into large enough categories.

Of the 36.5% who indicated a second choice, 5% indicated that staff ignore or abuse patients, 4% each indicated lack of contact, patient care, and lack of activities/work/education, and 16% reported various individual choices. Of the 14% who indicated a third choice, 10% were individual responses, and 2% chose staff to patient interaction.

There was not much agreement between consumers and families on first choice of the worst thing about WSH. Among consumers (Table 11), staff to patient interaction topped the list of worst things, whereas among families the lack of contact with staff and doctors was the worst thing about WSH. As second place, consumers chose not enough freedom, smoking or outings, while families had strong opinions that staff ignore or abuse patients.

TABLE 22. FAMILY SURVEY, 1998: BEST AND WORST THINGS, AND AREAS OF IMPROVEMENT: HOSPITAL-WIDE, TOP THREE CHOICES

Survey Question	1st	2nd	3rd
41. Best things about WSH			
Pt. Care/meds/groups/education	23.0	13.2	5.8
Safety/security/shelter	17.3	4.1	
Staff	16.5	14.8	2.5
Facilities/buildings/wards			2.1
No response/DK	22.2	58.4	81.5
All others	21.0	9.5	8.1
Total	100.0	100.0	100.0
42. Worst things about WSH			
Family has little or no contact with staff/doctors	12.8	4.1	
Staff ignore or are abusive to patients	12.3	4.9	
Patients have too much idle time	7.8	3.3	
Staff to patient Interaction	7.4		1.6
Pt. Care/tx/meds/education	6.6	4.1	
"Nothing"	6.2		
Not enough activities/work/education		3.7	1.2
Not enough freedom/smoking/outings			1.2
No response/DK	32.5	63.5	86.4
All others	14.4	16.4	9.6
Total	100.0	100.0	100.0
43. What could be done to make treatment better			
More regular and constant communication between staff and family	16.0	4.1	3.3
Give quality time/more responsibility/chores/jobs to patients	13.0	5.4	4.1
More groups and treatment - treat physical problems immediately	11.1	2.1	3.3
Make sure patients have more physical exercise	7.4		2.1
More group homes/halfway houses after release from WSH	5.3		
More training of staff/physicians	4.5	2.1	
More programs/medication education	4.1	3.3	1.2
More time with staff/physicians		2.1	2.1
More freedom/free time/outside time		2.9	
No response/DK	32.8	69.9	74.8
All others	5.8	8.1	9.1
Total	100.0	100.0	100.0

What Could be Done to Make Treatment Better

About 33% of respondents did not answer the question of what could be done to make treatment better, 70% did not provide a second choice, and 75% did not indicate a third choice (see Table 22). Of the 67% who provided any answer, 16% suggested more regular and constant communication between staff and families, and 13% suggested more quality time, responsibilities, chores, and jobs for patients. Eleven percent suggested that patients need more groups, treatment, and immediate attention for their physical problems. Over 7% suggested more physical exercise, 5% each indicated more group homes/halfway houses and more training for staff/physicians, 4% suggested programs and medication education, and 6% reported various individual responses.

Of the 30% who provided a second choice, 8% were individual suggestions that were not collapsible into larger categories. Over 5% suggested more responsibility/ jobs, 4% better communication, and 3% each more programs/medication education and 3% more freedom/outside time.

Of the 25% who provided a third choice, 9% were not collapsible into a larger category. Over 4% suggested more quality time and responsibility/jobs for patients, 3% each more communication and more groups/treatment, and 2% each more physical exercise and more time with staff/physicians.

It is surprising that the response rate to this question was not higher than 67%, because it provided families an opportunity for input on changes they would like to see implemented at WSH. However, the 67% who responded provided strong opinions in favor of improved communication with families, increased responsibility to patients, and more treatment for both mental and physical problems. These views are different from the top three suggestions for changes advanced by consumers (see Table 11).

PROPORTIONS OF VALID FAMILY RESPONSES

The proportion of valid responses per question in the 1998 family survey ranged from 56.4% (Q23: language issues) to 99.2% (Q2: this hospitalization has helped my family member) (see Table 23). Both the minimum and maximum proportions of valid responses in the family survey were lower than in the consumer survey. The low proportion of valid responses for language issues may also have been due to the fact that main stream families may not have thought their relatives had any language problems.

Of noteworthy though is the low percentage of valid responses (67%) to Q27 (satisfaction with family member's discharge plan). Either family members who did not respond were not dissatisfied with their relatives' discharge plan or they didn't think it was a problem worthy of comment. In comparison, 90% of consumers answered this question (see Q30 on Table 11). In addition to language and discharge issues, only the open-ended questions (about the best and worst things about WSH and what could be done to improve treatment) had less than 80% valid responses. Ward transfers (Q15) and benefits of groups and activities (Q32) each had 81% valid responses. Whereas only six questions had less than 90% valid responses in the consumer survey, in the family survey, there were up to 19 questions.

TABLE 23: 1998 FAMILY SURVEY: PROPORTIONS OF QUESTIONS ANSWERED

QUESTIONS		Answered		Not Answered	
		No.	%	No.	%
1	WSH contacted me about family member's hospitalization here.	234	96.3	9	3.7
2	This hospitalization has helped family member.	241	99.2	2	0.8
3	My family member is learning things that will help him/her stay out of the hospital.	205	84.4	38	15.6
4	The ward program (level system) has been explained to me.	234	96.3	9	3.7
5	The ward program is fair to my family member.	214	88.1	29	11.9
6	The ward program is helpful to my family member.	220	90.5	23	9.5
7	There are plenty of groups and other therapeutic groups for my family member.	205	84.4	38	15.6
8	My family member's treatment has been explained to me.	229	94.2	14	5.8
9	Staff are receptive to my input.	227	93.4	16	6.6
10	My input has been incorporated into treatment of family member.	200	82.3	43	17.7
11	My questions about my family member's medication have been answered.	217	89.3	26	10.7
12	The medications are helping my family member.	228	93.8	15	6.2
13	The care provided for my family member is adequate.	227	93.4	16	6.6
14	Accommodations for family member's special needs have been provided.	220	90.5	23	9.5
15	Ward transfers have been therapeutic for family member.	197	81.1	46	18.9
16	Facilities at WSH (wards, other bldg) are clean & in good repair.	228	93.8	15	6.2
17	Accommodations for visiting on the ward are good.	233	95.9	10	4.1
18	"Campus life" on WSH grounds seems therapeutic.	200	82.3	43	17.7
19	Staff handle agitated patients well.	208	85.6	35	14.4
20	Staff have informed me about educational opportunities for me to learn about mental illness	218	89.7	25	10.3
21	I have received education here on mental illness.	219	90.1	24	9.9
22	I have received education about family member's medication.	225	92.6	18	7.4
23	Language issues for family member has been addressed.	137	56.4	106	43.6
24	Hospital staff treat family member with respect.	230	94.7	13	5.3
25	My family member's rights as a patient are respected.	226	93.0	17	7.0
26	My questions about family member's discharge are answered.	182	74.9	61	25.1
27	I am satisfied with family member's discharge plan.	163	67.1	80	32.9
28	WSH staff listen to my family member.	203	83.5	40	16.5
29	My family member's physical problems are being treated.	218	89.7	25	10.3
30	My family member's treatment is helping him/her function better.	228	93.8	15	6.2
31	My family member gets the help he/she need.	219	90.1	24	9.9
32	The Groups & activities are helping my family member.	198	81.5	45	18.5
	Do you think WSH staff have the following qualities?				
33	<i>Dedicated to their work.</i>	225	92.6	18	7.4
34	<i>Helpful</i>	227	93.4	16	6.6
35	<i>Available</i>	229	94.2	14	5.8
36	<i>Responsive</i>	225	92.6	18	7.4
37	<i>Respectful of patients</i>	221	90.9	22	9.1
38	<i>Friendly</i>	225	92.6	18	7.4
39	<i>Hard-working</i>	218	89.7	25	10.3
40	Overall, how would you rate this stay at WSH for your family member?	233	95.9	10	4.1
41	The best things about WSH are: (a, b, c)	188	77.4	55	22.6
42	The worst things about WSH are: (a,b,c)	168	69.1	75	30.9
43	What could be done to make your family member's treatment better?	181	74.5	62	25.5

CHAPTER 4

SUMMARY AND CONCLUSIONS

CONSUMER VIEWS

Summary of Consumer Ratings

There were 238 completed consumer surveys out of a hospital daily count of 1,005. The demographic and institutional characteristics of the consumer sample were similar to the population. The results show that patients have strong opinions about the hospital, treatment conditions, ward conditions and transfers, staff, educational and other programs, medical care and medications. Some of the views expressed were consistent across units while others differed between units. In terms of the highest and lowest rated items in the first part of the survey, a clear pattern emerged in consumer views hospital-wide and in different units (see Table 24).

TABLE 24. CONSUMER SURVEY, 1998: HIGHEST AND LOWEST RATED ITEMS

<i>UNIT</i>	<i>LOWEST RATED ITEMS</i>	<i>HIGHEST RATED ITEMS</i>
Hospital (+ PALS)	Overall hospital rating (Q43) Respect for romantic feelings (Q17)	Language issues (Q26) Feeling welcome on another ward (Q15)
Hospital (- PALS)	Overall hospital rating (Q43) Respect for romantic feelings (Q17)	Language issues (Q26) Feeling welcome on another ward (Q15)
APU	Patient input into treatment (Q8) Overall hospital rating (Q43)	Language issues (Q26) Staff are hard working (Q42)
GMU	Explanation of ward program (Q3) Medication education (Q23)	Language issues (Q26) Helpfulness of ward program (Q5)
LOU	Overall hospital rating (Q43) Respect for romantic feelings (Q17)	Helpfulness of ward transfers (Q14) Feeling welcome on another ward (Q15)
PALS	Satisfied with discharge plan (Q30) Answering discharge questions (Q29)	Educational opportunities (Q25) Language issues (Q26) Learning about mental illness (Q24)

In terms of consumer satisfaction, hospital-wide opinions with or without PALS showed the best approval rating for the way the hospital addressed language issues (Q26) and how patients feel welcome when transferred to another ward (Q15). Improvement in language issues was among the top two rankings hospital-wide and in all individual units except LOU. In APU, GMU, and PALS, the other top rated items were the hard work of staff (Q42), helpfulness of the ward program (Q5), educational opportunities (Q25), and learning about mental illness (Q24). In GMU, even though there was express skepticism about ward program explanation, patients none-the-less felt very strongly that the ward program was helpful. In LOU, helpfulness of ward transfers (Q14) and feeling welcome when transferred to another ward (Q15) were rated highest. Q15 (feeling welcome when transferred to another ward) was rated very high in LOU. However, although it was ranked second place hospital-wide with or without PALS, it was not among the top two rankings in any other unit. In PALS, educational opportunities and learning about mental illness were also viewed favorably.

With respect to dissatisfaction, patients hospital-wide and in LOU indicated the lowest rating for their overall stay at the hospital and the lack of respect for their romantic feelings. APU, GMU, and PALS patients rated different things lowest. In addition to overall hospital stay, APU patients did not believe they had a say in treatment. In GMU, patients were eager for staff to explain the ward program to them, as much as they wanted to be educated about their medications. In PALS on the other hand, dissatisfaction was mainly about discharge. PALS patients had a low satisfaction level with their discharge plan and the way staff answered questions related to discharge.

Summary of Best and Worst Things, and Suggestions for Treatment Improvement

Best Things: The top three things reported by consumers as the best things about the hospital and their treatment were: (1) patient care, medications, groups, and education; (2) food, meals, and snacks; and (3) staff.

Worst Things: The top four things consumers reported as the worst things about the hospital were: (1) interaction between staff/doctors and patients; (2) not enough freedom, smoking time, or outings; (3) patient care, treatment, medications, and groups; and (4) seclusion, restraint, and punishment. The last two had about equal frequencies.

Suggestions for Treatment Improvement: The top three recommendations by patients about what could be done to make treatment better were that: (1) they want more freedom both within the hospital as well as outside the hospital; (2) they want less, better, or alternative medications; and (3) they want more time with staff and physicians.

Comparing patients' views in 1998 with those of 1996, the areas of greatest improvement have been ward transfers and relations, educational opportunities, and staff relations. On the other hand, the areas of greatest decline have been the rating for the overall hospital stay, answering patients' questions about medications, and care for patients' medical concerns.

FAMILY VIEWS

Summary of Family Ratings

The 1998 family survey, the third so far, had a 42% response rate, comparable to the 44% rate observed in the 1996 survey. Compared to the first survey conducted in 1995, both 1996 and 1998 surveys had lower response rates. In terms of absolute numbers of completed surveys, the 1998 family survey had two times as many completed questionnaires as 1995 and three times as many as 1996. This is a considerable difference because the patient population of WSH declined only slightly during the three-year period.

In terms of approval ratings of the items in the family questionnaire, the single highest rated item hospital wide and in the two units reported separately was the way the hospital addressed the language problems of consumers (Q23) (see Table 25). Language issues (Q23) and family perception of staff friendliness (Q38) were the top two items hospital wide and in APU. When GMU was excluded from the hospital-wide views, family satisfaction with discharge plan (Q27) was second to language issues (Q23). In GMU, language issues (Q23) and the professional way staff handle agitated patients (Q19) were the top two rated items. When GMU was included in the hospital-wide data, professional handling of agitated patients (Q19) was third, while in the hospital-wide data without GMU, family satisfaction with discharge plan (Q27) was third. In APU, family satisfaction with discharge plan (Q27) and the hard working nature of staff (Q39) tied for third place, while in GMU, the therapeutic nature of campus life at WSH was third.

TABLE 25. FAMILY SURVEY, 1998: HIGHEST AND LOWEST RATED ITEMS

<i>UNIT</i>	<i>LOWEST RATED ITEMS</i>	<i>HIGHEST RATED ITEMS</i>
Hospital (+ PALS + GMU)	Mental illness education (Q21) Medication education (Q22) Explanation of ward program (Q4)	Language issues (Q23) Staff friendliness (Q38) Staff handling of agitated patients (Q19)
Hospital (- GMU)	Mental illness education (Q21) Medication education (Q22) Explanation of ward program (Q4)	Language issues (Q23) Satisfaction with discharge plan (Q27) Staff friendliness (Q38)
APU	Mental illness education (Q21) Medication education (Q22) Explanation of ward program (Q4)	Language issues (Q23) Staff friendliness (Q38) Satisfaction with discharge plan (Q27) Hard working nature of staff (Q39)
GMU	Explanation of ward program (Q4) Mental illness education (Q21) Info on family education about MI (Q20)	Language issues (Q23) Staff handling of agitated patients (Q19) Therapeutic nature of life at WSH (Q18)

The least rated item hospital wide and in APU was family education on mental illness (Q21). In GMU, explanation of the ward program to family members (Q4) ranked lowest. The three items rated least by family members hospital wide (with and without GMU) and in APU were respectively mental illness education for families (Q21), medication education for families (Q22), and explanation of the ward program to families (Q4). In GMU, the three least rated items were explanation of the ward program to families (Q4), mental illness education for family members (Q22), and information about educational opportunities for families to learn about mental illness (Q20). These results show that families do not feel they are receiving enough education or information about mental illness, medication, or the ward program.

Thus, the concerns of families hospital wide and in APU about mental illness and medication education were shared by GMU families as well. However, whereas explanation of the ward program was of concern in other units, in GMU, information on educational opportunities about mental illness was a growing concern. Similarly, while language issues, staff friendliness, satisfaction with discharge plan, and the proper handling of agitated patients were the best rated by families of other units, GMU families also rated the therapeutic nature of campus life high.

Summary of Best and Worst Things, and Suggestions for Treatment Improvement

Best Things: The top three things families reported as the best things about the hospital were: (1) patient care, medications, groups, and education; (2) safety, security, and shelter; and (3) staff.

Worst Things: The three things families reported as the worst things about WSH were that: (1) families have little or no contact with the staff and doctors; (2) staff ignore or abuse patients; and (3) patients have too much idle, non-productive time.

Suggestions for Treatment Improvement: The top three suggestions by families as things that could be done to make treatment better at WSH were that the hospital should provide: (1) more regular and constant communication between families and staff/doctors; (2) quality time, more responsibility, chores, and jobs to patients; and (3) more groups, mental illness treatment, and prompt and immediate treatment for patients' physical problems.

CONCLUSION

Both consumers and families have strong views about treatment at WSH, the staff, and the hospital conditions. Some of the views, such as the approval of the way the hospital accommodated the language needs of patients, the benefits of ward transfers, the helpfulness of ward programs, and the hard working nature of staff, are quite positive. However, other views on communication between doctors and staff on the one hand and patients or family members on the other, medication and mental illness education, discharge planning, and responsibility, chores, and jobs for patients, are quite skeptical. Both consumers and families want staff to explain the ward program to them, and to provide them with information for them to learn about mental illness.

Both consumers and families think that the best things about WSH are the treatment program, food/meals, safety/security, and staff. They also think that the worst things are staff to patient interaction, lack of contact particularly with families, and the lack of freedom or free time within or outside the hospital.

Consumers and families disagree about what could be done to make treatment better. Consumers think that the important things to be done to improve treatment are: (1) providing them with more freedom; (2) providing less/better alternative medications; and (3) having more time with staff and physicians. On the other hand the three things families think are needed to make treatment better for patients are: (1) more, regular and constant communication between them and staff/doctors; (2) providing quality time and more responsibility, jobs, and chores to patients; and (3) providing more groups and treatment for patients' psychiatric illnesses, and immediate treatment for their physical problems.

There was a high degree of consistency and convergence in the views expressed by consumers and families in this year's surveys in terms of the highest and lowest ratings and the best and worst things about the hospital. In terms of what could be done to make treatment better, the two groups held somewhat different opinions. It will be interesting to observe the extent to which opinions of the two groups in the 1998 surveys will be similar to those expressed in the 1999 surveys.

In general, the levels of satisfaction expressed in both the consumer and family surveys were quite high, similar to observations elsewhere (Elbeck & Fecteau, 1990). As in other studies also (Kelstrup et al., 1993), the level of consumer satisfaction in this survey varied by clinical unit. Since consumer responses in this survey were not linked to diagnosis, the actual nature of the relationship between the two could not be determined. In the next study to be conducted during Fall 1999, effort will be made to link consumer responses with diagnosis to study its relationship with the level of consumer satisfaction.

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APPENDICES

APPENDIX 1: CONSUMER SURVEY

1. The hospital stay has helped me.
2. I am learning the things that will help me stay out of the hospital.
3. The ward program has been explained to me.
4. The ward program is fair.
5. The ward program is helpful.
6. There are plenty of groups and other activities.
7. My questions about treatments have been explained to me.
8. I have enough say about my treatment.
9. The staff have included my ideas in my treatment.
10. My questions about medications have been explained to me.
11. My medications are helping me.
12. The care I receive for my medical concerns is adequate.
13. Accommodations for my special needs have been provided.
14. Ward transfers have been helpful to me.
15. When I move to another ward, I feel welcome there.
16. Friendships between patients are encouraged by staff.
17. Romantic feelings between patients are respected by staff.
18. The wards I have been on are clean and in good repair.
19. I have enough privacy on the ward.
20. I feel safe on the ward.
21. Staff encourage me to express my feelings even when I am upset.
22. Staff handle agitated patients well.
23. I have received education about medications while here.
24. I have learned about mental illness while here.
25. Educational opportunities are available here at the hospital.
26. My language issues have been addressed.
27. Hospital staff treat me with respect.
28. My rights as a patient are respected.
29. My questions about discharge are answered.
30. I am satisfied with my discharge plan.
31. The staff listen to me.
32. My physical problems are being treated.
33. My treatment is helping me function better.
34. I get the help I need.
35. The groups and activities are helping me.
36. WSH staff are dedicated to their work.
37. WSH staff are helpful.
38. WSH staff are available.
39. WSH staff are responsive.
40. WSH staff are respectful of patients.
41. WSH staff are friendly.
42. WSH staff are hard working.
43. Overall, how would you rate this stay at WSH (very good, good, average, poor, very poor).
44. The best things about WSH are:
45. The worst things about WSH are:
46. What could be done to make your treatment better?

Demographic Questions

<u>MINORITY</u> 1. Yes 2. No If yes: 1. Hispanic 2. African American 3. Native American 4. Asian 5. Middle East 6. Don't Know	<u>GENDER</u> 1. Female 2. Male
	<u>COMPREHENSION</u> 1. None 2. Low 3. Medium 4. High
	<u>LANGUAGE</u> 1. Primary English 2. Bilingual 3. Non-English

Codes for Open-Ended Questions (Q44-Q46)

Q44. The best things about WSH are: <u>Code</u> 1 Safety/security/shelter 2 Food/meals/snacks 3 Activities/work/outings 4 Facilities/buildings/wards 5 Staff 6 Freedom/levels/PALS 7 Pt. care/meds./groups/education 8 Negative response/nothing 9 Other 10 No response/don't know.	Q46. What could be done to make your treatment better?: <u>Code</u> 1 Less/better/alternative medications 2 More programs/medication education 3 More money 4 More training of staff/physicians 5 More groups and treatment 6 More time with staff/physicians 7 More freedom/free time/outside time 8 Other 9 No response/don't know
Q45. The worst things about WSH are: <u>Code</u> 1 Safety/security/staffing 2 Food/meals – quantity and quality 3 Not enough activities/work/educ. 4 Facilities/bldgs./grounds conditions 5 Staff to patient interaction 6 Not enough freedom/smkng/outings 7 Pt. care/tx/medications/groups 8 Nothing 9 Seclusion/restraint/punishment 10 Patient to patient conflict/fights 11 Length of stay 12 Wards/rules/levels/conditions 13 Other 14 No response/don't know	

APPENDIX 2: FAMILY SURVEY

1. WSH staff contacted me about my family member's hospitalization here.
2. This hospitalization has helped my family member.
3. My family member is learning the things that will help him/her stay out of the hospital.
4. The ward program (level system) has been explained to me.
5. The ward program is fair to my family member.
6. The ward program is helpful to my family member.
7. There are plenty of groups and other therapeutic activities for my family member.
8. My family member's treatment has been explained to me.
9. Staff are receptive to my input.
10. My input has been incorporated into the treatment of my family member.
11. My questions about my family member's medications have been answered.
12. The medications are helping my family member.
13. The care provided for my family member's medical concerns is adequate.
14. Accommodations for my family member's special needs have been provided.
15. Ward transfers (if any) have been therapeutic for my family member.
16. The facilities at WSH (e.g. the ward, other buildings) are clean and in good repair.
17. Accommodations for visiting on the ward are good.
18. "Campus life" on WSH grounds seems therapeutic.
19. Staff handle agitated patients well.
20. Staff have informed me about educational opportunities for me to learn about mental illness.
21. I have received education here on mental illness.
22. I have received education about my family member's medications.
23. The language issues for my family member have been addressed.
24. Hospital staff treat my family member with respect.
25. My family member's rights as a patient are respected.
26. My questions about my family member's discharge are answered.
27. I am satisfied with my family member's discharge plan.
28. WSH staff listen to my family member.
29. My family member's physical problems are being treated.
30. My family member's treatment is helping him/her function better.
31. My family member gets the help he/she needs.
32. The groups and activities are helping my family member.
33. WSH staff are dedicated to their work.
34. WSH staff are helpful.
35. WSH staff are available.
36. WSH staff are responsive.
37. WSH staff are respectful of patients.
38. WSH staff are friendly.
39. WSH staff are hard working.
40. Overall, how would you rate this stay at WSH (very good, good, average, poor, very poor).
41. The best things about WSH are:
42. The worst things about WSH are:
43. What could be done to make your family member's treatment better?

Codes for Open-Ended Questions (Q41-Q43)

<p>Q41. The best things about WSH are:</p> <p><u>Code</u></p> <p>1 Safety/security/shelter 2 Food/meals/snacks 3 Activities/work/outings 4 Facilities/buildings/wards 5 Staff 6 Freedom/levels/PALS 7 Pt. care/meds./groups/education 8 Negative response/nothing 9 Other 10 No response/don't know.</p>	<p>Q42 (cont'd)</p> <p>9 Seclusion/restraint/punishment 10 Patient to patient conflict/fights 11 Length of stay 12 Wards/rules/levels/conditions 13 Other 14 No response/don't know</p>
<p>Q42. The worst things about WSH are:</p> <p><u>Code</u></p> <p>1 Safety/security/staffing 2 Food/meals – quantity and quality 3 Not enough activities/work/educ. 4 Facilities/bldgs./grounds conditions 5 Staff to patient interaction 6 Not enough freedom/smkng./outings 7 Pt. care/tx/medications/groups 8 Nothing</p>	<p>Q43. What could be done to make your treatment better?:</p> <p><u>Code</u></p> <p>1 Less/better/alternative medications 2 More programs/medication education 3 More money 4 More training of staff/physicians 5 More groups and treatment 6 More time with staff/physicians 7 More freedom/free time/outside time 8 Other 9 No response/don't know</p>

APPENDIX 3: HOSPITAL DEMOGRAPHICS BY UNIT
 (Based on Average Daily Count*)

ADC	<u>APU</u> n=395	<u>GMU</u> n=273	<u>LOU</u> n=232	<u>PALS</u> n=105	<u>HOSP</u> N=1,005
<u>Gender</u>					
Female	34.0	41.0	18.2	26.8	31.5
Male	66.0	59.0	81.8	73.2	68.5
<u>Race/Ethnicity</u>					
Am. Indian/Alaska Native	1.5	2.6	1.7	0.9	1.8
Asian/Pacific Islander	3.4	2.0	4.7	1.8	3.4
African-American	12.6	6.2	17.6	5.4	12.5
Hispanic	2.3	1.3	2.5	0.9	2.1
White	79.0	85.7	71.9	46.4	78.6
Other/not specified	1.1	2.3	1.7	44.6	1.6
* October-December, 1998					

APPENDIX 4: CONSUMER SURVEY RANKINGS: 1995, 1996, AND 1998

Appendix 4a: Adult Psychiatric Unit

Q No.	Question	1998			1998	1996	1995
		Mean	S.D.	N	Rank	Rank	Rank
26	My language issues have been addressed.	3.40	1.21	88	1	4	13
42	WSH staff are hard working	3.04	1.03	88	2	21	5
41	WSH staff are friendly.	3.03	0.94	88	3	6	3
37	WSH staff are helpful.	3.02	1.01	88	4	8	4
36	WSH staff are dedicated to their work.	3.01	1.07	88	5	14	2
15	When I move to another ward, I feel welcome there.	3.00	1.15	88	6	27	16
38	WSH staff are available	2.99	0.97	88	7	24	9
18	The wards I have been on are clean and in good repair.	2.98	0.91	88	8	2	1
27	Hospital staff treat me with respect.	2.98	0.99	88	8	3	-
39	WSH staff are responsive.	2.97	0.99	88	10	9	10
40	WSH staff are respectful of patients	2.95	1.06	88	11	32	10
35	The group and activities are helping me.	2.94	1.01	88	12	9	-
32	My physical problems are being treated.	2.92	1.12	88	13	11	-
31	The staff listen to me.	2.86	1.03	88	14	24	-
25	Educational opportunities are available here at the hospital.	2.83	1.00	88	15	42	12
20	I feel safe on the ward.	2.82	0.94	88	16	34	20
34	I get the help I need.	2.80	0.96	88	17	27	-
14	Ward transfers have been helpful to me.	2.78	1.25	88	18	27	23
12	The care I receive for my medical concerns is adequate.	2.76	0.99	88	19	7	17
1	This hospital stay has helped me.	2.74	0.99	88	20	14	20
13	Accommodations for my special needs have been provided.	2.74	1.00	88	20	36	13
5	The ward program is helpful.	2.73	1.02	88	22	16	19
28	My rights as a patient are respected.	2.70	1.05	88	23	16	-
3	The ward program has been explained to me.	2.69	0.75	88	24	13	26
30	I am satisfied with my discharge plan.	2.68	1.19	88	25	41	-
4	The ward program is fair.	2.66	1.08	88	26	24	28
24	I have learned about mental illness while here.	2.65	0.98	88	27	16	18
22	Staff handles agitated patients well.	2.64	1.04	88	28	11	23
2	I am learning things that will help me stay out of the hospital.	2.62	0.89	88	29	27	-
21	Staff encourages me to express my feelings, even when I'm upset.	2.62	1.14	88	29	32	31
11	My medications are helping me.	2.60	1.03	88	31	27	22
33	My treatment is helping me function better.	2.60	1.06	88	31	34	-
19	I have enough privacy on the ward.	2.59	0.92	88	33	21	26
23	I have received education about medications while here.	2.58	1.04	88	34	21	6
6	There are plenty of groups and activities.	2.58	0.93	88	34	16	8
29	My questions about discharge are answered.	2.58	1.14	88	34	39	-
10	My questions about medications have been explained to me.	2.57	0.94	88	37	4	-
16	Friendships between patients are encouraged by staff.	2.56	0.91	88	38	37	29
17	Romantic feelings between patients are respected by staff.	2.50	1.10	88	39	43	33
9	The staff has included my ideas in my treatment plan.	2.48	0.80	88	40	40	32
7	My questions about treatment has been explained to me.	2.47	0.91	88	41	16	23
43	Overall, how would you rate this stay at WSH?	2.33	1.60	88	42	1	7
8	I have enough to say about my treatment.	2.31	0.95	88	43	38	-

Appendix 4b: Gero-Psychiatric/Medical Unit

Q No.	Question	1998			1998	1996	1995
		Mean	S.D.	N	Rank	Rank	Rank
26	My language issues have been addressed.	3.47	0.90	30	1	37	33
5	The ward program is helpful.	3.20	0.96	30	2	5	13
15	When I move to another ward, I feel welcome there.	3.17	1.26	30	3	18	9
35	The group and activities are helping me.	3.13	0.73	30	4	18	-
14	Ward transfers have been helpful to me.	3.13	1.33	30	4	40	10
42	WSH staff are hard working.	3.10	0.61	30	6	15	3
4	The ward program is fair.	3.10	0.96	30	6	5	24
30	I am satisfied with my discharge plan.	3.07	1.26	30	8	41	-
37	WSH staff are helpful.	3.03	0.67	30	9	21	4
11	My medications are helping me.	3.03	0.67	30	9	8	8
36	WSH staff are dedicated to their work.	3.00	0.74	30	11	3	11
22	Staff handle agitated patients well.	3.00	0.95	30	11	43	29
2	I am learning things that will help me stay out of the hospital.	3.00	0.64	30	11	8	-
16	Friendships between patients are encouraged by staff.	2.97	0.81	30	14	15	17
18	The wards I have been on are clean and in good repair.	2.93	0.45	30	15	2	1
39	WSH staff are responsive.	2.93	0.69	30	15	8	7
20	I feel safe on the ward.	2.90	0.61	30	17	28	22
13	Accommodations for my special needs have been provided.	2.90	0.61	30	17	24	5
25	Educational opportunities are available here at the hospital.	2.87	0.82	30	19	41	21
1	This hospital stay has helped me.	2.87	0.51	30	19	3	15
6	There are plenty of groups and activities.	2.87	0.73	30	19	33	2
27	Hospital staff treat me with respect.	2.83	0.65	30	22	13	-
12	The care I receive for medical concerns is adequate.	2.83	0.75	30	22	24	18
21	Staff encourage me to express my feelings, even when I'm upset.	2.83	0.59	30	22	34	28
17	Romantic feelings between patients are respected by staff.	2.83	1.02	30	22	39	32
38	WSH staff are available.	2.80	0.61	30	26	5	14
32	My physical problems are being treated.	2.80	0.76	30	26	28	-
31	The staff listen to me.	2.80	0.71	30	26	24	-
33	My treatment is helping me function better.	2.80	0.93	30	26	21	-
19	I have enough privacy on the ward.	2.80	0.55	30	26	8	27
8	I have enough to say about my treatment.	2.80	0.85	30	26	31	-
40	WSH staff are respectful of patients.	2.77	0.73	30	32	24	24
28	My rights as a patient are respected.	2.77	0.68	30	32	20	-
10	My questions about medications have been explained to me.	2.77	0.82	30	32	21	-
7	My questions about treatments have been explained to me.	2.77	0.68	30	32	13	23
43	Overall, how would you rate this stay at WSH?	2.77	1.14	30	32	1	15
9	The staff has included my ideas in my treatment plan.	2.73	0.79	30	37	37	24
41	WSH staff are friendly.	2.70	0.60	30	38	8	6
34	I get the help I need.	2.70	0.70	30	38	17	-
24	I have learned about mental illness while here.	2.70	0.65	30	38	35	12
29	My questions about discharge are answered.	2.70	0.88	30	38	35	-
23	I have received education about medications while here.	2.60	0.77	30	42	28	20
3	The ward program has been explained to me.	2.50	0.57	30	43	31	30

Appendix 4c: Legal Offender Unit

Q No.	Question	1998			1998	1996	1995
		Mean	S.D.	N	Rank	Rank	Rank
14	Ward transfers have been helpful to me.	3.42	1.21	79	1	34	20
15	When I move to another ward, I feel welcome there.	3.40	1.21	79	2	9	11
26	My language issues have been addressed.	3.35	1.09	79	3	12	10
23	I have received education about medications while here.	3.15	0.74	79	4	2	1
11	My medications are helping me.	3.12	0.96	79	5	6	2
24	I have learned about mental illness while here.	3.11	0.70	79	6	3	3
31	The staff listen to me.	3.05	0.78	79	7	22	-
3	The ward program has been explained to me.	3.05	0.73	79	7	5	7
33	My treatment is helping me function better.	3.05	0.83	79	7	12	-
25	Educational opportunities are available here at the hospital.	3.02	0.91	79	10	33	14
2	I am learning things that will help me stay out of the hospital.	3.02	0.88	79	10	4	-
32	My physical problems are being treated.	3.01	0.84	79	12	24	-
36	WSh staff are dedicated to their work.	2.97	0.88	79	13	24	16
1	This hospital stay has helped me.	2.97	0.89	79	13	8	21
37	WSh staff are helpful.	2.96	0.75	79	15	19	8
18	The wards I have been on are clean and in good repair.	2.96	0.78	79	15	16	9
34	I get the help I need.	2.95	0.82	79	17	28	-
10	My questions about medications have been explained to me.	2.95	0.92	79	17	7	-
38	WSh staff are available.	2.94	0.79	79	19	24	13
41	WSh staff are friendly.	2.93	0.79	79	20	30	5
35	The groups and activities are helping me.	2.92	0.83	79	21	28	-
13	Accomodations for my special needs have been provided.	2.91	0.85	79	22	19	19
39	WSh staff are responsive.	2.89	0.81	79	23	19	15
7	My questions about treatment have been explained to me.	2.87	0.72	79	24	12	17
12	The care I receive for my medical concerns is adequate.	2.86	0.84	79	25	9	12
16	Friendships between patients are encouraged by staff.	2.86	0.84	79	25	11	25
27	Hospital staff treat me with respect.	2.83	0.82	79	27	32	-
20	I feel safe on the ward.	2.83	0.91	79	27	12	6
5	The ward program is helpful.	2.83	0.81	79	27	16	27
28	My rights as a patient are respected.	2.82	0.89	79	30	35	-
42	WSh staff are hard working.	2.81	0.80	79	31	37	17
21	Staff encourage me to express my feelings, even when I'm upset.	2.81	0.83	79	31	16	20
6	There are plenty of groups and activities.	2.78	0.80	79	33	22	29
40	WSh staff are respectful of patients.	2.73	0.86	79	34	30	24
22	Staff handle agitated patients well.	2.73	0.96	79	34	27	26
8	I have enough say about my treatment.	2.72	0.88	79	36	39	-
29	My questions about discharge are answered.	2.70	0.95	79	37	42	-
4	The ward program is fair.	2.68	0.90	79	38	41	32
19	I have enough privacy on the ward.	2.66	0.88	79	39	35	20
9	The staff have included my ideas in my treatment.	2.65	0.75	79	40	38	31
30	I am satisfied with my discharge plan.	2.53	0.99	79	41	40	-
17	Romantic feelings between patients are respected by staff.	2.46	1.01	79	42	43	33
43	Overall, how would you rate this stay at WSH?	2.46	1.25	79	42	1	29

Appendix 4d: Program for Adaptive Living Skills

Q No.	Question	1998			1998	1996	1995
		Mean	S.D.	N	Rank	Rank	Rank
25	Educational opportunities are available here at the hospital.	3.19	1.01	41	1	26	27
26	My language issues have been addressed.	3.17	1.07	41	2	30	17
24	I have learned about mental illness while here.	3.17	0.89	41	2	7	30
42	WSH staff are hard working.	3.16	1.03	41	4	34	5
38	WSH staff are available.	3.13	0.99	41	5	30	7
32	My physical problems are being treated.	3.10	1.04	41	6	23	-
36	WSH staff are dedicated to their work.	3.08	1.12	41	7	21	4
20	I feel safe on the ward.	3.07	0.99	41	8	26	14
34	I get the help I need.	3.07	1.03	41	8	17	-
18	The wards I have been on are clean and in good repair.	3.05	0.89	41	10	41	3
35	The groups and activities are helping me.	3.02	0.99	41	11	23	-
33	My treatment is helping me function better.	3.02	1.04	41	11	14	-
9	The staff have included my ideas in my treatment plan.	3.02	1.04	41	11	2	33
41	WSH staff are friendly.	3.01	1.15	41	14	5	2
31	The staff listen to me.	3.00	1.05	41	15	7	-
14	Ward transfers have been helpful to me.	3.00	0.95	41	15	13	12
3	The ward program has been explained to me.	3.00	0.87	41	15	30	16
21	Staff encourage me to express my feelings, even when I'm upset.	3.00	0.95	41	15	21	32
19	I have enough privacy on the ward.	3.00	0.92	41	15	10	15
23	I have received education about medications while here.	3.00	0.98	41	15	10	8
1	This hospital stay has helped me.	2.98	0.94	41	21	29	21
39	WSH staff are responsive.	2.96	1.06	41	22	15	5
40	WSh staff are respectful of patients.	2.96	1.08	41	22	17	9
13	Accomodations for my special needs have been provided.	2.95	1.02	41	24	35	18
6	There are plenty of groups and activities.	2.95	0.87	41	24	6	23
37	WSh staff are helpful.	2.94	1.10	41	26	39	1
15	When I move to another ward, I feel welcome there.	2.93	0.85	41	27	3	25
27	Hospital staff treat me with respect.	2.93	1.03	41	27	15	-
5	The ward program is helpful.	2.90	0.83	41	29	4	26
11	My medications are helping me.	2.90	1.07	41	29	35	13
10	My questions about medications have been explained to me.	2.90	0.92	41	29	7	-
28	My rights as a patient are respected.	2.85	1.15	41	32	37	-
16	Friendships between patients are encouraged by staff.	2.85	1.06	41	32	19	29
43	Overall, how would you rate this stay at WSH?	2.85	1.39	41	32	10	22
22	Staff handle agitated patients well.	2.83	1.00	41	35	19	11
12	The care I receive for my medical concerns is adequate.	2.80	1.10	41	36	43	10
2	I am learning things that will help me stay out of the hospital.	2.80	0.93	41	36	42	-
4	The ward program is fair.	2.78	0.99	41	38	23	20
17	Romantic feelings between patients are respected by staff.	2.78	1.01	41	38	26	28
7	My questions about treatment have been explained to me.	2.78	1.01	41	38	37	24
8	I have enough say about my treatment.	2.78	1.06	41	38	39	-
29	My questions about discharge are answered.	2.77	1.07	41	42	33	-
30	I am satisfied with my discharge plan.	2.61	1.28	41	43	1	-

**APPENDIX 5: CONSUMER SURVEY, 1998: FIRST THREE SUGGESTIONS
IN RESPONSE TO OPEN-ENDED QUESTIONS (Q44-Q46)**

Appendix 5a: Hospital-wide Including PALS

Q No.	Response	Level of Suggestion		
		1st	2nd	3rd
44	<i>The best things about WSH.</i>			
	Patient care/meds/groups/education	21.8	10.1	6.3
	Food/meals/snacks	10.9	5.9	
	Staff	10.5		3.8
	Activities/work/outings		5.9	
	No response/don't know	8.0	59.2	79.4
	All others	48.4	9.0	7.5
	Total	100.0	100.0	100.0
45	<i>The worst things about WSH.</i>			
	Staff to patient interaction	10.5	3.8	1.7
	Not enough freedom/smoking/outings	9.2	4.6	
	Patient care/treatment/meds/groups	8.8		
	Seclusion/restraint/punishment	8.8		1.7
	Wards/rules/levels/conditions		5.0	2.5
	Not enough work/activities/education			1.7
	No response/don't know	13.4	63.4	
	All others	49.3	23.2	92.4
	Total	100.0	100.0	100.0
46	<i>What could be done to make treatment better.</i>			
	More freedom/free time/outside time	17.6	2.9	1.3
	Less/better/alternative medications	9.7	1.3	
	More time with staff/physicians	5.9	1.3	
	More programs/medications/education		2.1	1.3
	More groups and treatment		1.3	
	No response/don't know	24.4	24.4	90.3
	All others	42.2	66.7	7.1
	Total	100.0	100.0	100.0

Note: Open-ended responses were not limited to one suggestion. Tables in Appendix 5 show frequencies for the top three suggestions.

Appendix 5b: Hospital-wide Excluding PALS

Q No.	Response	Level of Suggestion		
		1st	2nd	3rd
44	<i>The best things about WSH.</i>			
	Patient care/meds/groups/education	21.8	9.6	5.1
	Staff	11.7		3.6
	Negative response/nothing	10.2		
	Food/snacks/meals		5.6	
	Activities/work/outings		5.1	2.0
	Freedom/levels/PALS		5.1	
	No response/don't know	8.1	59.9	80.7
	All other responses	48.2	14.7	9.2
	Total	100.0	100.0	100.0
45	<i>The worst things about WSH.</i>			
	Staff to patient interaction	11.7		1.0
	Not enough freedom/smoking/outings	10.2	4.1	
	Seclusion/restraint/punishment	8.6		2.0
	Wards/rules/levels/conditions		6.1	1.5
	Patient to patient conflict/fights		4.1	
	Not enough activities/work/education			2.0
	Facilities/buildings/ground conditions			1.5
	Patient care/treatment/medication/groups			1.5
	No response/don't know	13.7	64.0	86.3
	All other responses	55.8	21.7	4.2
	Total	100.0	100.0	100.0
46	<i>What could be done to make treatment better.</i>			
	More freedom/free time/outside time	17.2	2.0	1.5
	Less/better/alternative medications	11.2		
	More programs/medications/education	5.6	2.5	
	More groups and treatment	5.6		1.0
	No response/don't know	24.4	75.1	90.4
	All other responses	35.9	20.4	7.1
	Total	100.0	100.0	100.0

Note: Open-ended responses were not limited to one suggestion. Tables in Appendix 5 show frequencies for the top three suggestions.

Appendix 5c: Adult Psychiatric Program

Q No.	Response	Level of Suggestion		
		1st	2nd	3rd
44	<i>The best things about WSH.</i>			
	Patient care/ meds/groups/education	14.8	8.0	3.4
	Staff	13.6	5.7	2.3
	Activities/work/outings	10.2		2.3
	Facilities/buildings/wards	10.2		
	Freedom/levels/PALS		6.8	2.3
	No response/don't know	12.5	63.0	81.6
	All other responses	38.7	15.8	7.9
	Total	100.0	100.0	100.0
45	<i>The worst things about WSH.</i>			
	Not enough freedom/smoking/outings	12.5	5.7	
	Staff to patient interaction	10.2	3.4	
	Seclusion/restraint/punishment	10.2		2.3
	Length of stay		3.4	
	Wards/rules/levels/conditions		3.4	
	Not enough activities/work/education			2.3
	Patient care/treatment/medication/groups		4.5	2.3
	No response/don't know	15.9	67.0	88.6
	All other responses	51.2	12.5	4.5
	Total	100.0	100.0	100.0
46	<i>What could be done to make treatment better.</i>			
	Less/better/alternative medications	15.9		
	More freedom/free time/outside time	12.5	2.3	2.3
	More programs/Medications education	5.7	4.5	1.1
	More time with staff/physicians	5.7	2.3	
	More groups and treatment			
	No response/don't know	21.6	73.9	86.4
	All other responses	38.6	17.0	9.1
	Total	100.0	100.0	100.0

Note: Open-ended responses were not limited to one suggestion. Tables in Appendix 5 show frequencies for the top three suggestions.

Appendix 5d: Gero-Psychiatric/Medical Unit

Q No.	Response	Level of Suggestion		
		1st	2nd	3rd
44	<i>The best things about WSH.</i>			
	Patient care/meds/groups/education	33.3	10.0	3.3
	Facilities/buildings/wards	13.3	3.3	3.3
	Staff	13.3		6.7
	Activities/work/outings		6.7	
	Freedom/levels/PALS		3.3	
	No response/don't know	6.7	60.0	83.3
	All other responses	33.4	16.7	3.4
	Total	100.0	100.0	100.0
45	<i>The worst things about WSH.</i>			
	Nothing	16.7		
	Food/meals/quantity and quality	13.3	10.0	
	Seclusion/restraint/punishment	10.0		
	Patient to patient conflict/fights		6.7	
	Wards/rules/levels/conditions		6.7	3.3
	No response/don't know	20.0	73.3	90.0
	All other responses	40.0	3.3	6.7
	Total	100.0	100.0	100.0
46	<i>What could be done to make treatment better.</i>			
	More freedom/free time/outside time	16.7		
	Less/better/alternative medications	3.3	3.3	
	More programs/Medication education	3.3		
	More training of staff/physicians	3.3		
	More groups and treatment	3.3		
	More time with staff/physicians	3.3		
	No response/don't know	46.7	86.7	100.0
	All other responses	20.1	10.0	100.0
	Total	100.0	100.0	100.0

Note: Open-ended responses were not limited to one suggestion. Tables in Appendix 5 show frequencies for the top three suggestions.

Appendix 5e: Legal Offender Unit

Q No.	Response	Level of Suggestion		
		1st	2nd	3rd
44	<i>The best things about WSH.</i>			
	Patient care/meds/groups/education	25.3	11.4	7.6
	Negative response/nothing	15.2		
	Food/meals/snacks	12.7	8.9	
	Activities/work/outings		8.9	
	Staff			3.8
	No response/don't know	3.8	55.7	78.5
	All other responses	43.0	15.1	10.1
	Total	100.0	100.0	100.0
45	<i>The worst things about WSH.</i>			
	Staff to patient interaction	16.5		
	Not enough freedom/smoking/outings	8.9	3.8	
	Food/meals/quantity and quality	7.6		2.5
	Patient care/treatment/medication/groups	7.6		
	Not enough work/activities/outings			2.5
	Patient to patient conflict/fights		5.1	
	Length of stay		3.8	
	Wards/rules/levels/conditions		8.9	2.5
	No response/don't know	8.9	57.0	82.3
	All other responses	50.5	21.4	10.2
	Total			
46	<i>What could be done to make treatment better.</i>			
	More freedom/free time/outside time	22.8	2.5	1.3
	Less/better/alternative medications	8.9		
	More training of staff/physicians			1.3
	More groups and treatment		2.5	1.3
	No response/don't know	19.0	72.2	91.0
	All other responses	49.3	22.8	5.1
	Total	100.0	100.0	100.0

Note: Open-ended responses were not limited to one suggestion. Tables in Appendix 5 show frequencies for the top three suggestions.

Appendix 5f: Program for Adaptive Living Skills

Q No.	Response	Level of Suggestion		
		1st	2nd	3rd
44	<i>The best things about WSH.</i>			
	Patient care/meds/groups/education	22.0	12.2	12.2
	Freedom/levels/PALS	17.1		
	Food/snacks/meals	17.1	7.3	
	Activities/work/outings		9.8	7.3
	Staff			4.9
	No response/don't know	7.3	56.1	73.2
	All other responses	36.5	14.6	2.4
	Total	100.0	100.0	100.0
45	<i>The worst things about WSH.</i>			
	Patient care/treatment/medication/groups	14.6		
	Food/meals/snacks	12.2	7.3	
	staff to patient interaction		7.3	4.9
	Not enough freedom/smoking/outings		7.3	
	Wards/rules/levels/conditions			7.3
	No response/don't know	12.2	61.0	85.4
	All other responses	61.0	17.1	2.4
	Total	100.0	100.0	100.0
46	<i>What could be done to make treatment better.</i>			
	More freedom/free time/outside time	19.5	7.3	
	More time with staff/physicians	9.8		
	Less/better/alternative medications		2.4	
	More training of staff/physicians	7.3		
	More programs/medication education			4.9
	More money		2.4	
	No response/don't know	24.4	78.0	90.2
	All other responses	39.0	9.9	4.9
	Total	100.0	100.0	100.0

Note: Open-ended responses were not limited to one suggestion. Tables in Appendix 5 show frequencies for the top three suggestions.

APPENDIX 6: SUMMARY OF THE BEST AND WORST THINGS, AND AREAS OF IMPROVEMENT

	Hospitalwide (Including PALS)		Hospitalwide (Excluding PALS)		APU		GMU		LOU		PALS	
		%		%		%		%		%		%
<i>BEST (Q44)</i>												
1	Patient care	21.8	Patient care	21.8	Patient care	14.8	Patient care	33.3	Patient care	25.3	Patient care	22.0
2	Food	10.9	Staff	11.7	Staff	13.6	Facilities	13.3	Negative resp.	15.2	Freedom	17.1
3	Staff	10.5	Negative resp.	10.2	Activities	10.2	Staff	13.3	Food	12.7	Food	17.1
					Facilities	10.2						
<i>WORST (Q45)</i>												
1	Staff/pt. Interaction	10.5	Staff/pt. Interaction	11.7	Not enough freedom	12.5	"Nothing"	16.7	Staff/pt. Interaction	16.7	Patient care	14.6
2	Not enough freedom	9.2	Not enough freedom	10.2	Staff/pt. interaction	10.2	Food	13.3	Not enough freedom	8.9	Food	12.2
3	Patient care	8.8	Seclusion	8.6	Seclusion	10.2	Seclusion	10.0	Food	7.6		
	Seclusion	8.8							Seclusion	7.6		
<i>NEED IMPROVEMENT (Q46)</i>												
1	More freedom	17.6	More freedom	17.3	Less/better meds.	15.9	More freedom	16.7	More freedom	22.8	More freedom	19.5
2	Less/better meds.	9.7	Less/better meds.	11.2	More freedom	12.5	Less/better meds.	3.3	Less/better meds.	8.9	More time w/staff etc	9.8
3	More time w/ staff etc.	5.9	More programs	5.6	More programs	5.7	More programs	3.3			More training/staff	7.3
			More groups/trtmt.	5.6	More time w/ staff etc.	5.7	More training/staff	3.3				
							More groups/trtmt.	3.3				
							More time w/ staff etc	3.3				

APPENDIX 7: CONSUMER SURVEY: CHANGE IN ITEM RANKINGS, 1996-1998

Appendix 7a: Adult Psychiatric Unit

Q No.	Question	RANKINGS		CHANGE
		1996	1998	1996-1998
25	Educational opportunities are available here at the hospital.	42	15	27
40	WSH staff are respectful of patients.	32	11	21
42	WSH staff are hard-working.	21	2	19
20	I feel safe on the ward.	34	16	18
38	WSH staff are available.	24	7	17
13	Accommodations for my special needs have been met.	36	20	16
30	I am satisfied with my discharge plan.	41	25	16
31	The staff listen to me.	24	14	10
34	I get the help I need.	27	17	10
14	Ward transfers have been helpful to me.	27	18	9
15	When I move to another ward, I feel welcome there.	14	5	9
36	WSH staff are dedicated to their work.	14	5	9
29	My questions about discharge are answered.	39	34	5
17	Romantic feelings between patients are respected by staff.	43	39	4
37	WSH staff are helpful.	8	4	4
21	Staff encourage me to express my feelings, even when I'm upset.	32	29	3
26	My language issues have been addressed.	4	1	3
33	My treatment is helping me function better.	34	31	3
41	WSH staff are friendly.	6	3	3
9	The staff have included my ideas in my treatment plan.	40	40	0
16	Friendships between patients are encouraged by staff.	37	38	-1
39	WSH staff are responsive.	9	10	-1
2	I am learning things that will help me stay out of the hospital.	27	29	-2
4	The ward program is fair.	24	26	-2
32	My physical problems are being treated.	11	13	-2
35	The group/activities are helping me.	9	12	-3
11	My medications are helping me.	27	31	-4
8	I have enough to say about my treatment.	38	43	-5
27	Hospital staff treat me with respect.	3	8	-5
1	This hospital stay has helped me.	14	20	-6
5	The ward program is helpful.	16	22	-6
18	The wards I have been on are clean and in good repair.	2	8	-6
28	My rights as a patient are respected.	16	23	-7
3	The ward program has been explained to me.	13	24	-11
24	I have learned about mental illness while here.	16	27	-11
12	The care I receive for my medical concerns is adequate.	7	19	-12
19	I have enough privacy on the ward.	21	33	-12
23	I have received education about medications while here.	21	34	-13
22	Staff handle agitated patients well.	11	28	-17
6	There are plenty of groups/other activities.	16	34	-18
7	My questions about treatment have been explained to me.	16	41	-25
10	My questions about medications have been explained to me.	4	37	-33
43	Overall, how would you rate this stay at WSH?	1	42	-41

Appendix 7b: Gero-Psychiatric/Medical Unit

Q No.	Question	RANKINGS		CHANGE
		1996	1998	1996-1998
14	Ward transfers have been helpful to me.	40	4	36
26	My language issues have been addressed.	37	1	36
30	I am satisfied with my discharge plan.	41	8	33
22	Staff handle agitated patients well.	43	11	32
25	Educational opportunities are available here at the hospital.	41	19	22
17	Romantic feelings between patients are respected by staff.	39	22	17
15	When I move to another ward, I feel welcome there.	18	3	15
6	There are plenty of groups/other activities.	33	19	14
35	The group/activities are helping me.	18	4	14
21	Staff encourage me to express my feelings, even when I'm upset.	34	22	12
37	WSH staff are helpful.	21	9	12
20	I feel safe on the ward.	28	17	11
42	WSH staff are hard-working.	15	6	9
13	Accommodations for my special needs have been met.	24	17	7
8	I have enough to say about my treatment.	31	26	5
5	The ward program is helpful.	5	2	3
12	The care I receive for my medical concerns is adequate.	24	22	2
32	My physical problems are being treated.	28	26	2
16	Friendships between patients are encouraged by staff.	15	14	1
9	The staff have included my ideas in my treatment plan.	37	37	0
4	The ward program is fair.	5	6	-1
11	My medications are helping me.	8	9	-1
31	The staff listen to me.	24	26	-2
2	I am learning things that will help me stay out of the hospital.	8	11	-3
24	I have learned about mental illness while here.	35	38	-3
29	My questions about discharge are answered.	35	38	-3
33	My treatment is helping me function better.	21	26	-5
39	WSH staff are responsive.	8	15	-7
36	WSH staff are dedicated to their work.	3	11	-8
40	WSH staff are respectful of patients.	24	32	-8
27	Hospital staff treat me with respect.	13	22	-9
10	My questions about medications have been explained to me.	21	32	-11
3	The ward program has been explained to me.	31	43	-12
28	My rights as a patient are respected.	20	32	-12
18	The wards I have been on are clean and in good repair.	2	15	-13
23	I have received education about medications while here.	28	42	-14
1	This hospital stay has helped me.	3	19	-16
19	I have enough privacy on the ward.	8	26	-18
7	My questions about treatment have been explained to me.	13	32	-19
34	I get the help I need.	17	38	-21
38	WSH staff are available.	5	26	-21
41	WSH staff are friendly.	8	38	-30
43	Overall, how would you rate this stay at WSH?	1	32	-31

Appendix 7c: Legal Offender Unit

Q No.	Question	RANKINGS		CHANGE
		1996	1998	1996-1998
14	Ward transfers have been helpful to me.	34	1	33
25	Educational opportunities are available here at the hospital.	33	10	23
31	The staff listen to me.	22	7	15
32	My physical problems are being treated.	24	12	12
34	I get the help I need.	28	17	11
36	WSH staff are dedicated to their work.	24	13	11
41	WSH staff are friendly.	30	20	10
26	My language issues have been addressed.	12	3	9
15	When I move to another ward, I feel welcome there.	9	2	7
35	The group and activities are helping me.	28	21	7
42	WSH staff are hard-working.	37	31	6
27	Hospital staff treat me with respect.	32	27	5
28	My rights as a patient are respected.	35	30	5
29	My questions about discharge are answered.	42	37	5
33	My treatment is helping me function better.	12	7	5
38	WSH staff are available.	24	19	5
37	WSH staff are helpful.	19	15	4
4	The ward program is fair.	41	38	3
8	I have enough to say about my treatment.	39	36	3
11	My medications are helping me.	6	5	1
17	Romantic feelings between patients are respected by staff.	43	42	1
18	The wards I have been on are clean and in good repair.	16	15	1
30	I am satisfied with my discharge plan.	40	41	-1
3	The ward program has been explained to me.	5	7	-2
9	The staff have included my ideas in my treatment plan.	38	40	-2
23	I have received education about medications while here.	2	4	-2
13	Accommodations for my special needs have been met.	19	22	-3
24	I have learned about mental illness while here.	3	6	-3
19	I have enough privacy on the ward.	35	39	-4
39	WSH staff are responsive.	19	23	-4
40	WSH staff are respectful of patients.	30	34	-4
1	This hospital stay has helped me.	8	13	-5
2	I am learning things that will help me stay out of the hospital.	4	10	-6
22	Staff handle agitated patients well.	27	34	-7
10	My questions about medications have been explained to me.	7	17	-10
5	The ward program is helpful.	16	27	-11
6	There are plenty of groups/other activities.	22	33	-11
7	My questions about treatment have been explained to me.	12	24	-12
16	Friendships between patients are encouraged by staff.	11	25	-14
20	I feel safe on the ward.	12	27	-15
21	Staff encourage me to express my feelings, even when I'm upset.	16	31	-15
12	The care I receive for my medical concerns is adequate.	9	25	-16
43	Overall, how would you rate this stay at WSH?	1	42	-41

Appendix 7d: Program for Adaptive Living Skills

Q No.	Question	RANKINGS		CHANGE
		1996	1998	1996-1998
18	The wards I have been on are clean and in good repair.	41	10	31
42	WSH staff are hard-working.	34	4	30
26	My language issues have been addressed.	30	2	28
25	Educational opportunities are available here at the hospital.	26	1	25
38	WSH staff are available.	30	5	25
20	I feel safe on the ward.	26	8	18
32	My physical problems are being treated.	23	6	17
3	The ward program has been explained to me.	30	15	15
36	WSH staff are dedicated to their work.	21	7	14
37	WSH staff are helpful.	39	26	13
35	The group and activities are helping me.	23	11	12
13	Accommodations for my special needs have been met.	35	24	11
34	I get the help I need.	17	8	9
1	This hospital stay has helped me.	29	21	8
12	The care I receive for my medical concerns is adequate.	43	36	7
2	I am learning things that will help me stay out of the hospital.	42	36	6
11	My medications are helping me.	35	29	6
21	Staff encourage me to express my feelings, even when I'm upset.	21	15	6
24	I have learned about mental illness while here.	7	2	5
28	My rights as a patient are respected.	37	32	5
33	My treatment is helping me function better.	14	11	3
8	I have enough to say about my treatment.	39	38	1
7	My questions about treatment have been explained to me.	37	38	-1
14	Ward transfers have been helpful to me.	13	15	-2
19	I have enough privacy on the ward.	10	15	-5
23	I have received education about medications while here.	10	15	-5
40	WSH staff are respectful of patients.	17	22	-5
39	WSH staff are responsive.	15	22	-7
31	The staff listen to me.	7	15	-8
9	The staff have included my ideas in my treatment plan.	2	11	-9
29	My questions about discharge are answered.	33	42	-9
41	WSH staff are friendly.	5	14	-9
17	Romantic feelings between patients are respected by staff.	26	38	-12
27	Hospital staff treat me with respect.	15	27	-12
16	Friendships between patients are encouraged by staff.	19	32	-13
4	The ward program is fair.	23	38	-15
22	Staff handle agitated patients well.	19	35	-16
6	There are plenty of groups/other activities.	6	24	-18
10	My questions about medications have been explained to me.	7	29	-22
43	Overall, how would you rate this stay at WSH?	10	32	-22
15	When I move to another ward, I feel welcome there.	3	27	-24
5	The ward program is helpful.	4	29	-25
30	I am satisfied with my discharge plan.	1	43	-42



**Research and Data Analysis
Report Number 3.25**