

2015/2016 Summer Studentship Project Application Form

Send to: Research Office, University of Otago Christchurch, PO Box 4345, Christchurch, by 5pm on **3 July 2015**

Supervisor Information (First named supervisor will be the contact):

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Research Category (Choose one category only – to be used for judging the students' presentations):

Clinical

Project Title (20 words MAXIMUM):

Satisfaction with the Crisis Resolution Service: Consumer, family and referrer perspectives

Project Description:

Introduction:

The Crisis Resolution Service is a new service within Mental Health Services that sees people with urgent mental health needs. The service aims to provide care that is easy to access, efficiently delivered and effective. For example, the service seeks to see consumers where they want to be seen (such as in their own home) where feasible, provide a high level of integration between inpatient and outpatient care and minimize unnecessary assessments. Currently, only anecdotal evidence exists about how the people who use the Crisis Resolution Service, experience it. The present study seeks to systematically assess how consumers, their families and the people who referred consumers for help, rate their satisfaction with the Crisis Resolution Service. A novel aspect of the study is the effort that is being made to obtain the viewpoints of all key stakeholders (consumer, family and referrer). This will provide a rich information base for evaluating service satisfaction, and examining how the service could potentially be improved.

Aim:

The broad aim of the study is to evaluate the service satisfaction of consumers, families and referrers of consecutive people discharged from the Crisis Resolution Service over a period of four-six weeks. Specifically, the study aims to:

- Evaluate global satisfaction with the service;
- Evaluate satisfaction with specific aspects of care that the service is striving to achieve (e.g., ease of access, efficiency and effectiveness of service).
- Assess how consumers, families and referrers think that the service could be improved and which aspects of the service are especially helpful.

Method:

Participants

Participants will be consumers, their families and referrers. Consumers will be consenting, consecutive people discharged from the Crisis Resolution Service over four-six weeks. Every consumer who participates in the study will be asked if there has been a family member or a referrer who has been involved in their care during their recent involvement with the Crisis Resolution Service, and if they agree to them being contacted and briefly interviewed. Broad definitions of family and referrer will be used.

'Family' will include any people who have been involved in the consumer's recent care with the Crisis Resolution Service in a non-professional capacity (e.g., partner, friend, Pastor, neighbour who facilitated the consumer's involvement with Crisis Resolution Service, or supported them while they were under the care of the Crisis Resolution Service). 'Referrer' will include any people who have been involved in the consumer's recent care with the Crisis Resolution Service in a professional capacity (e.g., General Practitioner, Psychiatrist or Counsellor who facilitated the consumer's involvement with Crisis Resolution Service, or worked alongside them while they were under the care of the Crisis Resolution Service).

Design

- Data collection will occur over four-six weeks, and involve all consumers who have been consecutively discharged from the Crisis Resolution Service;
- At discharge from the Crisis Resolution Service, consumers will be told about the study and given the opportunity to opt out of being contacted about the study. The consumer's clinician will do this in person or over the phone. Consumers will be given the work email address and phone details of the student so that they can contact them to indicate that they do not want to be contacted about the survey;
- Following discharge, the person responsible for informatics within the Specialist Mental Health Service will provide the student the names and contact details of new people who have been discharged from the Crisis Resolution Service. The student will check that these people have not contacted the student to opt out of being approached. A protocol will be in place to address any privacy issues that may arise, such as the student knowing any of the consumers. The student will then phone or write to potentially agreeable consumers approximately 7-10 days after discharge and asked if they consent to answering brief questions about their satisfaction with the Crisis Resolution Service. Consenting consumers will then be asked a series of brief questions by the student.
- Where family and referrers have been involved in a consumer's care from the Crisis Resolution Service, and the consumer agrees to contact, these people will be contacted by the student and invited to participate in the study. Consenting family and referrers will be asked brief questions about their satisfaction with the service.
- Data will be entered into a data base (SPSS) and analysed using descriptive statistics by the student.

Measures

A brief structured interview will be conducted with participants. Structured questions will be asked, and the student will take care to ensure that the participant fully understands the question, before a rating is sought from the participant. Ratings will be obtained for global satisfaction, and satisfaction with specific aspects of care (e.g., ease of access, efficiency and effectiveness of service). Basic demographic will also be collected (ethnicity, gender and age). An effort has been made to keep rating options simple, and they have been written using plain English. Comments from participants will also be recorded, for reliability of coding purposes. Participants will also be asked two open ended questions, to elicit how they think that the service could be improved, and which aspects of the service were especially helpful. Appendix 1 shows the specific questions that consumers will be asked. 'Family' will be asked the same questions, with modifications to the pronoun as appropriate. 'Referrers' will be asked the first four questions only (with pronoun modification), the two open ended questions, plus an additional question about the adequacy of communication from the Crisis Resolution Service.

Role of the Student

Training, Support and Supervision

Prior to the student commencing, the data base will be set up for them (SPSS). Once the student arrives, they will be orientated to the role and the workplace, and given training and guidance in a

number of specific areas including: privacy and confidentiality, cultural issues and entering and analysing data using SPSS and managing any clinical concerns that may arise. It is not within the scope of the role for the student to manage any clinical issues themselves. They will have access to relevant clinical staff, so that they can pass any concerns on to these people, and they will be given a written protocol for what to do should any concerns arise. The student will also have access to their supervisor most working days and statistical advice if needed.

Summary of Tasks

- Participate in training (see above);
- Liaise with clinical staff at the Crisis Resolution Service about relevant research tasks (e.g., reminding and encouraging them to talk with consumers being discharged about their right to opt out of being contacted);
- Collect data:
 - Receive and manage emails about newly discharged consumers. Check that they have not chosen to opt out of being contacted;
 - Contact participants and seek informed consent for participation;
 - Conduct brief structured interviews with agreeable consumers, family and referrers. Complete the record form during these interviews;
- Enter the data into SPSS;
- Analyse the data using descriptive statistics using SPSS. Prepare and present the results;
- Seek support and guidance as needed.

Significance

Having an urgent mental health need is likely to be a distressing experience for consumers and their families. Helping people to get the assistance that they need in a timely manner may also be stressful for referrers (e.g., General Practitioners), as they may need to facilitate care in the context of a busy practice. The Crisis Resolution Service is a pivotal service for people at a critical time in their mental health care. Therefore, it is important that the service functions well, and that the key people who use the service feel satisfied with the service that they receive. A strength of the study is the 'triangulation' of information obtained from gaining the views of the key stakeholders (consumers, family and referrers). This will enable the study to make a valuable contribution to evaluating service satisfaction in a broad way, and learn how the service could potentially be improved.

Student Prerequisites (eg. Medical Student) if applicable:

None