

NRCC Employee/Physician Experience Surveys Introduction

The National Research Corporation Canada (NRCC) Employee/Physician Experience surveys provide an evaluation of LHSC from the point of view of organizational members. Overall and department-specific reports identify LHSC's strengths and areas for improvement within the organization. These surveys focus on key areas known to be important to employees and physicians.

At LHSC, we are able to compare our results to that of other Ontario Hospital Association (OHA) hospitals through comparisons to the average scores of all participating Ontario hospitals.

Methodology

All eligible employees and physicians were mailed an employee questionnaire, a letter from Bonnie Adamson, President and CEO and Dr. Mark MacLeod, Medical Advisory Committee Chair and a postage paid return envelope. Each participant received either the Employee or Physician version of the survey. Questionnaires can be viewed below.

Data from all surveys were entered and analyzed by NRCC. Standardized results reports were produced as requested by LHSC. Written comments were typed verbatim and categorized according to content.

Confidentiality

To ensure confidentiality, employees were assigned mailing numbers. Names are not recorded on the questionnaire and are not used in the tabulation of the survey results. To further ensure that confidentiality was maintained, results are presented in summary form (minimum of 15 completed questionnaires are required in each groups' results). Written responses provided by employees are examined and any information that could identify employees is removed.

Employee/Physician Experience Surveys A Guide to Reading and Understanding Survey Results

Dimensions of Care

Dimensions can be thought of as themes as listed below. To calculate a Theme Score, the number of positive responses is totaled for all questions within the theme across all respondents. That number is then divided by the total number of responses for all questions across all respondents in the theme. Unanswered questions are omitted from both the numerator and denominator of the positive score calculation.

Individual item scores that comprise each dimension are provided within the survey reports.

Dimensions of Care

- Job
- Work Team/Unit
- Supervisor
- Organization
- Infection Control
- Health and Safety
- Training and Development
- Patient Care
- Patient Safety
- Non-Clinical and Support Services

What is a Positive Score?

NRCC presents survey results using % Positive Scores. A % Positive Score identifies the percentage of respondents that view an aspect of the workplace positively. By asking behaviorally based questions and assessing whether the desired behavior occurred or not, we are better able to determine where problems exist. Furthermore, because the questions are behaviorally based, we can better determine what actions to take to improve employee and physician satisfaction.

How is a Positive Score determined?

The calculation of Positive Scores is determined by summing responses to survey items based upon response categories (i.e. response scale options). Each response category is identified as a positive or opportunity for improvement response. For example, for a survey item using the response scale *Poor, Fair, Good, Very Good and Excellent*, the Positive Score is based on the sum of *Good, Very Good and Excellent* scores only. These responses are all considered positive responses. In contrast, a response of *Fair or Poor* is considered an opportunity response and excluded from the Positive Score.

Several different types of response scales are used in the survey. Each scale in has its own specific definition of Positive Score.

The survey item “How frequently do you look forward to going to work?” and the Patient Care and Quality of Non-Clinical and Support Services dimensions of the survey define Positive Score as the “Always” response score only. At the request of LHSC, the Overall LHSC reports also provide the response scores for all of the scale options (Never, Sometimes, Usually and Always) to understand the results for combined Always and Usually scores. By combining these scores, we are acknowledging that survey respondents rarely select always.

How is the Positive Score calculated?

Positive Scores are calculated by creating a fraction based upon the total number of responses (this number is placed in the denominator) and the total number of responses that constitute a positive response (this number is placed in the numerator). By dividing the total number of responses into the total number of Positive responses a percentage is determined that reflects the % Positive Score. Missing values, Not applicable and Neither agree nor disagree are excluded from this calculation.

Positive Score Analysis Questions

Not every question on the survey has been designated as having a Positive Score. For example, demographic questions such as Age Group or questions about health status would be inappropriate for positive coding.

Highest/Lowest Percent Positive

Highest: The top ten items ranked in descending order by current score
Lowest: The lowest items ranked in increasing order by current score

Priority Matrix

The priority matrix is a plot chart designed to help us identify areas of improvement. To create the chart, a correlation coefficient (a number between -1 and 1) is calculated to describe the relationship between two variables or survey items. Correlation coefficients were calculated for all survey items against the Employee Engagement theme score (i.e. the composite theme score based on six items).

A general rule of thumb is that a correlation coefficient of 0.40 or less shows little or no relationship between the two items, of 0.40 to 0.60 shows a moderate degree of relationship and 0.60 or over demonstrates a strong relationship. When we create a chart plotting the correlation coefficient and the % Positive Score for each item we can see that the relationship between each item and Employee Engagement is variable.

Based on this information, four quadrants are defined to depict the Top, High, Medium and Low Priorities for change at LHSC. Top Priority items are highly correlated to Employee Engagement and currently have a low % Positive Score. These are definitely areas to consider for improvement. Alternately, high % Positive Scores that have a weak relationship to Employee Engagement (Low Priority) are not priority targets for improvement.

The Priority Matrix provides direction and is a useful tool in understanding where improvement efforts are best targeted.

Comparisons

The 2013 LHSC Organization-Wide Reports provide our results as the current period. In addition, the May 2011 results are displayed as well as the Ontario Hospital Association Employee and Physician Average results. The LHSC Employee Average results are also provided and are important when comparing department-level results to the overall LHSC results.

When differences in scores are statistically significant this means that the difference is probably true, that is, it is probably not due to chance. These distinctions provide direction to help us determine where we can make improvements in the workplace.

NRCC demonstrates statistically significant differences using shading on bar graphs and up and down arrows for individual themes and survey items. Look for the guides provided on statistical significance on each page of the report. This information is helpful in gauging how LHSC's performance compares to other organizations.
