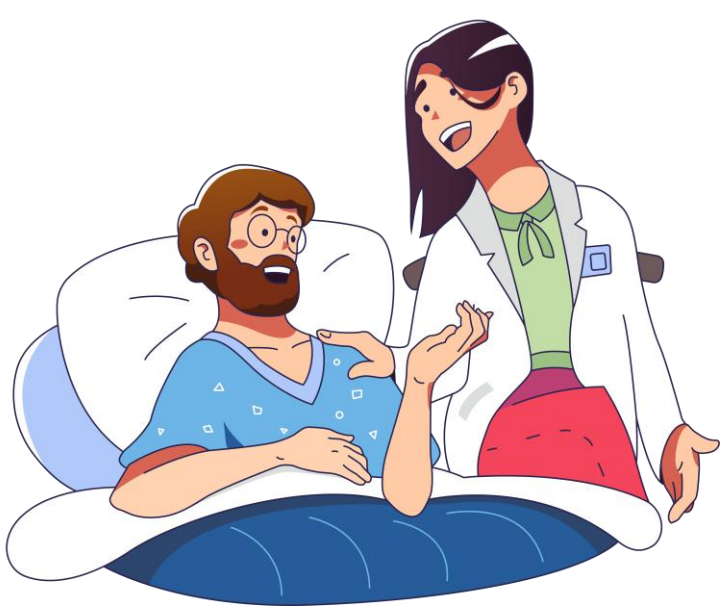




What Role Does Compassion Have On Quality Care Ratings? A regression analysis and validation of the Sinclair Compassion Questionnaire (SCQ)

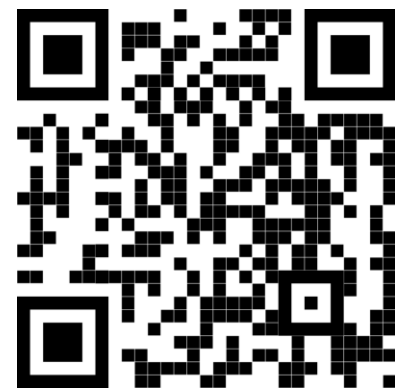
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Compassion Measure Website
www.compassionmeasure.com



Canadian Institutes of Health Research
Instituts de recherche en santé du Canada



Compassion Research Lab
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Background

- Compassion is a “virtuous response that seeks to address the suffering and needs of a person through relational understanding and action”¹
- Compassion is increasingly considered a key predictor of quality care ratings and the overall patient experience^{2,3}
- The lack of a valid and reliable patient reported compassion measure has inhibited research and quality improvement in the field^{4,5}
- The Sinclair Compassion Questionnaire (SCQ), a 15-item, valid and reliable patient reported compassion measure was initially developed and validated for use in Acute Care, Residential Care and Hospice Settings, to address this gap⁶
- The Health Quality Council of Alberta embedded the SCQ in their province-wide Patient Experience Surveys administered to patients who received care in the Emergency Department (ED)⁷, Primary Care (PC), and Residential Care (RC)
- The **purpose** of these studies were to:
 - To verify the reliability and validity of the SCQ (15 item) in the Emergency Department (ED) and Primary Care (PC), and the SCQ-Short Form (5 items) in Residential Care (RC)
 - To assess the impact of compassion, as measured by the SCQ on quality care ratings in the ED, PC and RC
 - Determine whether patient-reported compassion varied by sociodemographic identity (ED, PC)

Methods

- Multi-center, cross-sectional survey design across three provincial patient populations
 - Emergency department patients (n=4501); Primary care patients (n=2291); Residential Care (n=2683).

DATA COLLECTION

Emergency Department

- Hospital EDs (n = 14); 50% discharged from ED, 50% admitted after ED visit (23% response rate)
- Conducted over telephone

Primary Care

- Clinic patients who previously indicated willingness for research engagement (37% response rate)
- Conducted via email

Residential Care

- Resident census to all eligible facility-based continuing care sites (31% response rate)
- Conducted using self-administered paper survey, in-person administration, telephone, and/or email

DATA ANALYSIS

- Confirmatory Factor Analyses** were conducted to validate the factor structure of the SCQ in each care setting
 - Internal consistency, Standardized Factor Loadings, and Model Fit Indices evaluated
- Hierarchical Stepwise Linear Multiple Regressions** were used to assess the unique variance of compassion on quality care ratings in the ED, PC, and RC patient populations
 - Multi-step process by which available socio-demographics/patient information variables included in initial steps
 - Patient-reported compassion (SCQ) entered in the final step to isolate predictive validity
- One-Way Analyses of Variance** (ANOVAs) were used to assess whether patients’ mean compassion scores differed based by sociodemographic factors
 - This study was approved by the Research Ethics Board at the University of Calgary (REB21-1938)

References

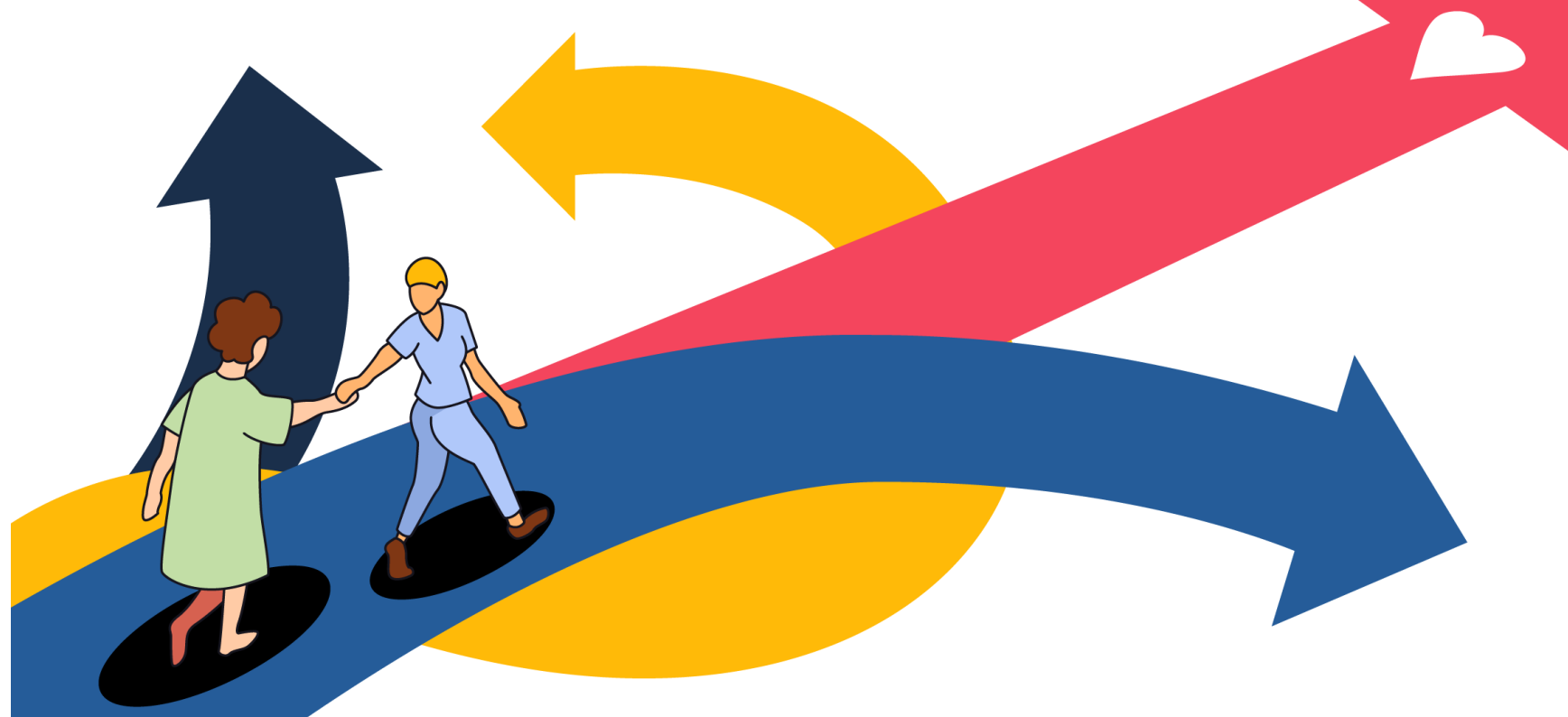
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The Sinclair Compassion Measure



Watch the Video Tutorial on
Using the SCQ



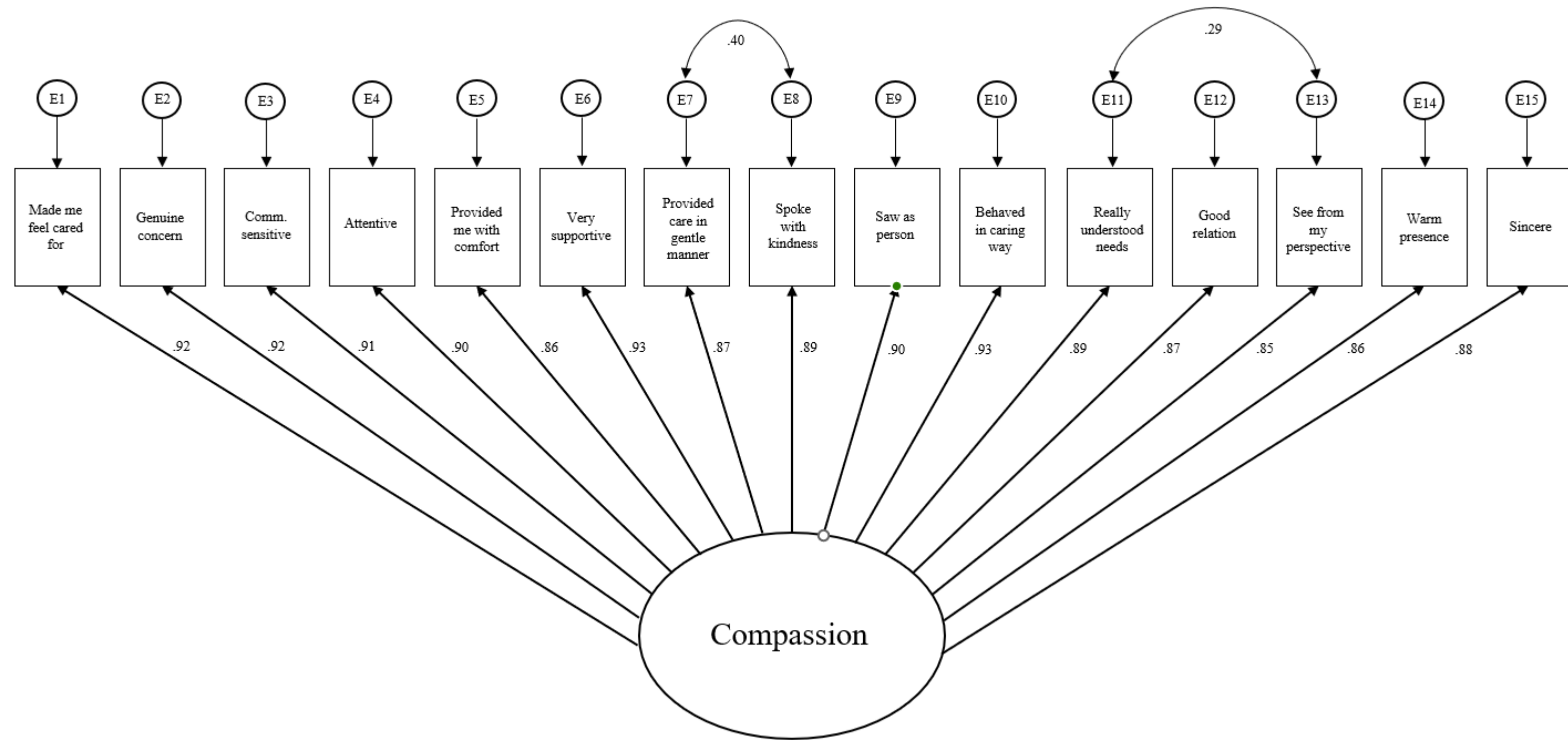
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Results

Confirmatory Factor Analyses

Validation Population	Reliability	Factor Loadings	Fit Indices		
	Cronbach's α	Standardized	CFI	RMSEA	SRMR
Emergency Department	0.98	.81 - .92	0.98	0.06	0.01
Primary Care	0.98	.85 - .93	0.97	0.09	0.02
Continuing Care (Short Form)	0.91	.76 - .87	0.99	0.06	0.01

CFA Model for Primary Care



Regression Models by HC Setting and Outcomes

Care Setting	Outcome	Unique Prediction		Size of Effect	f ²
Emergency Department	Overall Care Rating	✓ ΔR ² = .19	R ² = .65	Medium-Large	0.23
Primary Care	Overall Care Rating	✓ ΔR ² = .04	R ² = .84	Small-Medium	0.04
Primary Care	Physician Rating	✓ ΔR ² = .07	R ² = .73	Small-Medium	0.09
Continuing Care	Home Rating	✓ ΔR ² = .01	R ² = .49	Small	0.01
Continuing Care	General Satisfaction	✓ ΔR ² < .01	R ² = .48	Small	<0.01
Continuing Care	Quality of Life	✓ ΔR ² < .01	R ² = .39	Small	0.01

Demographic Differences in Patient Reported Compassion by HC setting

Emergency Department:

- Indigenous Peoples of Canada < white patients (Mean Difference = -.17, SE = .05, 95% CI = [-.34, -.01], *p* = .033)
- Women < Men (Mean Difference = -.15, SE = .02, 95% CI = [-.21, -.09], *p* < .001)

Primary Care:

- Unemployed < Retired (Mean Difference = .19, SE = .06, 95% CI = [-.38, -.01], *p* = .040)

Conclusion

- Compassion was identified as a key predictor of patients overall quality care ratings across all sites
- Compassion was the greatest predictor of Emergency Department patients’ overall quality care ratings
- Compassion was the greatest predictor of Primary Care patients’ physician ratings
- Compassion was a statistically significant predictor of care home ratings, general satisfaction, and quality of life among continuing care residents
- Healthcare organizations may want to consider compassion a Key Performance Indicator (KPI)*
- The SCQ (15-items) and SCQ Short Form (5-items) are valid and reliable patient reported compassion measures to assess patients experiences of compassion in the Emergency Department, Primary Care and Residential/Continuing Care, in addition to existing versions of the SCQ that have been validated in Acute Care, Hospice and Outpatient Clinics. All versions of the SCQ can be accessed at: www.compassionmeasure.com
- Experiences of compassion varied based on patient demographics with Indigenous People of Canada ED patients (vs. White), Women ED Patients (vs. Men) and Unemployed PC patients (vs. Retired) reporting less compassion
- The SCQ, the world’s most valid and reliable compassion measure,⁵ provides researchers, system analysts, and senior leaders the means to assess compassion across Acute Care, Hospice, Residential Care, Emergency Department, Outpatient and Primary Care Settings.
- The SCQ is available in English, French, Spanish and Mandarin, with other translation and validation studies in process.