



National Patient Experience Survey 2018

Cork University
Hospital

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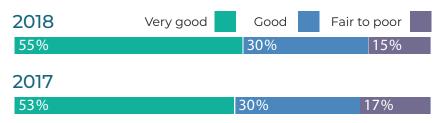




Cork University Hospital

2018 survey results

Overall experience





Areas of good experience







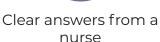
Respect and dignity

Confidence and trust in hospital staff

Someone to talk to about worries and fears

Areas needing improvement







Help from staff to eat meals



Respect and dignity in the emergency department

The patient voice

"The doctors, nurses and staff were fantastic; they are wonderful people. My surgeon was amazing to me before, during and after. Always willing to answer my many questions"



"I suffer from my food allergies. The staff at CUH were unable to give any food choices other than the set menu. My family brought in all my food."

www.patientexperience.ie

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About the National Patient Experience Survey 2018

The National Patient Experience Survey is a nationwide survey that offers patients the opportunity to describe their experiences of public acute healthcare in Ireland. The survey is a partnership between the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health. The survey was conducted for the first time in 2017 and repeated in 2018.

Nationally, 26,752 people were invited to participate in the second National Patient Experience Survey. In total, 13,404 completed the survey, resulting in a response rate of over 50%. 846 patients from Cork University Hospital took part in the survey.

The aim of the survey is to find out about patients' experiences in public acute hospitals and to use their feedback to identify areas of good experience, and areas needing improvement. The HSE responded to the 2017 survey results by producing detailed quality improvement plans at national, hospital group and hospital levels. The implementation of these plans is coordinated by an oversight group, and a wide range of initiatives have already been introduced across Ireland's public acute hospitals. Some examples of these initiatives can be seen at www.patientexperience.ie/improvements-in-care.

What were the main findings for Cork University Hospital?

The majority of participants from Cork University Hospital reported positive experiences in hospital. 85% of participants said they had 'good' or 'very good' overall experiences, compared with 84% nationally. The hospital scored slightly below the national average for the admissions stage of care, above average on examination, diagnosis and treatment and similar to the average for the other stages of care.

Several areas of good experience were identified. These were areas that were related to participants' overall experiences and where participants gave above-average ratings. For example, patients generally said they were treated with respect and dignity, and most had confidence and trust in hospital staff. In addition, patients were usually able to access emotional support when they needed it.

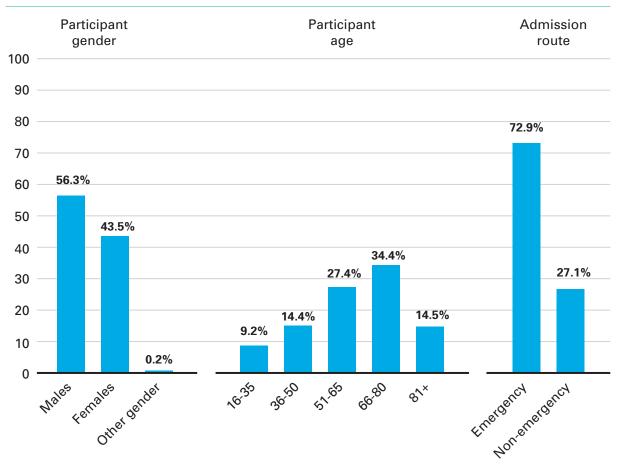
There were also several areas needing improvement. For example, fewer patients than average felt that they were treated with respect in the emergency department. Patients also said they did not always get help to eat their meals, and were not always given answers they could understand from nurses. Some improvements in patient experience ratings were identified compared with the 2017 survey. The findings of the 2018 survey will help Cork University Hospital to continue to improve patients' experiences of care in the hospital.

Hospital and participant profile

Cork University Hospital is a public acute hospital located in Cork. There were 614 inpatient beds available in the hospital during the survey period of May 2018.

1,653 people discharged from Cork University Hospital during the month of May 2018 were invited to participate in the survey. 846 people completed the survey, achieving a response rate of 51.1%. 56.3% of participants were male, 43.5% were female and 0.2% were another gender. 617 respondents (72.9%) said that their stay in hospital was an emergency. Figure 1 below provides information on the respondents who took part in the survey from Cork University Hospital.

Figure 1 Participants from Cork University Hospital by gender, age group and admission route



Areas of good experience and areas needing improvement

This section lists the areas where most patients had positive experiences, and those areas where there is the most room for improvement. Appendix 1 explains how these areas were identified.

The areas of good experience in Cork University Hospital are:

Care on the ward

Someone to talk to about worries and fears | Q28

446 (84%) of the 527 people who answered this question said they definitely or to some extent were able to find someone to talk to about their worries and fears.

Other aspects of care

Confidence and trust in hospital staff | Q29

690 people (84%) said that they always had confidence and trust in the hospital staff that treated them.

Other aspects of care

Respect and dignity | Q51

684 people (84%) said that they were always treated with respect and dignity while they were in hospital.

The areas needing improvement in Cork University Hospital are:

Admissions

Respect and dignity in the emergency department | Q6

Of the 567 people who answered this question, 110 (19%) said that they were not, or were only sometimes, treated with respect and dignity in the emergency department.

Care on the ward

Help from staff to eat meals | Q19

86 people (29%) said that they did not get, or only sometimes got, enough help from staff to eat their meals.

Care on the ward

Clear answers from a nurse | Q22

Of the 743 people who answered this question, 195 (26%) said that did not get, or only sometime got, clear answers from a nurse.

Survey results for the stages of care along the patient journey

The National Patient Experience Survey 2018 follows the patient journey through hospital from admission to discharge. The 2018 questionnaire is available to download from www.patientexperience.ie.

The survey questions were grouped into five stages along the patient journey:



5 QUESTIONS

and respect for privacy.



14 QUESTIONS







Interpreting the results for the stages of care

Scores out of 10 are given for each question belonging to a stage of care or a stage as whole. A score of 0 indicates a very negative experience and a score of 10 indicates a very positive experience. Sometimes questions are described as high or low ranking questions. These are questions with the highest or lowest score when compared to a set of questions.

Statistical tests were carried out to examine if there were significant differences in patient experience between 2017 and 2018, as well as between a hospital and the national average. For further information on the analyses please consult Appendix 3 of the 2018 national report, available from www.patientexperience.ie.

Changes in patient experience over time

Participants' average rating of their overall experience was slightly higher in 2018 than in 2017. The greatest improvement for Cork University Hospital has been achieved in the area of discharge or transfer. There were also small improvements for care on the ward and examinations, diagnosis and treatment. However, the 2018 ratings for admissions are slightly below what they were in 2017. Figure 2 shows a comparison of scores for individual stages of care.

It is important that these changes are interpreted with caution as scores will naturally vary from year to year for a variety of reasons. Several rounds of survey data will be required before meaningful trends and changes in patient experience can be accurately identified.

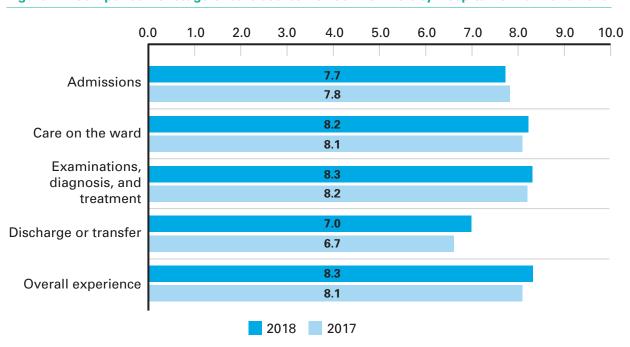


Figure 2 Comparison of stage of care scores¹ for Cork University Hospital for 2017 and 2018

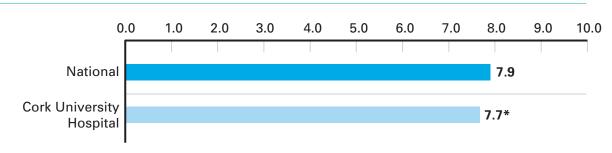
¹ Scores for the stages of care were constructed by calculating the average scores for all the questions belonging to that stage.

Admissions

Figure 3 compares the hospital's overall score for admissions with the national average. Figure 4 shows the hospital's scores for questions on this stage of care.

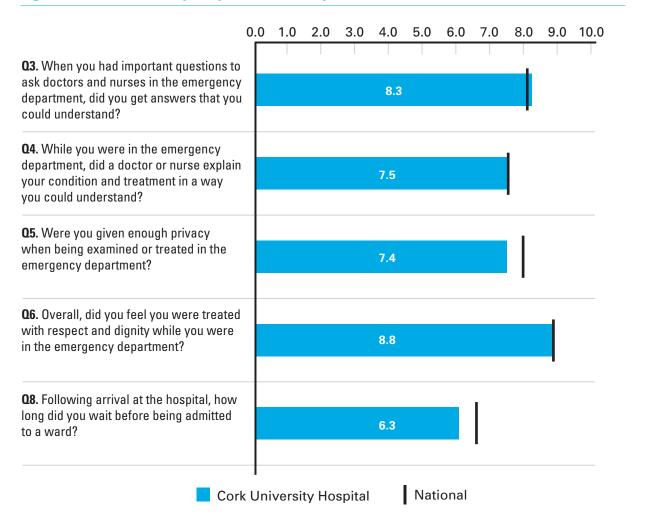


Figure 3 Comparison of Cork University Hospital with the national average score for admissions (out of a maximum of 10)



^{*} Denotes a statistically significant difference from the national average.

Figure 4 Cork University Hospital scores for questions on admissions



Emergency department waiting times²

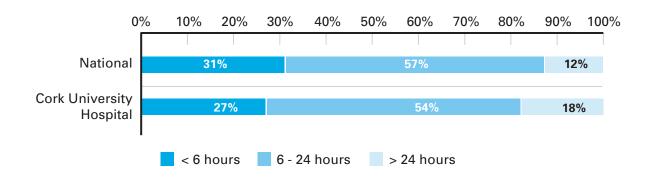
The HSE sets targets for the performance of acute hospitals, including targets on waiting times in emergency departments, such as:

- 75% of people attending the emergency department are discharged or admitted to a ward within six hours of registration and none should wait for longer than nine hours.
- 95% of people attending the emergency department aged 75 years or older are discharged or admitted to a ward within six hours of registration and none should wait for longer than nine hours.

In Cork University Hospital, 144 respondents (27.2%) said they were admitted to a ward within six hours of arriving at the emergency department, while 288 respondents (54.3%) reported waiting between six and 24 hours. 98 respondents (18.5%) reported waiting 24 hours or more before being admitted to a ward in Cork University Hospital, with 25 of these saying they waited more than 48 hours.

Figure 5 outlines the patient-reported waiting times in Cork University Hospital, compared with the national average.

Figure 5 Patient-reported emergency department waiting times for Cork University Hospital and nationally



² The HSE measures emergency department waiting times differently to the survey, namely from the time a patient registers at the emergency department until they leave it. It is likely that there are some differences between survey findings and the official HSE figures. The HSE 2018 targets can be viewed at: https://www.hse.ie/eng/services/publications/performancereports/2018-acute-hospitals-metadata.pdf.

The patient voice: what patients said about admissions

"Staff were extremely helpful & attentive in both A+E & on the ward."

"After spending 30 hours on a trolley, I think the A&E dept should be totally overhauled."

"I received great care & attention.

A&E was very crowded, however, staff prioritised me & I was seen to within 10/15 mins on arrival."

"I was 4 days and 4 nights on a trolley in A&E in a busy, noisy, draughty corridor. Could not rest or sleep at all!!"

Admissions: what do these results mean?

Patient ratings of admission to Cork University Hospital were slightly more negative than in the 2017 survey and were significantly lower than the national average. Patients were generally positive about their interactions with staff in the emergency department. However, the hospital performed below the national average on privacy and emergency department waiting times. 27% of participants said that they were admitted to a ward within the recommended six hours. This is an important issue, as lengthy waiting times are associated with poor outcomes for patients.^(1,2)

Care on the ward

Figure 6 compares the hospital's overall score for care on the ward with the national average. Figure 7 shows the hospital's scores for questions on this stage of care.



Figure 6 Comparison of Cork University Hospital with the national average score for care on the ward (out of a maximum of 10)

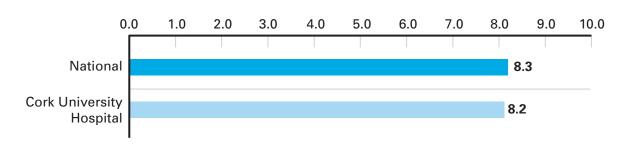
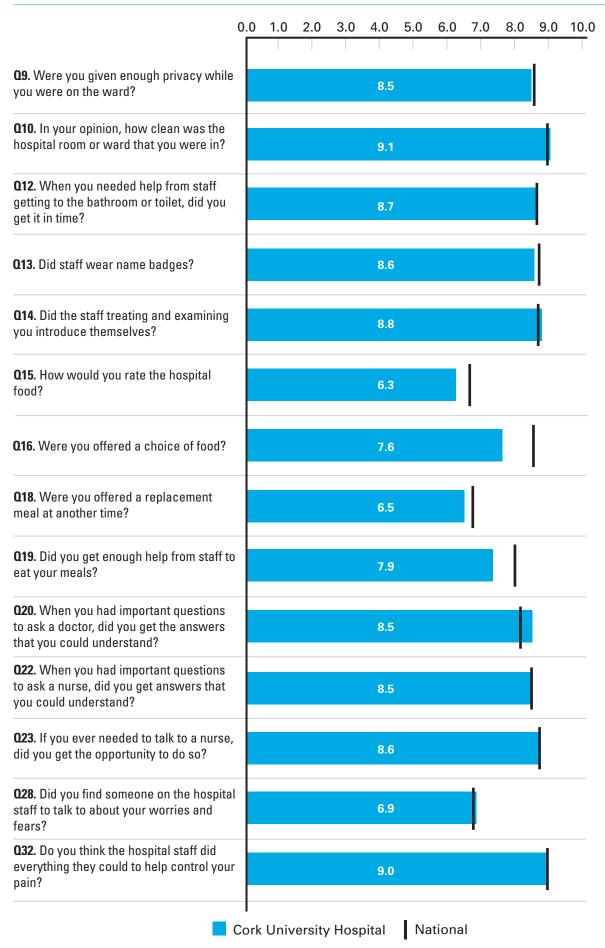


Figure 7 Cork University Hospital scores for questions on care on the ward



The patient voice: what patients said about care on the ward

"I found all the staff excellent - very kind and caring toward me. Couldn't do enough for me, amazing people." "The nurses were very nice and polite. The food was very good. The ward was very clean, tidy, including the toilet and shower."

"I suffer from my food allergies. The staff at CUH were unable to give any food choices other than the set menu. My family brought in all my food."

"The food was not very good, and one meal looked like it had been reheated from the previous day."

Care on the ward: what do these results mean?

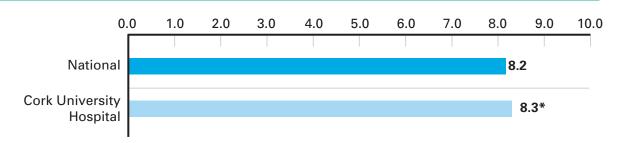
Cork University Hospital received slightly higher ratings of care on the ward in 2018 compared to last year's survey. Participant ratings for this stage of care were similar to the national average. Patients gave positive ratings of the cleanliness of their room; however, they were less positive about hospital food, with below-average scores for questions on hospital meals.

Examinations, diagnosis and treatment



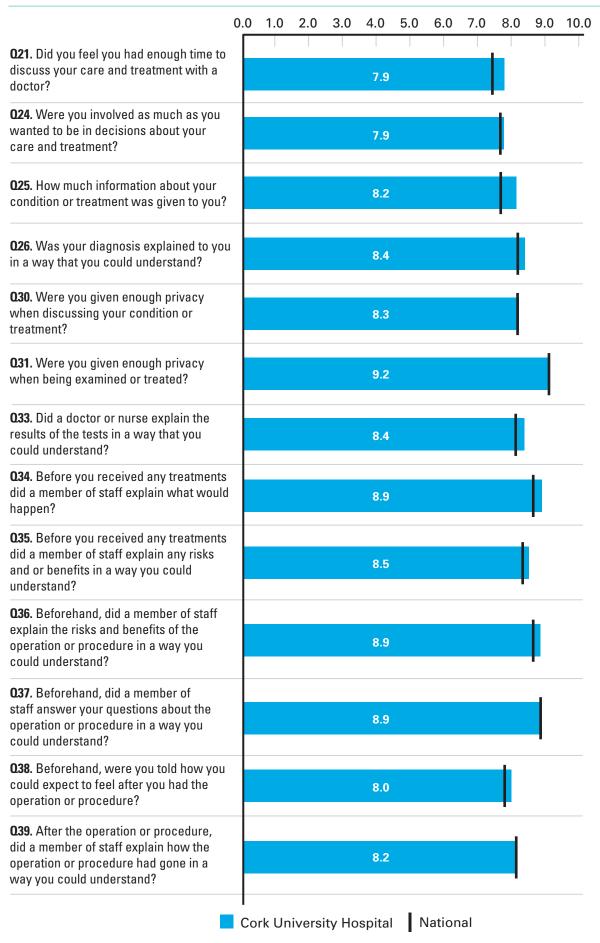
Figure 8 compares the hospital's overall score for examinations, diagnosis and treatment with the national average. Figure 9 shows the hospital's scores for questions on this stage of care.

Figure 8 Comparison of Cork University Hospital with the national average score for examinations, diagnosis and treatment (out of a maximum of 10)



^{*} Denotes a statistically significant difference from the national average.

Figure 9 Cork University Hospital scores for questions on examinations, diagnosis and treatment



The patient voice: what patients said about examinations, diagnosis and treatment

"My hospital stay was a great experience. The doctors, nurses and staff were fantastic; they are wonderful people. My surgeon was amazing to me before, during and after. Always willing to answer my many questions."

"If my family had not intervened I would have been discharged after 3 days. Thereafter I was detained for a further week when all necessary tests and procedures were carried out."

"I was treated with the utmost care and consideration by all staff at all times. The furore and bad publicity in the media does not reflect my experience at the 'coalface' with the 'foot soldiers'."

"More doctors & nurses are needed on the frontline to improve the time taken to answer queries and to have more opportunities for face-to-face interactions."

Examinations, diagnosis and treatment: what do these results mean?

Ratings of examination, diagnosis and treatment were slightly higher than last year and were also significantly above the national average. Cork University Hospital scored on or above the national average for each of the questions on this stage, with many patients reporting positive experiences of interactions with staff. A number of patients commented on how busy hospital staff were.

Discharge or transfer

Figure 10 compares the hospital's overall score for discharge or transfer with the national average. Figure 11 shows the hospital's scores for questions on this stage of care.



Figure 10 Comparison of Cork University Hospital with the national average score for discharge or transfer (out of a maximum of 10)

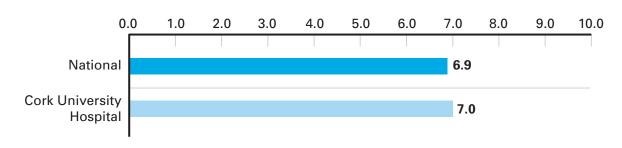
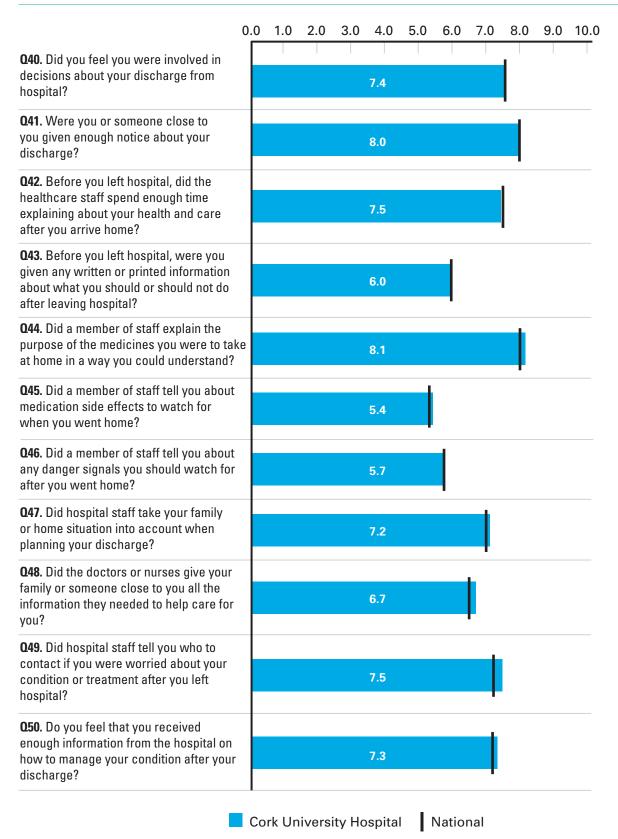


Figure 11 Cork University Hospital scores for questions on discharge or transfer



The patient voice: what patients said about discharge or transfer

"The aftercare from the nurses was the best. They rang me at home as to how I was recovering and asked me about any problems I had. I couldn't have asked for more. Thanks to everybody who helped me through a very difficult time."

"The new discharge unit was very good — Both the nurses and the assistant there were attentive and compassionate." "I felt my stay in hospital was rushed considering the amount of work I had done. I was being discharged when I was not fit to leave and I had to request to be allowed to stay for an extra night."

"On my discharge I was told nothing, not asked if I had someone to collect me. I was told nothing about my injury or how to treat it at home. I was told nothing about my prescription. They gave me the feeling they needed my bed and to pack up and go."

Discharge or transfer: what do these results mean?

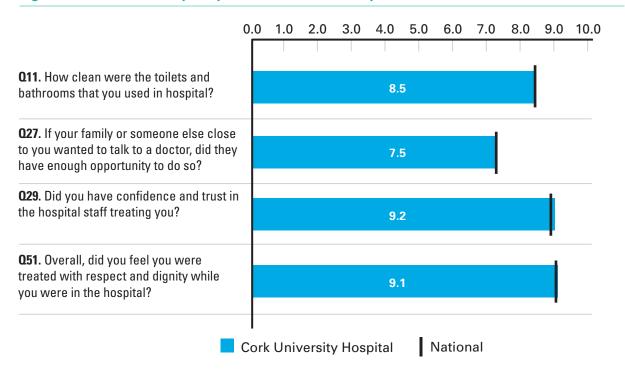
Cork University Hospital received slightly higher ratings of discharge or transfer in 2018 compared to its score in the 2017 survey, and participant ratings for this stage of care were also slightly above the national average. The hospital received scores on or above the national average for each question. However, a number of patients said that they were not told about medication side effects or danger signals to watch out for when they went home.

Other aspects of care

Figure 12 shows the hospital's scores for questions related to other aspects of care.



Figure 12 Cork University Hospital scores for other aspects of care



The patient voice: what patients said about other aspects of care

"Personally for me my hospital stay was a good experience. I was treated with respect and dignity at all times from all levels of staff and everybody was kind and supportive." "I went into CUH for treatment and had full confidence in the doctors and staff. I was discharged cured." "Wards should be single sex — it is most degrading & disrespectful to treat us in the way CUH has treated us."

"Yes, the toilets could have been much cleaner, 3 toilets to accommodate the volume of patients going through A&E every day is not enough."

Other aspects of care: what do these results mean?

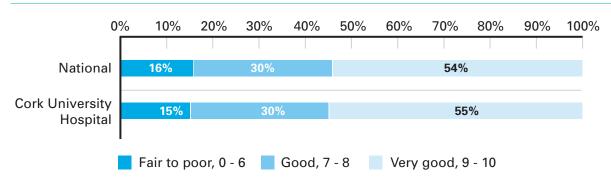
The ratings for the questions on other aspects of care were at, or slightly above, the national average. For example, most participants said they had confidence and trust in hospital staff. The majority of patients gave positive ratings of bathroom cleanliness, although, in their comments, some said that improvements were necessary.

Overall experience

Respondents were asked to rate their overall hospital experience on a scale from 0 to 10, with 10 being the most positive experience, and 0 the most negative experience. 55% of participants from Cork University Hospital rated their care as very good, slightly above the national figure of 54%.

Figure 13 compares the average overall rating of hospital experience for Cork University Hospital with the national average.

Figure 13 Overall rating of hospital experience for Cork University Hospital and nationally



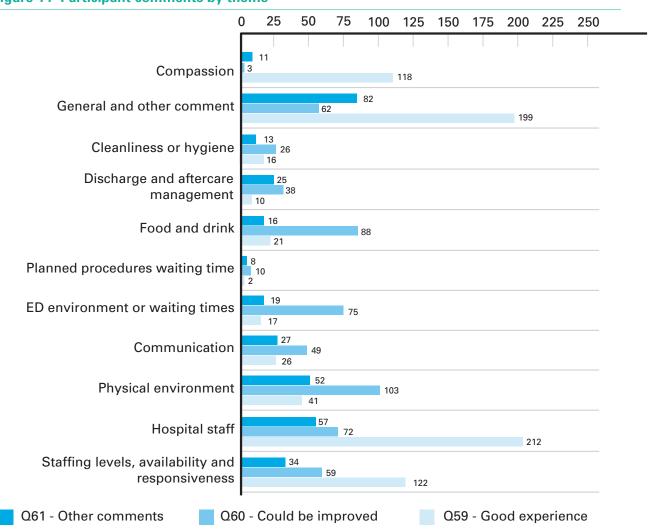
In their own words: analysis of patients' comments

The last three questions (questions 59-61) of the survey asked patients to provide additional information, in their own words, on their experiences in hospital. These free-text questions allowed people to give a more in-depth description of specific aspects of their care. It also allowed them to talk about various things (good or bad) that could not be captured by the structured questions. In total, 1,713 comments were received from patients of Cork University Hospital in response to the free-text questions in the 2018 survey.

Figure 14 shows the breakdown of participant comments by theme for each of the three open-ended questions. Q59 asked participants what was particularly good about their hospital care, Q60 asked participants what could be improved, and Q61 asked participants for any other comments or suggestions.

For Q59, most of the comments related to the 'hospital staff' and 'general comment' themes. For Q60, most comments related to the 'physical environment', and to 'food and drink'. Finally, most responses to Q61 were about hospital staff, or related to the 'general and other comment' theme.

Figure 14 Participant comments by theme



Conclusion

What were patients' experiences of hospital care in Cork University Hospital in May 2018?

The majority of patients in Cork University Hospital said they had a positive overall experience at the hospital. 85% of patients at the hospital said they had a 'good' or 'very good' experience, compared with 84% nationally.

Cork University Hospital received below-average scores on admissions but above-average scores on examinations, diagnosis and treatment. Participant ratings of care were generally slightly more positive than those received in 2017, particularly in relation to discharge or transfer.

A number of areas of good experience were apparent. For example, most patients said they could access emotional support when they needed it. The majority of patients had confidence and trust in hospital staff, and were generally treated with respect and dignity.

Several areas needing improvement were identified. Patient ratings of respect and dignity in the emergency department were below average, while some patients said they did not always receive clear answers from nurses or enough assistance to eat their meals.

These three areas for improvement are of particular importance as they are strongly related to patients' ratings of their overall experience. For example, patients who felt that they were not treated with respect and dignity while in the emergency department were less likely to give a positive rating of their overall experience.

The findings of the 2018 survey will be used to help Cork University Hospital improve the experiences of patients in the hospital, continuing the good work done in response to the 2017 survey.

Appendix 1: Areas of good experience and areas needing improvement

Improvement map

The map below helps to identify areas of good experience and areas needing improvement in Cork University Hospital. Questions that have a strong relationship with overall ratings of experience (Q52) are selected as areas of good experience or areas needing improvement respectively.

Three areas of good experience (highlighted in blue) and three areas needing improvement (highlighted in purple) are identified on the map.

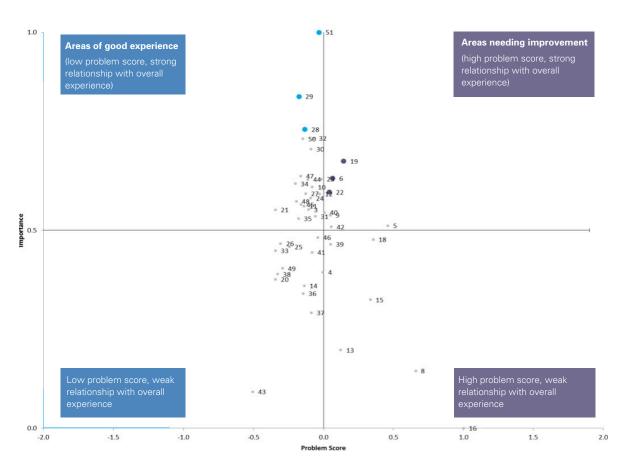
Interpreting the improvement map

The **importance** of the relationship between each question and overall experience is given on the vertical axis as a number between 0 and 1, with 1 being the strongest possible relationship.

Problem scores show the difference (positive or negative) between the national average and a question score (out of 10). These are given on the horizontal axis.

Questions that have high problem scores and are important to patients' overall experiences appear in the **top right section** of the map — these are **areas needing improvement** in this hospital.

Questions that have low problem scores and are important to patients' overall experiences can be found in the **top left section** of the map — these are **areas of good experience** in this hospital.



References

- Singer AJ, Thode Jr HC, Viccellio P, Pines JM. The Association Between Length of Emergency Department Boarding and Mortality. Academic Emergency Medicine. 2011;18(12):1324-9.
- 2. Plunkett PK, Byrne DG, Breslin T, Bennett K, Silke B. Increasing wait times predict increasing mortality for emergency medical admissions. European Journal of Emergency Medicine. 2011;18(4):192-6.