



National Patient Experience Survey 2018

Galway University Hospitals

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An Roinn Sláinte Department of Health









Galway University Hospitals

2018 survey results

Overall experience



Structure and content of this report

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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%. 942 patients from Galway University Hospitals 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 <u>www.patientexperience.ie/improvements-in-care</u>.

What were the main findings for Galway University Hospitals?

The majority of participants from Galway University Hospitals reported positive experiences in hospital. 85% of participants said they had 'good' or 'very good' overall experiences, compared with 84% nationally. The hospitals scored above the national average for questions on examinations, diagnosis and treatment, but below the national average for admissions.

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, many patients said that they had confidence and trust the staff that treated them, while most patients said that staff did everything they could to manage their pain. In addition, the majority of patients said that they received enough information to manage their condition after discharge.

There were also several areas needing improvement. A number of patients felt that they were not treated with respect and dignity, both in the emergency department and in other areas of the hospitals. Some patients also said that their home or family situation was not taken into account when planning their discharge.

Patient experience ratings were generally similar to those found in the 2017 survey. The findings of the 2018 survey will help Galway University Hospitals to improve patients' experiences of care in the hospitals.

Hospital and participant profile

Galway University Hospitals consists of University Hospital Galway and Merlin Park University Hospital, both located in Galway city. There were 640 inpatient beds available in the hospitals during the survey period of May 2018.

1,878 people discharged from Galway University Hospitals during the month of May 2018 were invited to participate in the survey. 942 people completed the survey, achieving a response rate of 50%. 51.6% of participants were male and 48.4% were female. 589 respondents (62.5%) said that their stay in hospital was an emergency. Figure 1 below provides information on the respondents who took part in the survey from Galway University Hospitals.

Participant Participant Admission gender age route 100 90 80 70 62.5% 60 51.6% 48.4% 50 40 37.5% 34.5% 27.9% 30 16.0% 20 14.3% 7.2% 10 Emergency Non-emergency Fernales gender 0.0% 0 16.35 36,00 66.00 Males 5 °[×]

Figure 1 Participants from Galway University Hospitals 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 Galway University Hospitals are:

Other aspects of care	761 (84%) of the 909 people who answered this question said that they						
Confidence and trust in hospital staff Q29	always had confidence and trust in hospital staff that treated them.						
Care on the ward	660 people (84% of those who answered Q32) said that staff						
Pain management Q32	definitely did everything they could to manage their pain.						
Discharge or transfer	682 people (86% of those who answered Q50) said that they						
Information on how to manage a condition Q50	were definitely or to some extent given sufficient information on how to manage their condition after discharge.						

The areas needing improvement in Galway University Hospitals are:

Admission	Of the 524 people who answered this question, 127 (24%) said that they						
Respect and dignity in the emergency department Q6	were not, or were only sometimes, treated with respect and dignity in the emergency department.						
Discharge or transfer	244 people (41% of those who answered this question) said that their						
Consideration of home/family situation Q47	home or family situation was not, or was only to some extent, taken into account when planning their discharge.						
Other aspects of care	141 people (16%) said that they were not, or were only sometimes, treated						
Respect and dignity Q51	with respect and dignity while in the hospitals.						

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 <u>www.patientexperience.ie</u>.

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



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 <u>www.patientexperience.ie</u>.

Changes in patient experience over time

There were no significant changes in patient experience from the 2017 survey. 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.





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



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



* Denotes a statistically significant difference from the national average.

Figure 4 Galway University Hospitals 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 Galway University Hospitals, 159 respondents (32%) said they were admitted to a ward within six hours of arriving at the emergency department, while 256 respondents (51%) reported waiting between six and 24 hours. 84 respondents (17%) said that they waited 24 hours or more before being admitted to a ward in Galway University Hospitals, with 14 of these saying they waited more than 48 hours.

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



Figure 5 Patient-reported emergency department waiting times for Galway University Hospitals 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-acutehospitals-metadata.pdf.

The patient voice: what patients said about admissions

"I was one of the unfortunate 'trolley number' placed on a trolley beside a door in a ward where nursing staff constantly apologised for. The nursing staff were courteous, kind, caring and worked so hard."

"The time in A&E. Terrible delays. No one should have to wait 7 hours plus for a blood test. Then wait another 12 hours for a bed. Scandalous in 2018!!" "A&E is overcrowded, patients on trolleys and chairs all over A&E. There needs to be more beds available in UHG and more staff to operate the extra beds."

"I was surprised at the high level of care and attention I was given in what were obviously overcrowded conditions in A&E and also in the ward (less overcrowded) afterwards."

Admissions: what do these results mean?

Patient ratings of admission to Galway University Hospitals were lower than the national average, but similar to the hospitals' 2017 score. Most patients said they were given clear answers and explanations by staff in the emergency department. A number of patients said they were not given enough privacy, and were not always treated with respect and dignity. 32% 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 hospitals' overall score for care on the ward with the national average. Figure 7 shows the hospitals' scores for questions on this stage of care.



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



	0.0	1.0	2.0	3.0	4.0	5.0	6.0	7.0	8.0	9.0	10.0
Q9. Were you given enough privacy while you were on the ward?	e				8.7					l	
Q10. In your opinion, how clean was the hospital room or ward that you were in?					9.1						
Q12. When you needed help from staff getting to the bathroom or toilet, did you get it in time?					8.6						
Q13. Did staff wear name badges?					8.7						
Q14. Did the staff treating and examining you introduce themselves?					8.8						
Q15. How would you rate the hospital food?					6.3						
Q16. Were you offered a choice of food?					8.7						
Q18. Were you offered a replacement meal at another time?					6.8						
Q19. Did you get enough help from staff to eat your meals?	0				7.7						
020. When you had important questions to ask a doctor, did you get answers that you could understand?					8.5						
022. When you had important questions to ask a nurse, did you get answers that you could understand?					8.8						
023. If you ever needed to talk to a nurse did you get the opportunity to do so?	,				8.7						
028. Did you find someone on the hospita staff to talk to about your worries and fears?	al				6.8						
032. Do you think the hospital staff did everything they could to help control you pain?	r				9.0						

Figure 7 Galway University Hospitals scores for questions on care on the ward

Galway University Hospitals National

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

"Treatment received was 'first class'. All the staff were helpful and caring and thank God a good outcome for me as I went home having received the best of care." "The care I received from the nursing staff was A1. They are so dedicated and they never seem to stop being busy. We are so very fortunate; they are a credit to their vocation."

"Most of the nurses were good and kind but there were some who were not very helpful, especially to the elderly."

"On the food menu, could have a list of foods for the condition I had, as I required a stoma bag. Most of the food that was on the menu was not suitable for my condition not long after my operation. I believe this is an area that should be addressed."

Care on the ward: what do these results mean?

Galway University Hospitals received similar ratings of care on the ward to the national average, and also to last year's survey. Most patients were happy with the cleanliness of rooms and wards, as well as how staff managed their pain. A number of patients rated the food poorly, and said that they did not always get enough help to eat their meals.

Examinations, diagnosis and treatment



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

Figure 8 Comparison of Galway University Hospitals 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 Galway University Hospitals scores for questions on examinations, diagnosis and treatment

	0.0	1.0	2.0	3.0	4.0	5.0	6.0	7.0	8.0	9.0	10.0
021. Did you feel you had enough time to discuss your care and treatment with a doctor?					7.8						
024. Were you involved as much as you wanted to be in decisions about your care and treatment?					8.0						
025. How much information about your condition or treatment was given to you?					8.2						
026. Was your diagnosis explained to you in a way that you could understand?					8.4						
Q30. Were you given enough privacy when discussing your condition or treatment?					8.1						
Q31. Were you given enough privacy when being examined or treated?					9.0						
Q33. Did a doctor or nurse explain the results of the tests in a way that you could understand?					8.2						
Q34. Before you received any treatments did a member of staff explain what would happen?					9.0						
Q35. Before you received any treatments did a member of staff explain any risks and or benefits in a way you could understand?					8.7						
Q36. Beforehand, did a member of staff explain the risks and benefits of the operation or procedure in a way you could understand?					8.8						
Q37. Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?					9.1						
Q38. Beforehand, were you told how you could expect to feel after you had the operation or procedure?					8.0						
Q39. After the operation or procedure, did a member of staff explain how the operation or procedure had gone in a way you could understand?					8.6						

Galway University Hospitals National

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

"Received excellent care from surgeon, his team, nurses & nurses' aides, including pre-op assessment. Was informed at all times of how operation would proceed, recovery & even physio was organised so promptly on my discharge. Couldn't possible find any fault in my treatment."

"I was in a 12 bed ward and when discussing my treatment. Nurses and doctors were not discreet and anyone in the ward could have heard. More discretion when discussing treatments." "Consultant very good. Visited to keep me informed along with his team a few times a day and to answer any questions."

"To a patient with no medical background I think medical jargon should (could) be explained in simple terms, by the doctors and in language the patient can understand. And also to spend a little more time with the patients. I understand too that they are very busy."

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

Ratings of examination, diagnosis and treatment were above the national average and the same as in last year's survey. Most patients had positive experiences of communication with doctors, and were given answers and explanations that they could understand. Some patients would have liked more time to discuss their care and treatment with a doctor.

Discharge or transfer

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



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



	0.0	1.0	2.0	3.0	4.0	5.0	6.0	7.0	8.0	9.0	10.0
Q40. Did you feel you were involved in decisions about your discharge from hospital?					7.5						
Q41. Were you or someone close to you given enough notice about your discharge?					8.0						
Q42. Before you left hospital, did the healthcare staff spend enough time explaining about your health and care after you arrive home?					7.7						
043. Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?					5.5						
Q44. Did a member of staff explain the purpose of the medicines you were to ta at home in a way you could understand?					8.1						
Q45. Did a member of staff tell you about medication side effects to watch for when you went home?					5.5						
Q46. Did a member of staff tell you about any danger signals you should watch for after you went home?					5.7						
Q47. Did hospital staff take your family or home situation into account when planning your discharge?					6.8						
Q48. Did the doctors or nurses give your family or someone close to you all the information they needed to help care for you?					6.5						
Q49. Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?					7.4						
Q50. Do you feel that you received enough information from the hospital on how to manage your condition after your discharge?					7.2						

Figure 11 Galway University Hospitals scores for questions on discharge or transfer

Galway University Hospitals

National

The patient voice: what patients said about discharge or transfer

"The diabetic nurse was very helpful and has continued with phone calls checking up on me to get my insulin right." "Decisions on discharge. One department wanted me to go to physical rehab, other to step down care, when rehab was never assessed after 5 days delay I lost my step down place and no one bothered to inform community nursing unit. I was left a further 5 days in hospital."

"More organisation on the day of discharge. (had to look for wheelchair on another floor) — if possible a porter to assist, this would have made the discharge process less stressful."

"The medical team carried out a series of tests to try and determine my diagnosis. I was taken very good care of by both doctors and nurses. Before being discharged the matron nurse explained clearly in 'layman's terms' my condition and how to manage it."

Discharge or transfer: what do these results mean?

Participant ratings for this stage of care were similar to the national average and to last year's survey. Most patients said that staff explained the purpose of medications they were to take at home. However, a number of patients said that potential side effects of medication were not explained.

Other aspects of care

Figure 12 shows the hospitals' scores for questions on this stage of care.



Figure 12 Galway University Hospitals scores for other aspects of care



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

"Everything was amazing — all staff very caring from the cleaning staff up to the consultant, if all staff were like the ones that treated me we would all be very lucky!"

"Give patients privacy to discuss their medical condition with staff A curtain pulled over in a cubicle is definitely not sufficient."

"This was the most positive hospital experience I have ever had and I have had numerous hospital admissions over the years. From the moment of my presenting for admission to discharge I was treated with dignity, kindness & care by ward staff, the theatre team and my consultant and his team." "It was upsetting to be in the corridor for so long before being put into a ward, there were drunk people, lots of disruption and noise. I was [...] in some discomfort and distress and would have appreciated being moved to a room earlier, I was unable sleep or rest for the duration of this part of my stay at my age."

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. Most participants said they were treated with respect and dignity, and had confidence and trust in the staff that treated them. Despite Q27 scoring above the national average, a number of patients said that their families were not given sufficient opportunities to talk to a doctor.

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. 58% of participants from Galway University Hospitals rated their care as very good, slightly above the national figure of 54%.

Figure 13 compares the average overall rating of hospital experience for Galway University Hospitals with the national average.



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 hospitals. 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, 1,999 comments were received from patients of Galway University Hospitals 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 'general and other comment' and 'hospital staff' themes. For Q60, most comments related to the 'physical environment'; and 'hospital staff'.



Figure 14 Participant comments by theme

Conclusion

What were patients' experiences of hospital care in Galway University Hospitals in May 2018?

The majority of patients said that they had positive overall experiences in Galway University Hospitals. 85% of patients said they had a 'good' or 'very good' experience, compared with 84% nationally.

Galway University Hospitals received a below-average score for the admissions stage of care and an above-average score for examinations, diagnosis and treatment. Participant ratings of care were generally similar to those received in 2017.

A number of areas of good experience were apparent. For example, most patients had confidence and trust in the staff that treated them. In addition, the majority of participants felt that staff did everything they could to manage their pain. Furthermore, most patients said that they were given enough information to manage their condition at home.

Several areas needing improvement were identified. For example, a number of participants felt that they were not always treated with respect and dignity in the emergency department, and in the hospital as a whole. In addition, a number of patients said that their home or family situation was not taken into account when planning their discharge.

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 were less likely to give a positive rating of their overall experience.

The findings of the 2018 survey will be used to help Galway University Hospitals improve the experiences of patients in the hospitals.

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 Galway University Hospitals. 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

- 1. 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.