



# National Patient Experience Survey 2018

## Mercy University Hospital

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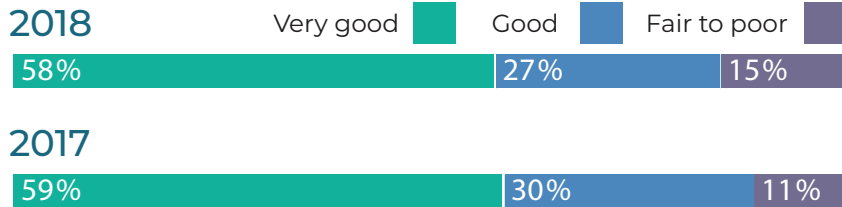
An Roinn Sláinte  
Department of Health



# Mercy University Hospital

2018 survey results

## Overall experience



response rate

## Areas of good experience



Respect and dignity



Confidence and trust in hospital staff



Information on how to manage a condition

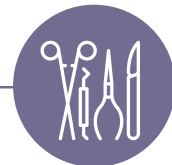
## Areas needing improvement



Clear answers from a nurse



Help from staff to get to the bathroom



Clear explanation of a condition or treatment in the ED

## The patient voice

"I cannot thank the staff enough for how they took care of me and explained everything to my family about my heart. The nurses in CCU were absolutely brilliant."



"My consultant — his attitude and his judgement. Certainly I did not feel I was treated with respect by him. Other doctors on the team were ok."

[www.patientexperience.ie](http://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%. 352 patients from Mercy 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](http://www.patientexperience.ie/improvements-in-care).

## What were the main findings for Mercy University Hospital?

The majority of participants from Mercy 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 performed significantly above the national average for care on the ward and discharge or transfer. Ratings of admissions and examinations, diagnosis and treatment were similar to the national average.

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, most patients had confidence and trust in hospital staff, and were treated with respect and dignity. In addition, a large number of patients said that they received sufficient information on how to manage their condition after discharge.

There were also several areas needing improvement. For example, some patients said that their condition was not explained in a way they could understand while in the emergency department. Patients did not always receive help from staff to get to the bathroom, and did not always get answers they could understand from nurses.

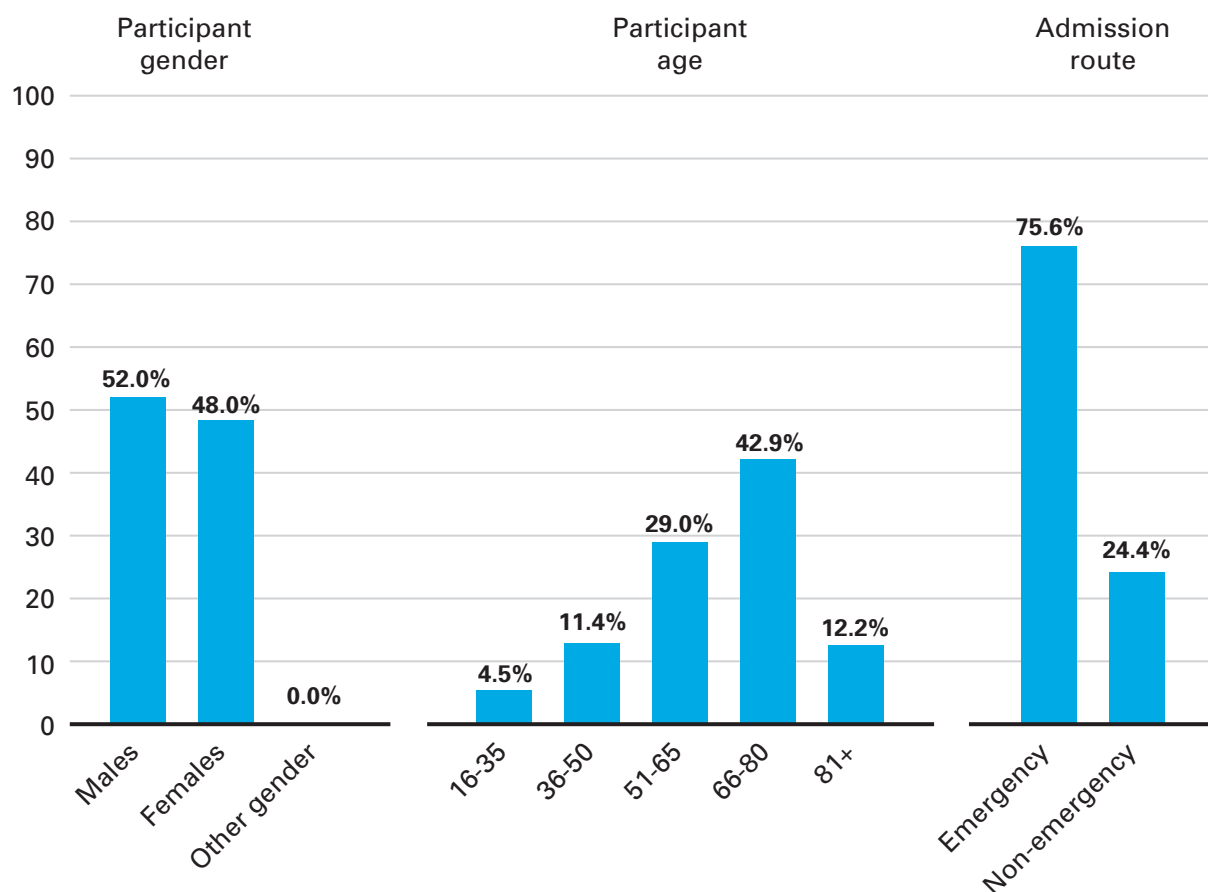
Some improvements in patient experience ratings were identified since the 2017 survey, though these improvements were not statistically significant. The findings of the 2018 survey will help Mercy University Hospital to improve patients' experiences of care in the hospital.

# Hospital and participant profile

Mercy University Hospital is a public acute hospital, located in Cork city. There were 200 inpatient beds available in the hospital during the survey period of May 2018.

702 people discharged from Mercy University Hospital during the month of May 2018 were invited to participate in the survey. 352 people completed the survey, achieving a response rate of 50%. 52% of participants were male and 48% were female. 266 respondents (75.6%) said that their stay in hospital was an emergency. Figure 1 below provides information on the respondents who took part in the survey from Mercy University Hospital..

**Figure 1 Participants from Mercy 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 Mercy University Hospital are:

<p><b>Other aspects of care</b></p> <p><b>Confidence and trust in hospital staff   Q29</b></p>	<p>295 people (87%) said that they always had confidence and trust in the hospital staff treating them.</p>
<p><b>Discharge or transfer</b></p> <p><b>Information on how to manage a condition   Q50</b></p>	<p>264 (87%) of the 303 people who answered this question said that they definitely or to some extent received enough information on how to manage their condition after discharge.</p>
<p><b>Other aspects of care</b></p> <p><b>Respect and dignity   Q51</b></p>	<p>298 people (87%) said that they were always treated with respect and dignity while they were in hospital.</p>

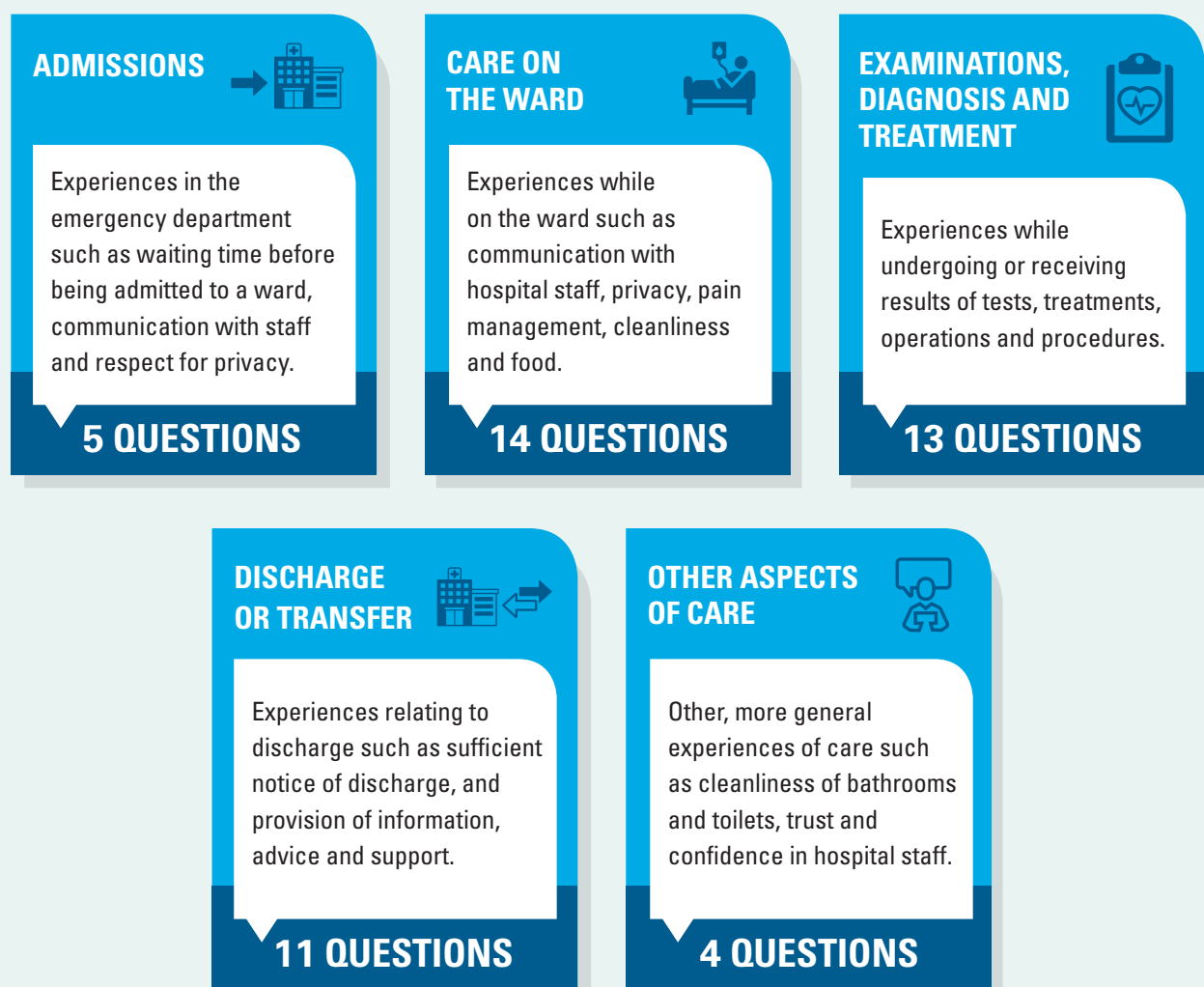
## The areas needing improvement in Mercy University Hospital are:

<p><b>Admissions</b></p> <p><b>Clear explanation of a condition or treatment in the emergency department   Q4</b></p>	<p>93 people (40%) said that an emergency department doctor or nurse did not explain, or only to some extent explained, their condition or treatment in a way they could understand.</p>
<p><b>Care on the ward</b></p> <p><b>Help from staff to get to the bathroom   Q12</b></p>	<p>Of the 205 people who answered this question, 44 (22%) said that they did not get, or only sometimes got, help to get to the bathroom when they needed it.</p>
<p><b>Care on the ward</b></p> <p><b>Clear answers from a nurse   Q22</b></p>	<p>82 people (26%) said that they did not get, or only sometimes got, answers they could understand from a nurse.</p>

# 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](http://www.patientexperience.ie).

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.

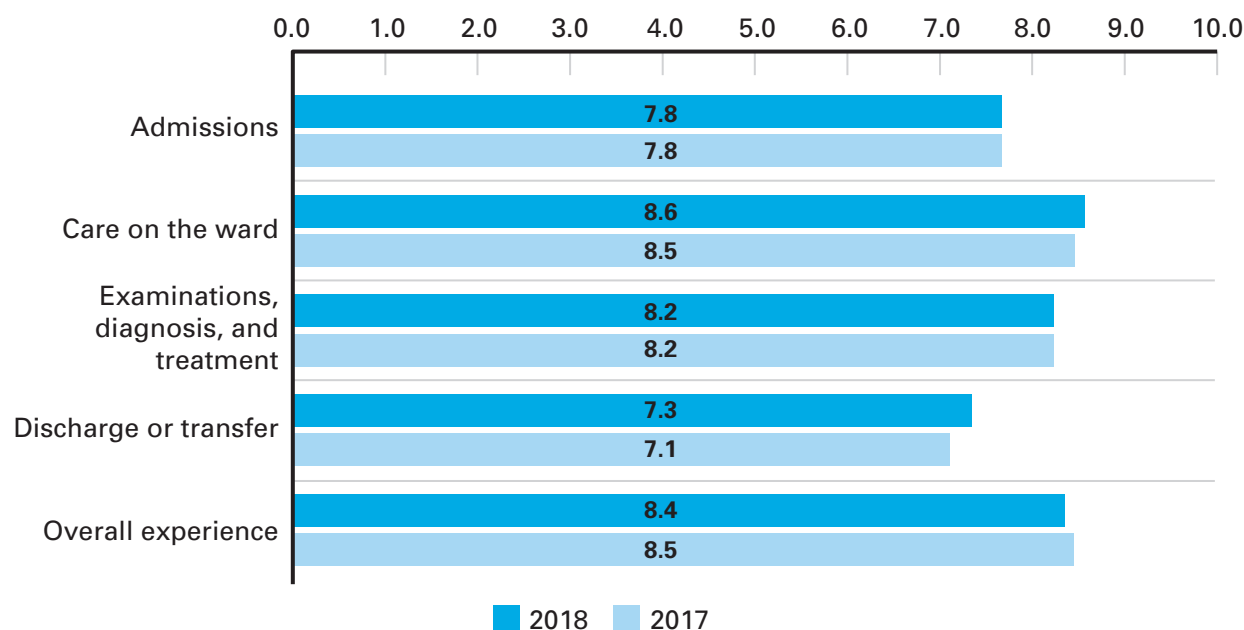
Statistical tests were carried out to examine if there were significant differences in patient experience between 2017 and 2018, as well as between a hospital and the national average. For further information on the analyses please consult Appendix 3 of the 2018 national report, available from [www.patientexperience.ie](http://www.patientexperience.ie).

## Changes in patient experience over time

Participants' average rating of their overall experience largely remained the same in 2018 as in 2017. There were some small changes in ratings but none of these changes were statistically significant. 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 scores<sup>1</sup> for Mercy 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

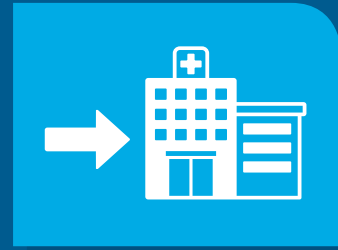
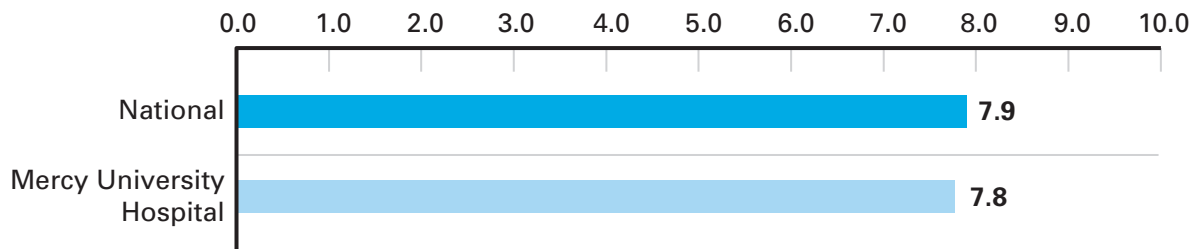
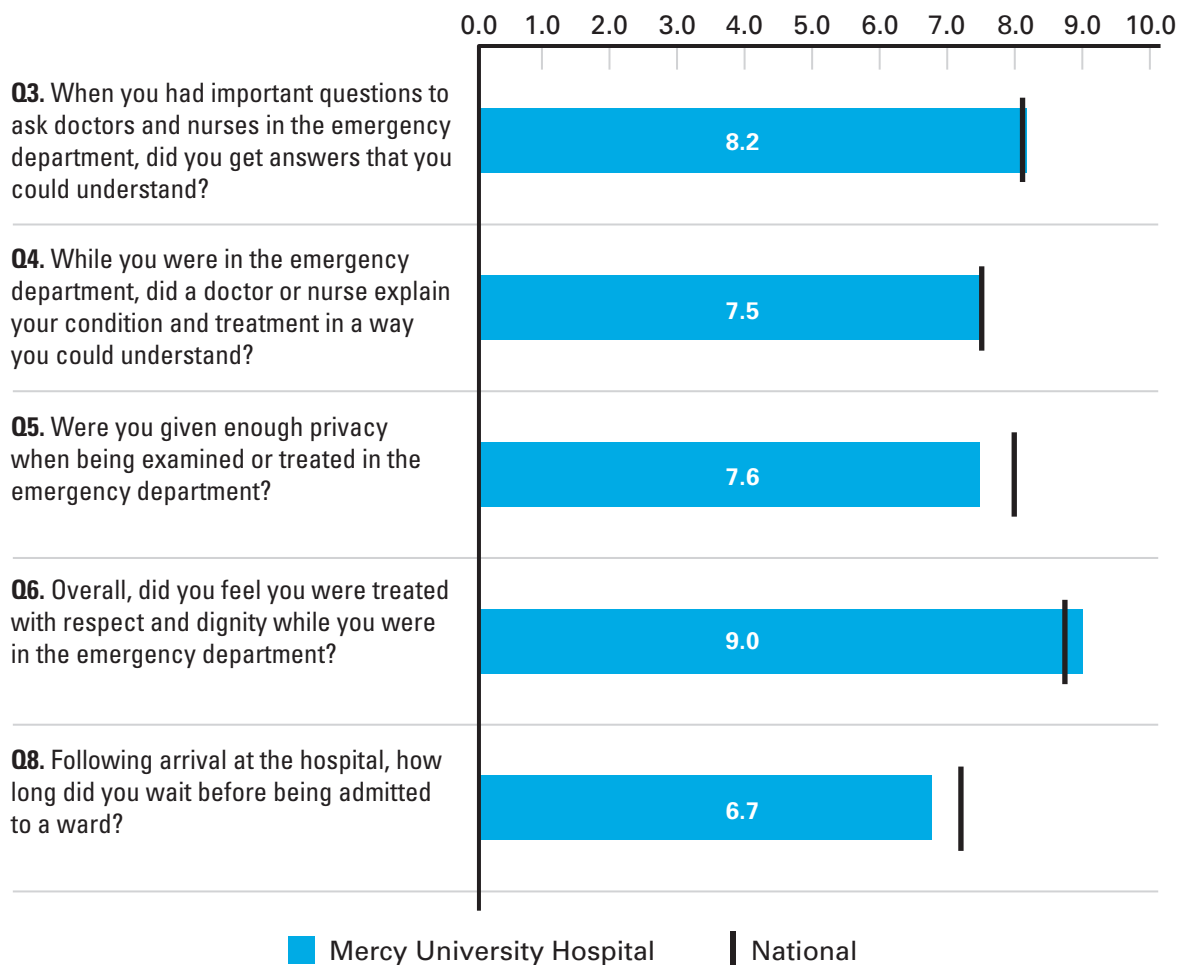


Figure 3 compares the hospital's overall score for admissions with the national average. Figure 4 shows the hospital's scores for questions on this stage of care.

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



**Figure 4 Mercy University Hospital scores for questions on admissions**



## Emergency department waiting times<sup>2</sup>

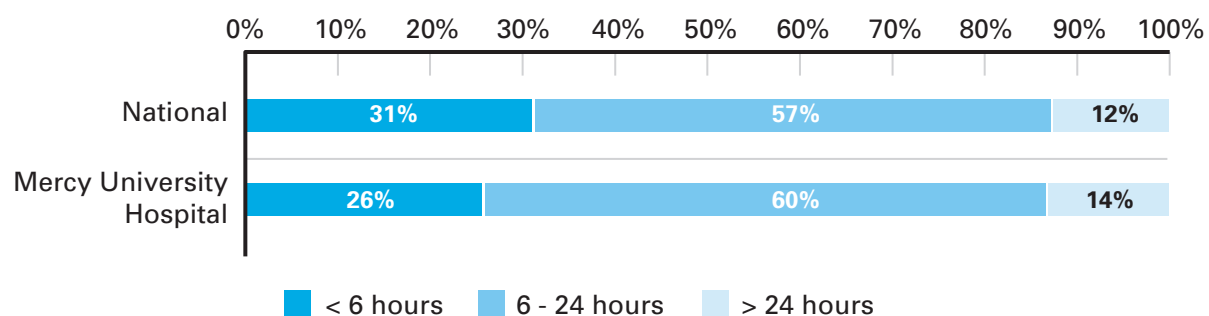
The HSE sets targets for the performance of acute hospitals, including targets on waiting times in emergency departments, such as:

- 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 Mercy University Hospital, 60 respondents (26%) said they were admitted to a ward within six hours of arriving at the emergency department, while 142 respondents (60%) reported waiting between six and 24 hours. 33 respondents (14%) reported waiting 24 hours or more before being admitted to a ward in Mercy University Hospital, with 8 of these saying they waited more than 48 hours.

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

**Figure 5 Patient-reported emergency department waiting times for Mercy 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/performance-reports/2018-acute-hospitals-metadata.pdf>.

## The patient voice: what patients said about admissions

"Very good care and treatment in A&E and also in high dependency ward."

"I was seen to very quickly in the accident and emergency department."

"Time spent in A&E was very uncomfortable/stressful and too long (9 hours)."

"A&E very short of space and very hard to see elderly patients on trolleys. Awful for sick patients and staff to cope with drug addicts and alcoholic patients making nuisances of themselves in the A&E — should have a special place for these people to be looked after."

### Admissions: what do these results mean?

Patient ratings of admission to Mercy University Hospital were similar to those in the 2017 survey and were similar to the national average. Patients generally said that they were treated with respect and dignity in the emergency department. However, the hospital performed below the national average on emergency department waiting times. 26% 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.

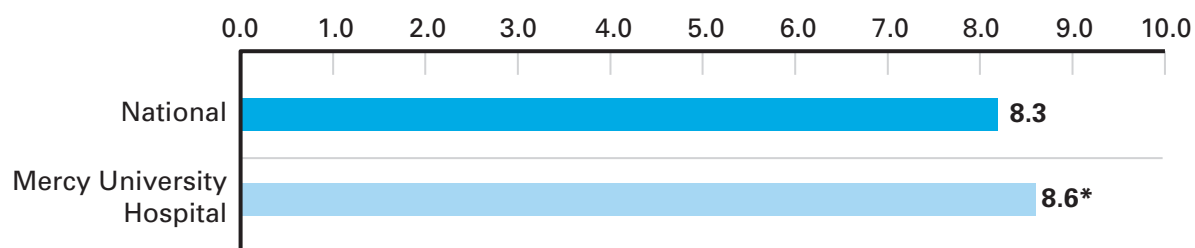
(1,2)

# 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.

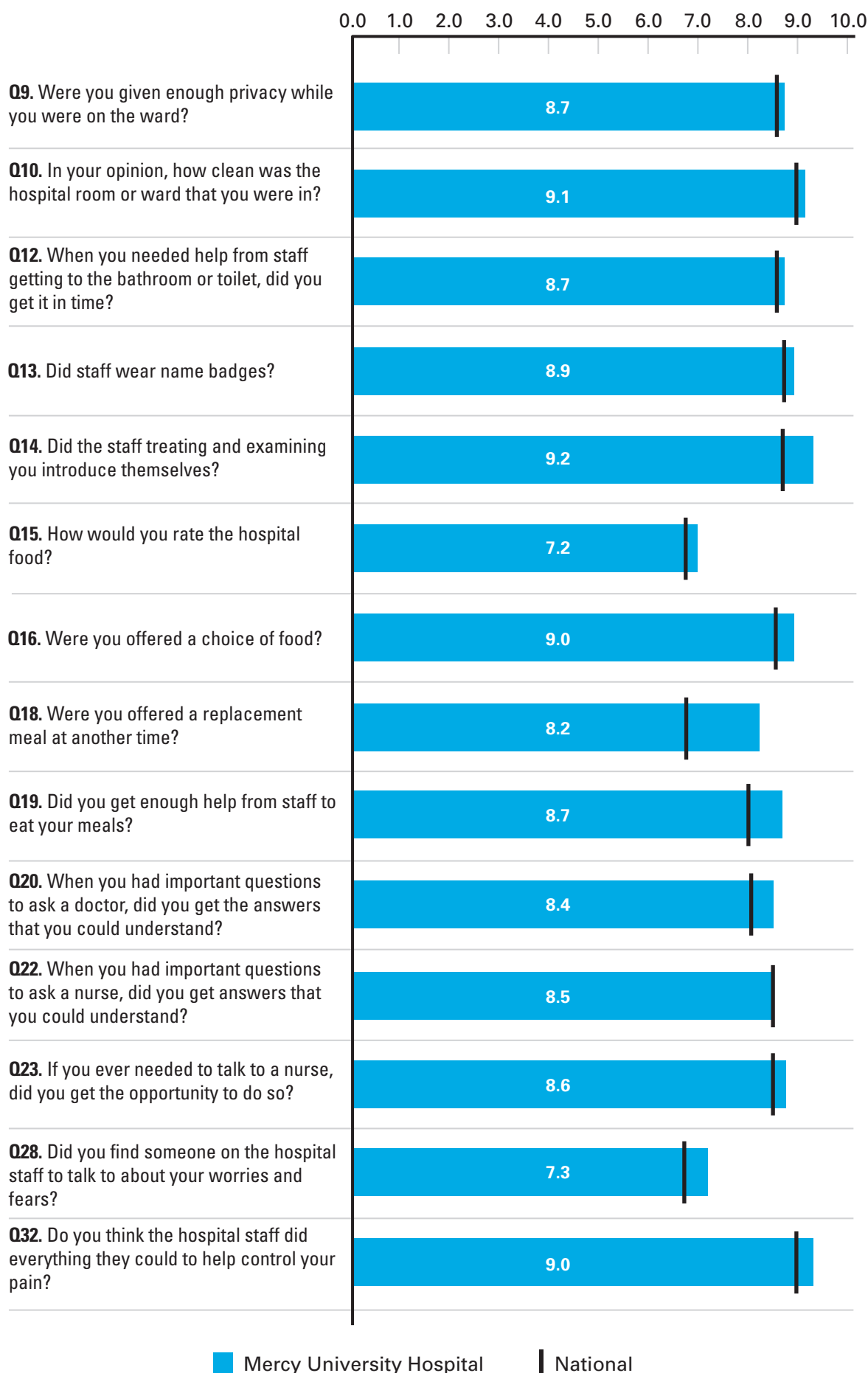


**Figure 6 Comparison of Mercy University Hospital with the national average score for care on the ward (out of a maximum of 10)**



\* Denotes a statistically significant difference from the national average.

**Figure 7** Mercy University Hospital scores for questions on care on the ward



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

"The staff were wonderful — very professional, courteous, friendly and helpful. Food was great! Not good but great — better than a lot of restaurants."

"Excellent care from all staff — doctors, nurses, care assistants, kitchen, porter & security — very friendly & caring. Excellent sense of being cared for in hospital. Hospital food excellent. Medical care second to none."

"I was on a total fat free diet. Kitchen staff (attendants) not aware of this; communication between nursing staff and medical staff should be improved."

"Most of the staff were empathetic & communicated well: some however did not engage with me while checking BP, monitors etc."

### Care on the ward: what do these results mean?

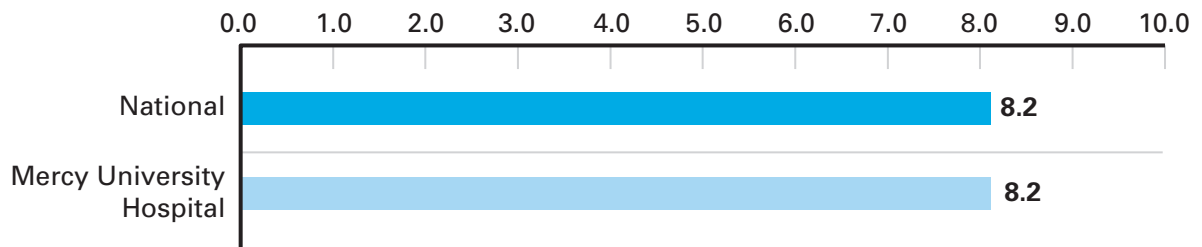
Mercy University Hospital received significantly higher than average ratings for this stage of care, and similar to those achieved in 2017. Patients generally had positive experiences of cleanliness and food in the hospital. However, some patients said that they did not receive clear answers from nurses.

# Examinations, diagnosis and treatment



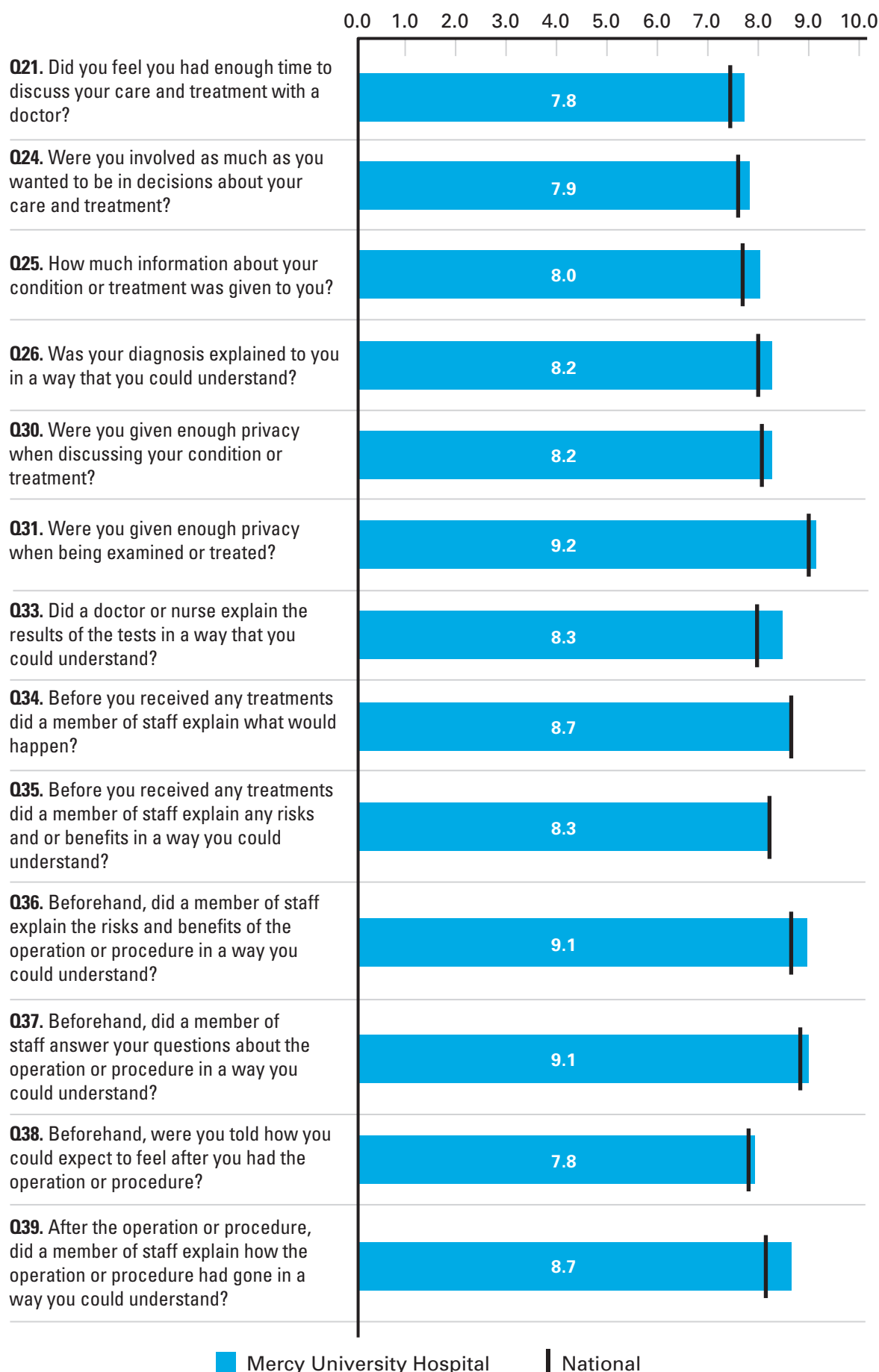
Figure 8 compares the hospital's overall score for examinations, diagnosis and treatment with the national average. Figure 9 shows the hospital's scores for questions on this stage of care.

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





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



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

"The doctors & staff were very nice & explained everything to my mam & family."

"My consultant — his attitude and his judgement. Certainly I did not feel I was treated with respect by him. Other doctors on the team were ok."

"The surgeon, anaesthetist and staff were most helpful and informative."

"Yes a lady across from me was given bad news; I found that more privacy was needed. I was so emotional during my stay thinking of that poor woman being told such horrific bad news while on her own and everyone in the ward had to listen to it."

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

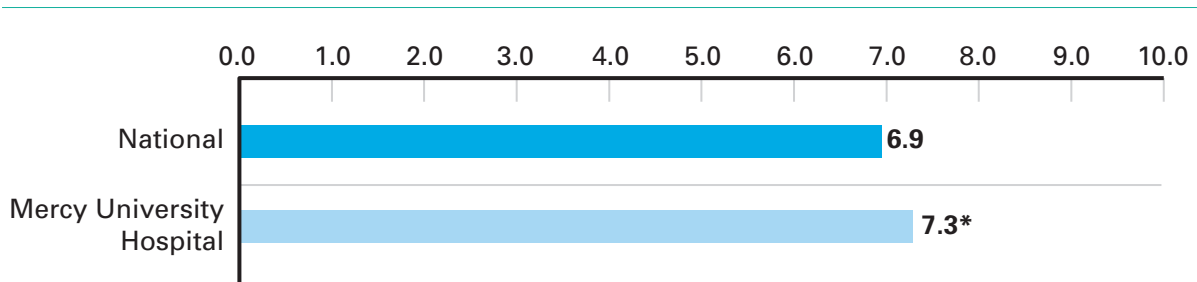
Ratings of examination, diagnosis and treatment were similar to the hospital's 2017 score and to this year's national average. Patients generally had positive experiences of communication with staff in relation to operations and procedures they were to undergo.

# 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.

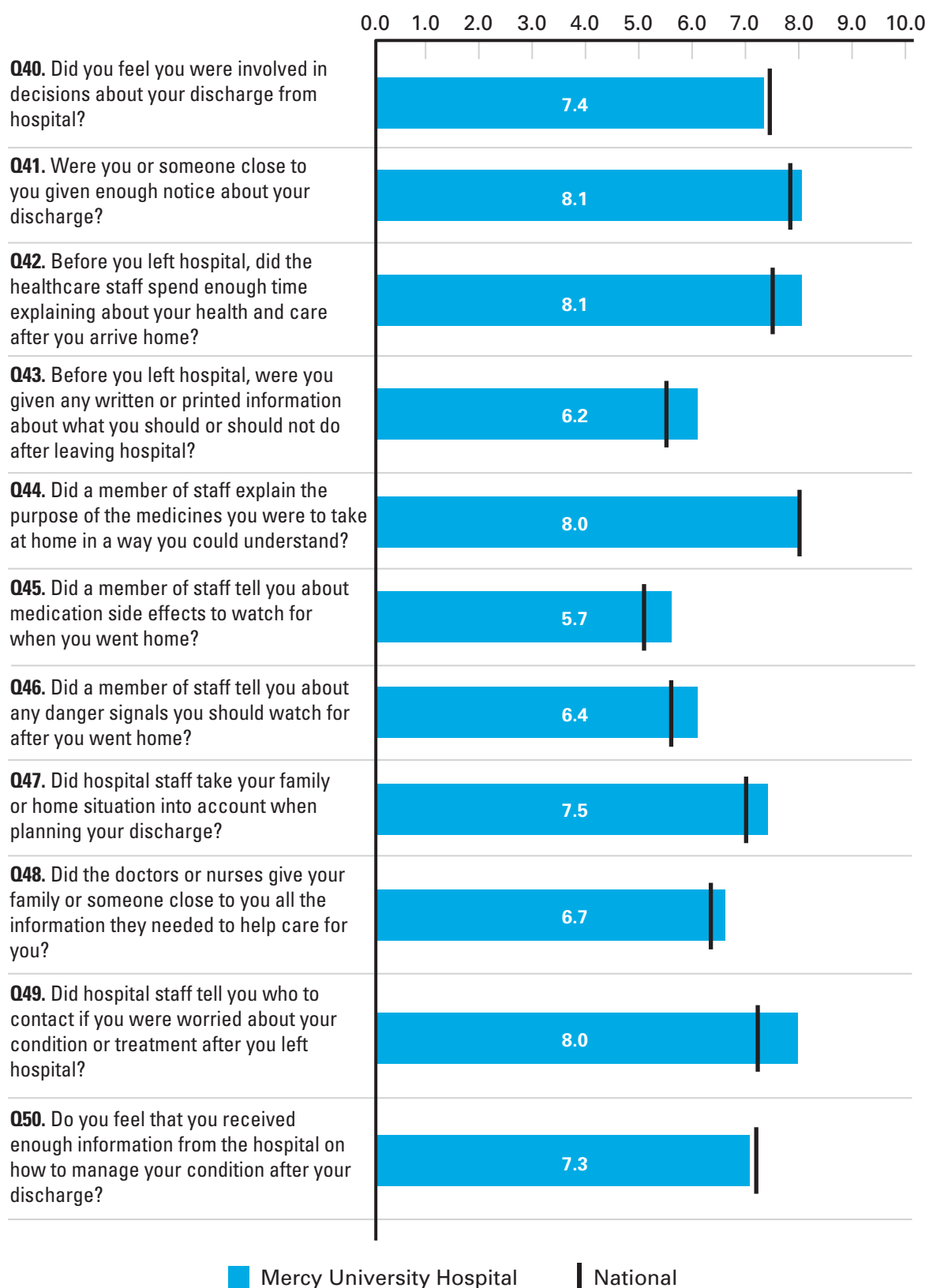


**Figure 10 Comparison of Mercy University Hospital with the national average score for discharge or transfer (out of a maximum of 10)**



\* Denotes a statistically significant difference between 2017 and 2018.

**Figure 11 Mercy University Hospital scores for questions on discharge or transfer**



## The patient voice: what patients said about discharge or transfer

"The consultant spoke to me both before and after my procedure. Junior doctors checked on me regularly. I had 3 visits from 6pm after procedure to 3pm next day when I was discharged."

"I have been in and out of the Mercy Hospital since my [condition name] diagnosis in Jan 2017. The care I received on each visit was brilliant. My initial surgery was very lengthy and complicated and the aftercare was top class."

"I would have preferred if I was kept in until the effect of the change in my medication kicked in."

"The discharge — not kept in hospital long enough after big surgery."

### Discharge or transfer: what do these results mean?

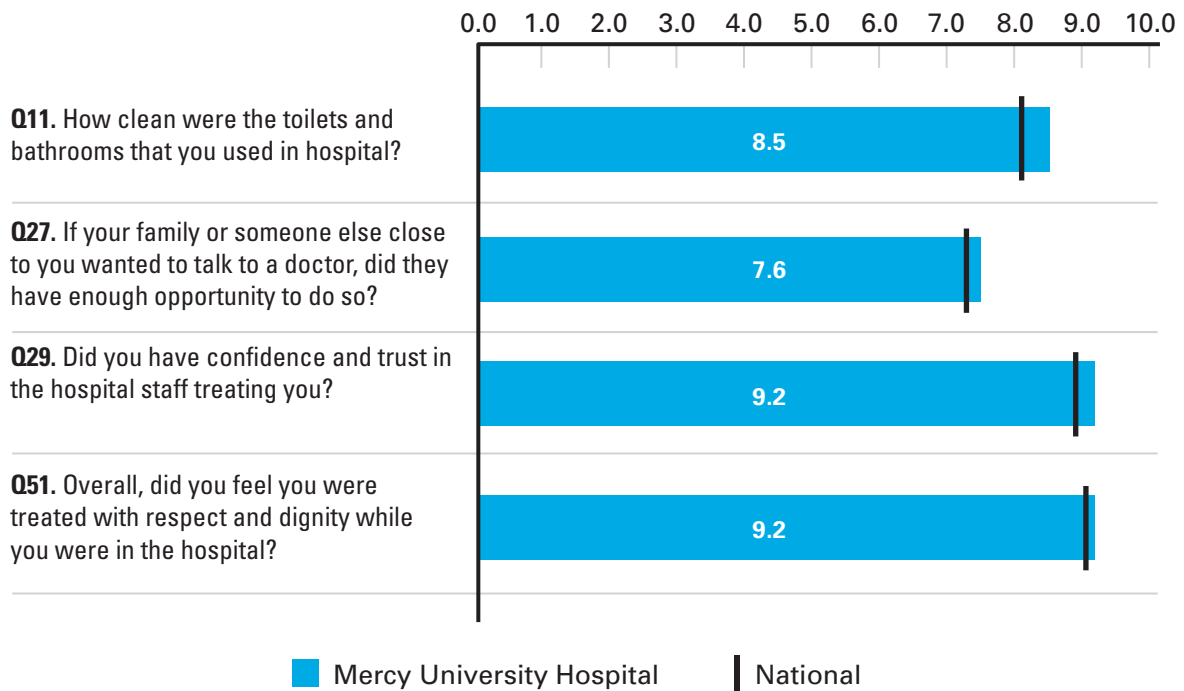
Mercy University Hospital received significantly higher ratings of discharge or transfer than the national average. Participant ratings for this stage of care were similar to those in the 2017 survey. Patients generally said they were given enough notice of their discharge. However, some said that they did not receive enough information on the potential side effects of medications. Nonetheless, the hospital performed above average in this area.

# Other aspects of care



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

**Figure 12 Mercy University Hospital scores for other aspects of care**



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

"I cannot thank the staff enough for how they took care of me and explained everything to my family about my heart. The nurses in CCU were absolutely brilliant."

"Very helpful and reassuring doctors and nurses."

"Some of the non-nursing staff (2 in particular) did not wear name tags and did not treat me with dignity or respect."

"I did not have trust or confidence in my consultant."

### Other aspects of care: what do these results mean?

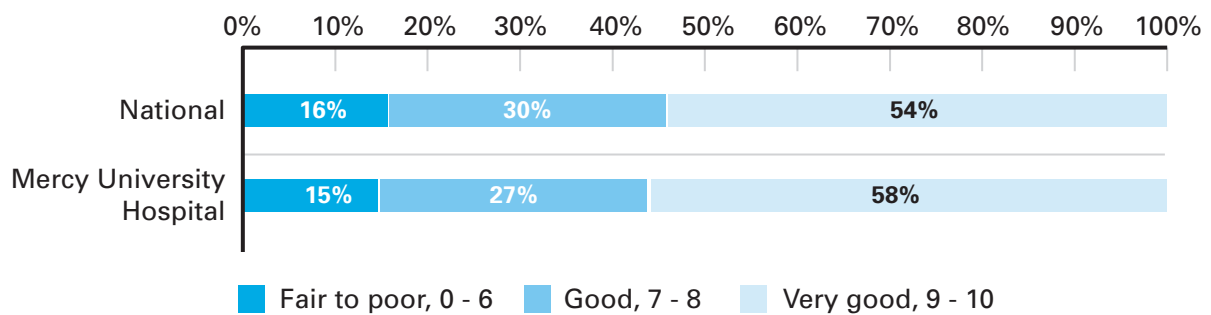
The ratings for the questions on other aspects of care were at, or slightly above, the national average. Most patients said that they were treated with respect and dignity and had confidence and trust in hospital staff. Some patients said that their families did not have sufficient opportunities to talk 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 Mercy 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 Mercy University Hospital with the national average.

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





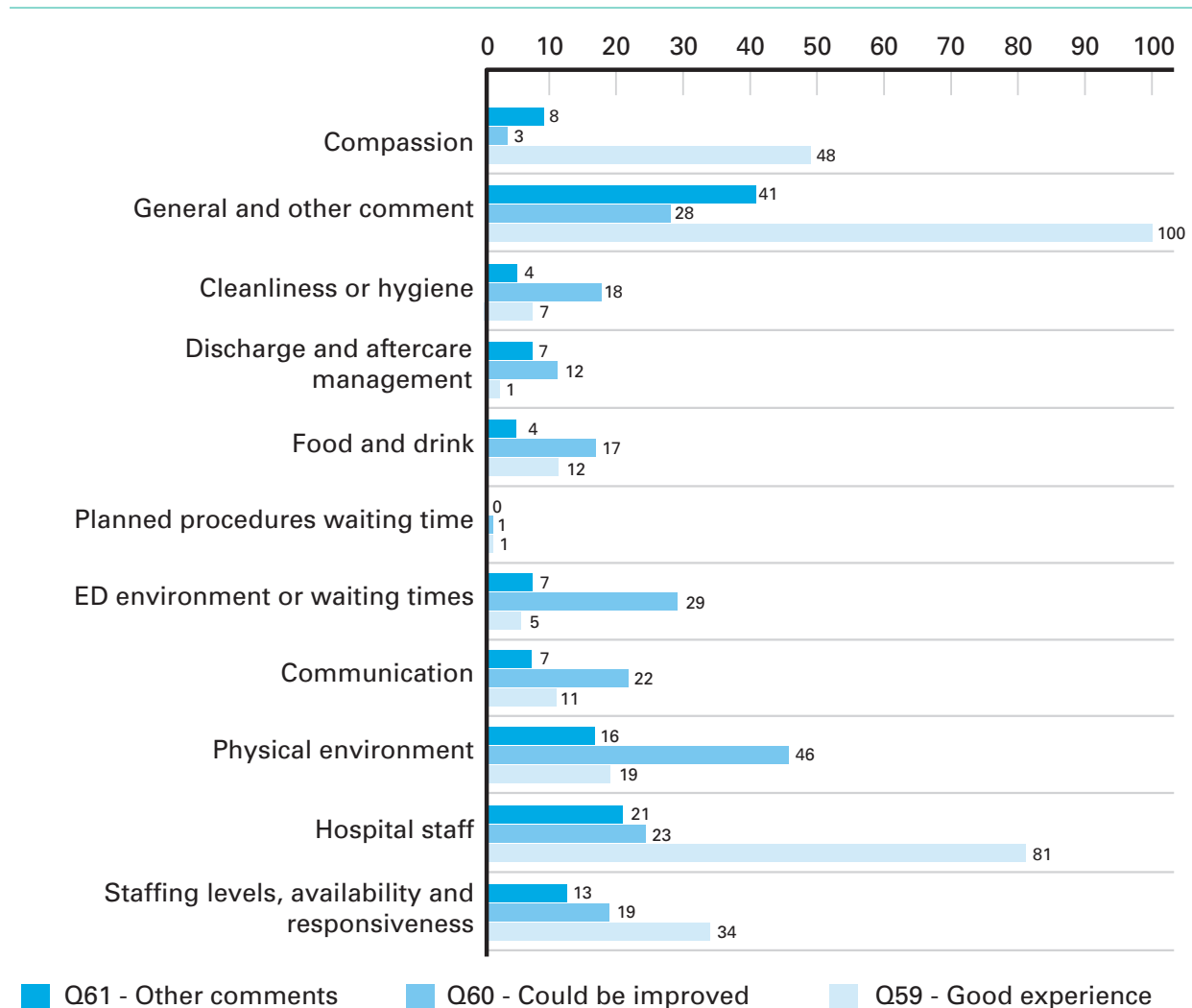
# In their own words: analysis of patients' comments

The last three questions (questions 59-61) of the survey asked patients to provide additional information, in their own words, on their experiences in 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, 665 comments were received from patients of Mercy 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 about what was particularly good about their hospital care, Q60 asked participants about 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 and other comment' themes. For Q60, most comments related to the 'ED environment or waiting times'.

**Figure 14 Participant comments by theme**



# Conclusion

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

Most participants said they had a positive overall experience in Mercy University Hospital. 85% of patients at the hospital said they had a 'good' or 'very good' experience, compared with 84% nationally. Participant ratings of care were similar to those received in 2017.

Mercy University Hospital received significantly higher scores than the national average for two stages of care — care on the ward and discharge or transfer.

Several areas of good experience were identified. For example, most patients had confidence and trust in hospital staff, and were treated with respect and dignity. In addition, a large number of patients said that they received sufficient information on how to manage their condition after discharge.

There were also several areas needing improvement. Some patients said that, while in the emergency department, their condition was not explained in a way they could understand. Furthermore, patients did not always receive help from staff help to get to the bathroom, and did not always get answers they could understand from nurses. These three areas for improvement are of particular importance as they are strongly related to patients' ratings of their overall experience.

The findings of the 2018 survey will be used to help Mercy 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 Mercy 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.

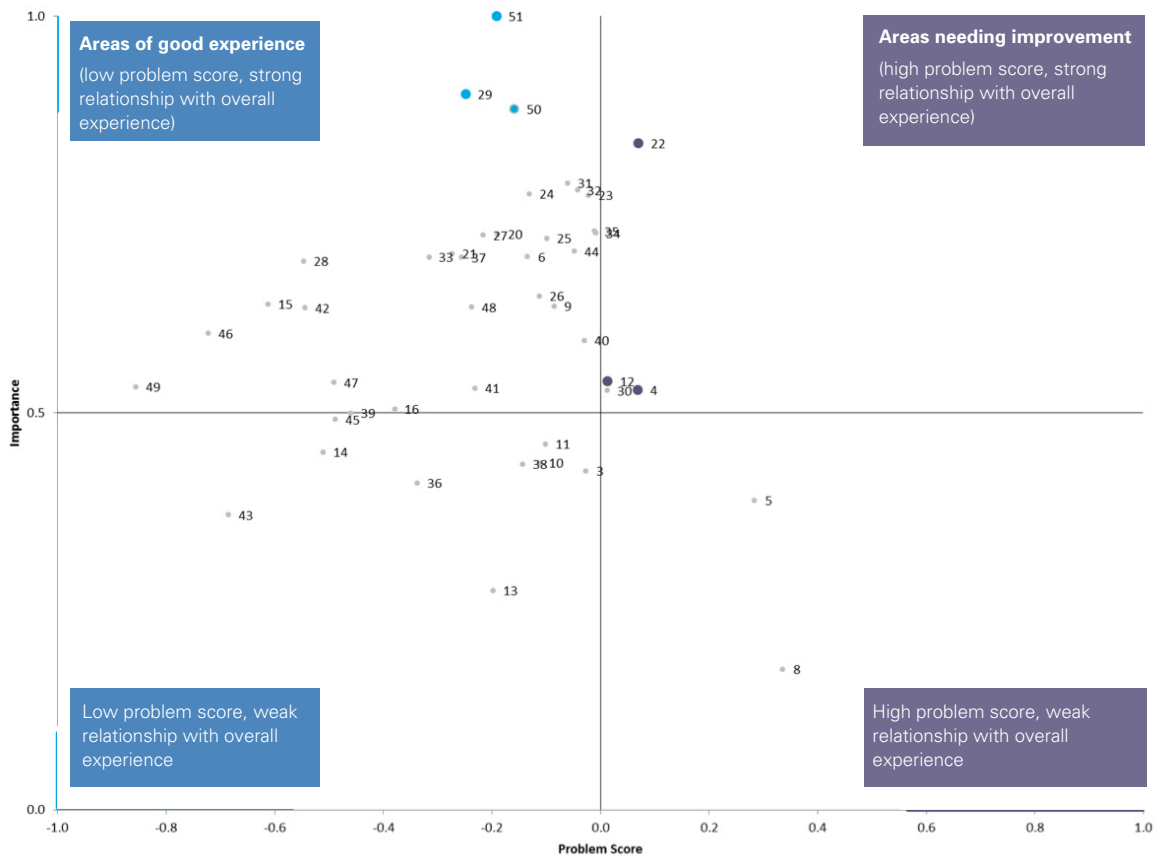
### Interpreting the improvement map

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

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.