



National Patient Experience Survey 2017

Our Lady's Hospital, Navan

We're committed to excellence in healthcare

Feidhmeannacht na Seirbhíse Sláinte Health Service Executive







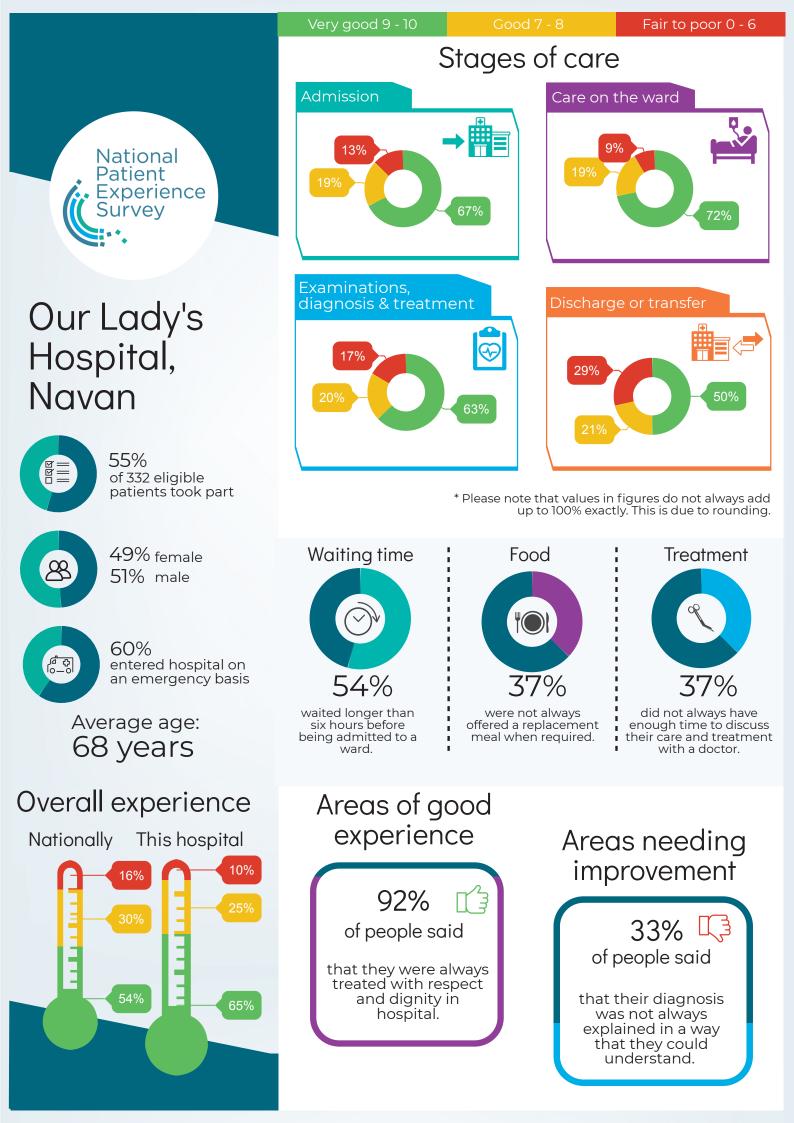
Thank you!

Thank you to the people who participated in the National Patient Experience Survey 2017, and to their families and carers. Without your overwhelming support and participation the survey would not have been possible. The survey ensures that your voice will be heard by the people who can change and improve healthcare in Ireland.

By putting the voice of the patient at the centre of acute healthcare, we can make sure that the needs and wishes of the people who matter most are met. The survey will be repeated annually in the future, which will allow us to explore how the patient voice has helped shape changes in acute healthcare.

Thank you to the staff of all participating hospitals for contributing to the success of the survey, and in particular for engaging with and informing patients while the survey was ongoing.

The survey was overseen by a national steering group, a delivery group and an advisory group. We acknowledge the direction and guidance provided by the members of these groups.



Structure and content of this report

Chapter 1: patients' experiences of acute hospital care in Our Lady's Hospital, Navan	4
This chapter presents the areas of good experience and the areas needing improvement in Our Lady's Hospital, Navan.	
About the National Patient Experience Survey 2017	4
Our Lady's Hospital, Navan profile	5
Purpose of the Report	5
Who took part in the survey?	6
What were the main findings?	7
Areas of good experience and areas needing improvement	8
Chapter 2: the patient journey through hospital	10
This chapter presents the findings of the 2017 survey.	
The stages of care along the patient journey	10
How to interpret the results for the stages of care	11
Admissions	14
Care on the ward	19
Examinations, diagnosis and treatment	24
Discharge or transfer	28
Other aspects of care	32
Chapter 3: overall experience	35
This chapter analyses patients' overall experiences in Our Lady's Hospital, Navan.	
Chapter 4: conclusion	36
This chapter summarises the findings of the 2017 survey.	
Appendices	38
Appendix 1: National Patient Experience Survey 2017 questions	
Appendix 2: Background to the National Patient Experience Survey Programme	
Appendix 3: Identifying areas of good experience and areas needing improvement	
Appendix 4: A technical note on analyses and interpretation	
Glossary	48

References

49



Chapter 1

Patients' experiences of acute hospital care in Our Lady's Hospital, Navan

About the National Patient Experience Survey 2017

TThe National Patient Experience Survey is a new national survey, asking people for feedback on their recent stay in a public acute hospital. This survey will run on an annual basis and is a partnership between the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health. The survey was developed with the involvement of Patient Focus, a patient advocacy organisation, in order to ensure that patients were central to the design and execution of the survey.

Nationally, 26,635 people were invited to participate in the first National Patient Experience Survey in 2017. In total, 13,706 people took part. The results outlined in this report reflect the experiences of patients who were discharged from Our Lady's Hospital, Navan during the month of May 2017. In total, 184 participants from Our Lady's Hospital, Navan took part in the survey.

The survey asked 61 questions, based on five stages of care along the patient journey in hospital: admissions; care on the ward; examinations, diagnosis and treatment; discharge or transfer; and other aspects of care. Three of the questions asked respondents for written comments about what was good about the care they received and what could be improved. The list of questions from the National Patient Experience Survey can be found in Appendix 1. It is important to note that patients did not always answer every question so there is variation in the number of responses to each question.

This survey is part of the National Patient Experience Survey Programme, which aims to help improve the quality and safety of healthcare services provided to people in Ireland. A more detailed background to the survey programme can be found in Appendix 2.

The National Patient Experience Survey values and seeks to represent the patient voice, which is a fundamental principle of patient-centred care. The survey acknowledges both positive and negative experiences, as told by the 184 people from Our Lady's Hospital, Navan. While thousands of people surveyed nationally said that they had a very good experience of acute hospital care, it is important also to listen to those people who identified areas for improvement. These voices and experiences will play a key role in shaping the future of patient-centred care in Ireland.

Hospital profile

Our Lady's Hospital, Navan is a public acute hospital, located in Co. Meath. There were 87 inpatient beds available in the hospital during the survey period of 1 May – 31 May 2017 and 332 eligible discharges were recorded during this time. Our Lady's Hospital, Navan has an emergency department. Patients at this hospital were asked to answer questions across each stage of care.

Purpose of this report

The purpose of this report is to present the key findings of the National Patient Experience Survey, based on the experiences of patients who stayed in Our Lady's Hospital, Navan in May 2017. The report highlights areas where patients had positive experiences and outlines where there is significant room for improvement.

The Health Service Executive (HSE) is committed to using the findings of the survey to make improvements to the quality of care provided to patients and to outline a direction for the future of patient-centred care in Our Lady's Hospital, Navan. A quality improvement plan, produced by Our Lady's Hospital, Navan, will be published on www.patientexperience.ie in December 2017.

The Department of Health will use the information gathered to inform the development of policy in relation to acute healthcare. Finally, the findings of the survey will be used to develop HIQA's approach to monitoring of hospitals.



Who took part in the survey?

Description of the respondents who took part in the survey

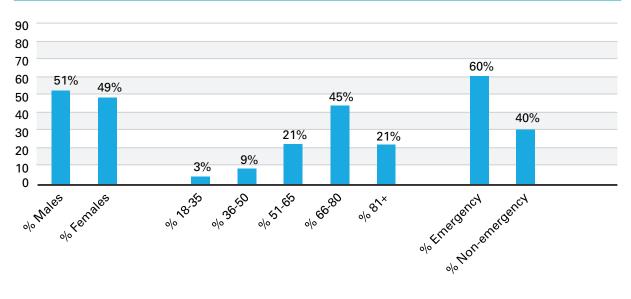
332 people discharged from Our Lady's Hospital, Navan during the month of May 2017 were invited to participate in the survey.

184 people completed the survey, achieving an overall response rate of 55%.

51% of people who responded to the survey in Our Lady's Hospital, Navan were male and 49% were female. The majority of respondents (60%) entered the hospital through the emergency department.

Figure 1. below shows information about the people who took part in the survey from Our Lady's Hospital, Navan.

Figure 1. Survey participants from Our Lady's Hospital, Navan by sex, age group and admission route



What were the main findings for Our Lady's Hospital, Navan?



Overall, patients' ratings of their experiences at Our Lady's Hospital, Navan were above the national average. 90% of patients at Our Lady's Hospital, Navan said they had a 'very good' or 'good' experience, compared with 84% nationally.

The survey found that, overall, people in Our Lady's Hospital, Navan were treated with respect and dignity. People also reported positive experiences as regards privacy while discussing their treatment in the hospital. The food served in the hospital was also highly rated in comparison to the national average, and patients reported positive experiences of getting help to eat their meals. In general, patients said that they had confidence and trust in the hospital staff treating them.

Several questions on examinations, diagnosis and treatment, and care on the ward were identified as areas needing improvement. Several questions relating to communication were poorly rated, with some patients reporting issues with not being involved in decisions about their care, not being able to find someone to talk to about their worries and fears, and issues with not having time to discuss care and treatment with hospital staff.

These findings will serve to inform quality improvement initiatives in Our Lady's Hospital, Navan.

Areas of good experience and areas needing improvement in Our Lady's Hospital, Navan

This section lists the areas where patients had particularly positive experiences, and details those areas where there is the most room for improvement.

Appendix 3 explains how these areas were identified.

The areas of good experience in Our Lady's Hospital, Navan are:

Patients had positive experiences in several areas, particularly as regards food, being treated with dignity and respect, and privacy while discussing their condition or treatment.

Care on the ward | Q15.

Food rating

Of the 176 people who rated the food, 143 (82%) said it was 'very good' or 'good'.

Care on the ward | Q19.

Help from staff to eat meals

Out of the 69 people who said they needed help with their meals, 62 (90%) reported that they always got enough help.

Examination, diagnosis and treatment | Q30.

Privacy when discussing condition or treatment

138 people (79%) said that they were always given enough privacy when discussing their condition or treatment.

Other aspects of care | Q52.

Respect and dignity

164 people (92%) said that they were always treated with respect and dignity.

The areas needing improvement in Our Lady's Hospital, Navan are:

Patients highlighted areas needing improvement across each stage of care. Communication and involvement of patients in relation to their condition, and the support they needed were identified as areas with room for improvement.

Examination, diagnosis and treatment | Q21.

Time to discuss care and treatment with a doctor

65 (37%) of the 174 people who answered this question said that they did not have or only to some extent had enough time to discuss their care and treatment with a doctor.

Care on the ward | Q22.

Clear answers from a nurse

33 (20%) of the 169 people who had important questions to ask a nurse said that they did not, or only sometimes, received an answer they could understand.

Examination, diagnosis and treatment | Q24.

Involvement in decisions about care and treatment

Of 174 people, 56 (32%) said that they were not, or were only to some extent, involved as much as they wanted to be in decisions about their care and treatment.

Examination, diagnosis and treatment | Q26.

Clear explanation of diagnosis

Of 178 people, 59 (33%) said that their diagnosis was not, or only to some extent, explained in a way that they could understand.

Care on the ward | Q28.

Someone to talk to about worries and fears

36 out of 101 people (36%) said that they did not, or only to some extent, found someone on the hospital staff to talk to about their worries and fears.



Chapter 2

The patient journey through hospital

Qualitative and quantitative findings of the 2017 survey

Findings of the 2017 survey

The stages of care along the patient journey

The National Patient Experience Survey 2017 follows the patient journey through hospital from admission to discharge.

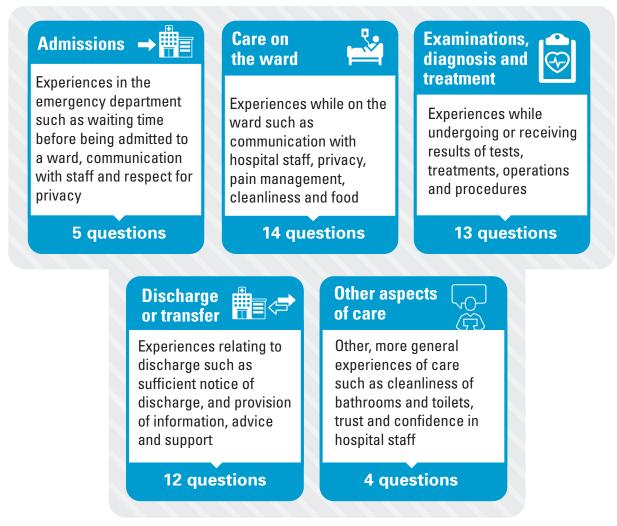
The survey questions were grouped into five stages along the patient journey:

- admissions
- care on the ward
- examinations, diagnosis and treatment
- discharge or transfer
- other aspects of care.



Figure 2. gives a short description of the stages along the patient journey. It also indicates how many questions in the survey relate to each stage.

Figure 2. Description of stages of care along the patient journey



How to interpret the results for the stages of care



While the results show that many people had a positive experience in hospital, it is important to listen to those patients who had negative experiences. Listening to the voices of all patients allows hospitals to make improvements across the patient journey. For each stage of care the results are presented in the following way, as shown in Figure 3.:

- 1. Experience rating for a stage of care.
- 2. Scores out of 10.
- 3. Comparisons.

Figure 3. Guide to interpreting the results

1. Experience rating for a stage of care

The experience rating summarises the average patient experience for each stage of care. The graphs show how many people rated a particular stage as 'very good', 'good' or 'fair to poor'.

Example:

The example below shows how many people rated the care they received on the ward as 'very good, 'good' and 'fair to poor'.





2. Scores out of 10

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.

Example:

The example below shows the scores for four questions. Q52 and Q29 had the highest scores (9 out of 10). A score of 9 means that on average, people gave positive responses to these questions.

Q27 is the lowest ranking question (score of 7.2 out of 10). This result shows that Q27 received more mixed or negative responses than Q52 and Q29.

Appendix 4 includes additional notes on interpreting these survey results. It also explains the methodology for the scoring of individual questions and stages of care.

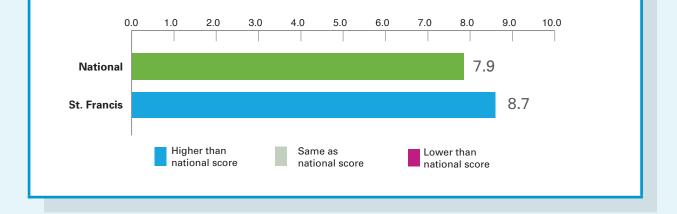


3. Comparisons

When hospital scores are compared with the national average, statistical tests were carried out to check if any differences were genuine or simply down to chance. The way hospital scores are calculated is explained in Appendix 4.

Example:

The example below compares the scores for the fictional St. Francis Hospital and the national score for the 'admissions' stage of care. The shading on the graph shows whether a difference exists between the two scores and whether this difference is statistically significant. The shading for the hospital score tells us that it is significantly higher than the national score.



Admissions



In summary: what were patients' experiences of the admissions process?

'Admissions' refers to the period that patients spent in the emergency department up to the point of getting to a ward.

14 people (13%) reported a 'fair to poor' experience of admission. However, 70 people (67%), who attended during the same period, rated their experience as 'very good'. Figure 4. below summarises these experience ratings.

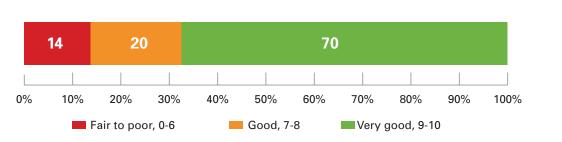


Figure 4. Experience ratings for admissions

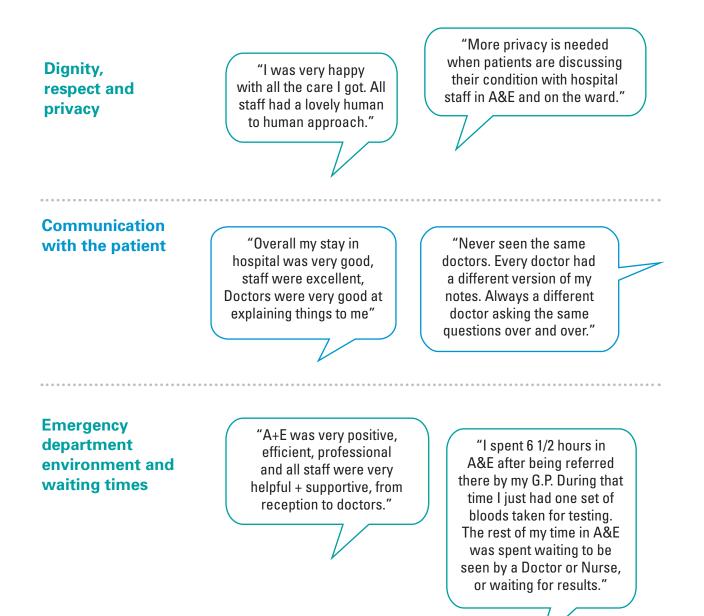
What were the key findings for admissions?

- 91 people (88%) said that they were always treated with respect and dignity during their time in the emergency department.
- Out of 95 people, 51 (54%) said that they waited more than six hours in the emergency department before being admitted to a ward.
- Of the 100 people who answered Q4, 36% said that their condition was not explained in a way they could completely understand by a doctor or nurse in the emergency department.
- Our Lady's Hospital, Navan scored 8.4 out of 10 overall for this stage of care, compared with the national score of 7.9 out of 10.

The patient voice: what patients said about admissions



Patients made 41 comments about the following themes: 'dignity, respect and privacy', 'communication with the patient', and 'emergency department environment and waiting times'. 46% of these comments were suggestions for improvement. Some examples of these comments are provided below.



Quantitative results for questions on admissions

Five questions asked about admissions. Respondents who did not come into hospital through the emergency department did not answer these questions.

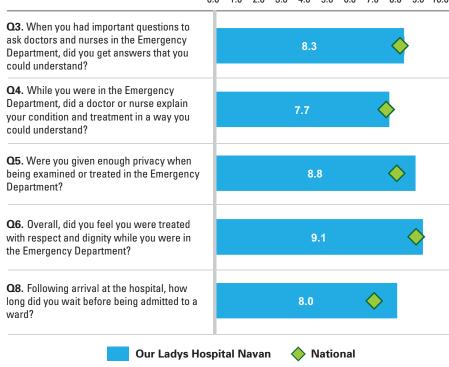
91 people (88%) from Our Lady's Hospital, Navan said that they were always treated with respect and dignity in the emergency department. This question achieved a score of 9.1 out of 10, making it the highest performing area in this stage of care.

However, 36 people (36%) who answered Q4 did not have, or only to some extent had their condition explained by a doctor or nurse in a way that they could understand. This was rated as the lowest scoring question, with a score of 7.7 out of 10.

Figure 5. summarises the scores for Our Lady's Hospital, Navan for the admissions stage of care.

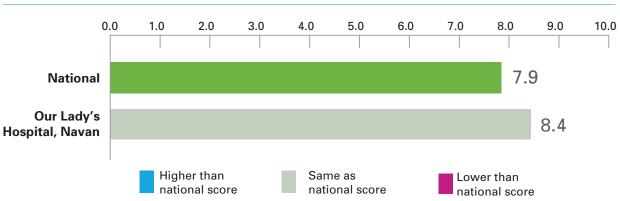
"[Need for] improvement on waiting times in A&E and hard chairs is my only observation."

Figure 5. Our Lady's Hospital, Navan scores for questions on admissions



0.0 1.0 2.0 3.0 4.0 5.0 6.0 7.0 8.0 9.0 10.0

Figure 6. shows that, within the admissions stage, the average score for Our Lady's Hospital, Navan (8.4 out of 10) is similar to the national average¹ (7.9 out of 10). This means that patients who attended Our Lady's Hospital, Navan had a similar experience during the admissions process in comparison to the national average.





Emergency department waiting times

The HSE sets targets for the performance of acute hospitals, including targets that are relevant to 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.'

A separate target has been set for patients aged 75 years or older who are attending an emergency department: '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.'

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 figures².

¹ Though the admissions score for Our Lady's Hospital, Navan is higher than the national score, the difference is not statistically significant. For further information, see Appendix 4.

² The HSE 2017 targets can be viewed at: https://www.hse.ie/eng/services/publications/KPIs/Acute-Hospitals-KPI-Metadata-2017.pdf

Waiting time before being admitted to a ward

In Our Lady's Hospital, Navan, 44 people (46%) said they were admitted to a ward within six hours of arriving at the emergency department. 46 respondents (48%) reported waiting between six and 24 hours. Five people (5%) reported waiting for 24 hours or more in the emergency department before being admitted to a ward, with two of these saying they waited for more than 48 hours.

Figure 7. outlines the patient-reported waiting times in Our Lady's Hospital, Navan, compared with the national average.

What does this mean for Our Lady's Hospital, Navan?

With 46% of people reporting that they were admitted to a ward within six hours of arriving at the emergency department, the findings indicate that Our Lady's Hospital performed better than the national average, where 30% of people said that they were admitted within six hours of arriving. However, patient-reported waiting times in Our Lady's Hospital fell short of the HSE target for waiting times. Studies have found that long waiting times in the emergency department, after a decision has been made to admit a patient, can have negative consequences for patient's health^(1,2).

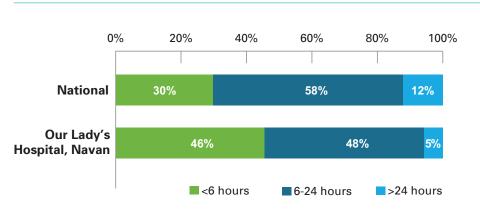


Figure 7. Patient-reported emergency department waiting times for Our Lady's Hospital, Navan and nationally

Admissions: what do these results mean?

Our Lady's Hospital, Navan performed better than the national average for emergency department waiting times but still fell short of the target set by the HSE. People reported slightly better than average experiences of privacy while being examined or treated in the emergency department, and being treated with respect and dignity.

Care on the ward



In summary: what were patients' experiences of care on the ward?

'Care on the ward' refers to peoples' experiences while on the ward, such as communication with hospital staff, privacy, pain management, cleanliness and food.

Out of the 179 people who rated their experience of care on the ward, 17 people (9%) reported having a 'fair to poor' experience during their stay on a ward in Our Lady's Hospital, Navan. On the other hand, 128 people (72%) reported having a very good experience during their stay on a ward in May 2017. These experience ratings are summarised in Figure 8. below.

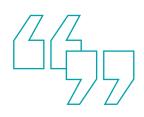


Figure 8. Experience ratings for care on the ward

What were the key findings for care on the ward?

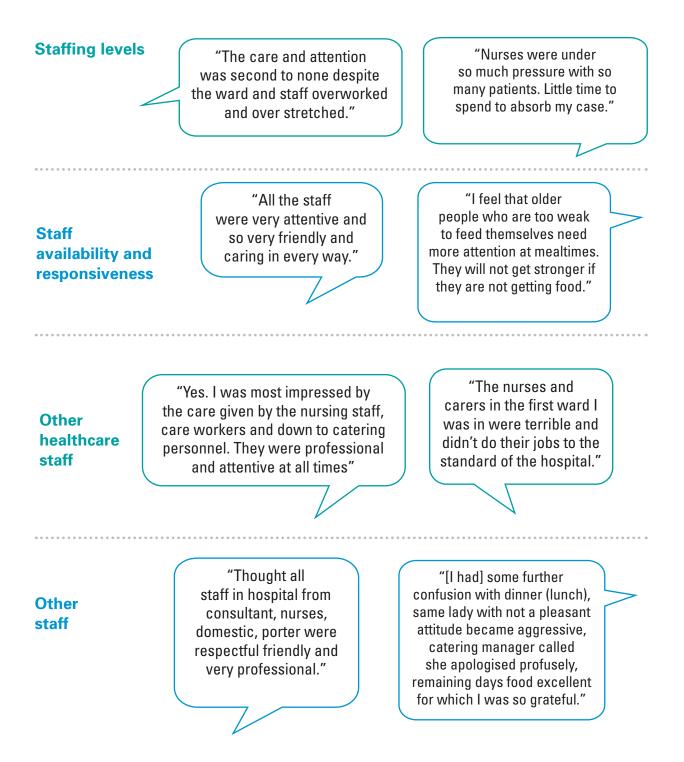
- Out of 69 people who needed help to eat, 62 (90%) said that they always got help from staff.
- 36 out of 101 people (36%) said that they did not, or only to some extent, found someone on the hospital staff to talk to about their worries and fears.
- People in Our Lady's Hospital, Navan rated their experience of care on the ward as 8.5 out of 10, compared with the national average of 8.3 out of 10. This means that people in the hospital had a similar experience to patients nationally for this stage of care.

"Overall my experience was a pleasant one and my care was excellent. I really needed immediate care with my complaint and that's exactly what I got."



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

95 open-ended comments were made about the following themes: 'staffing levels', 'staff availability and responsiveness' 'other healthcare staff', 'other staff', 'food and drink', 'cleanliness and hygiene. 28% of the comments were received for Q60, which asked respondents for suggestions for improvement. Some examples of the comments received are provided below.





Quantitative results for questions on care on the ward Fourteen questions asked about care on the ward.



62 people (90%) said that they always got enough help to eat their meals. The lowest scoring question relates to finding someone to talk to about worries and fears. 36 people (36%) said that they did not, or only to some extent, found someone on the hospital staff to talk to about their worries and fears.

Figure 9. below summarises the scores for Our Lady's Hospital, Navan for the care on the ward stage.

"I found all the nurses and doctors very nice and very reassuring and so very caring. My stay in hospital was very peaceable and my care was so very good from the nurses."

Figure 9. Our Lady's Hospital, Navan scores for questions on care on the ward

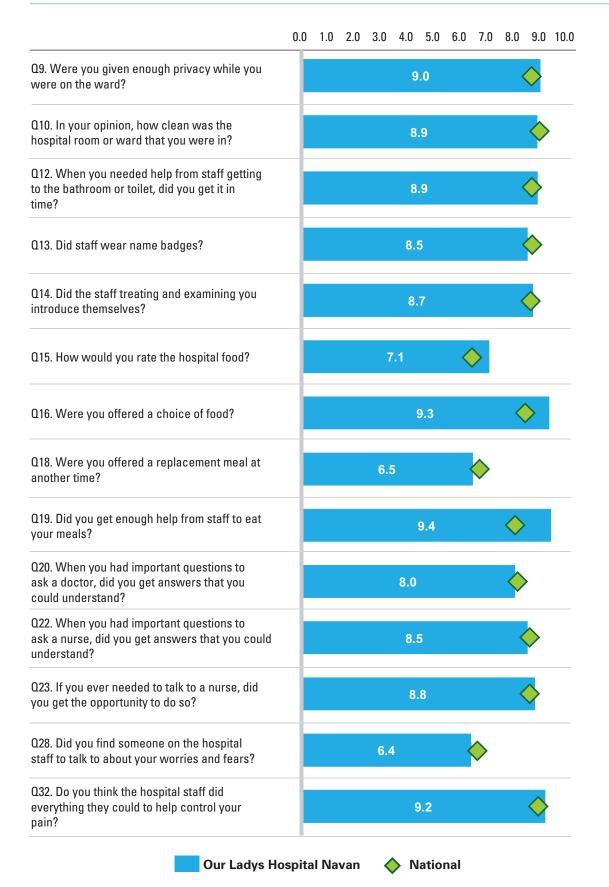
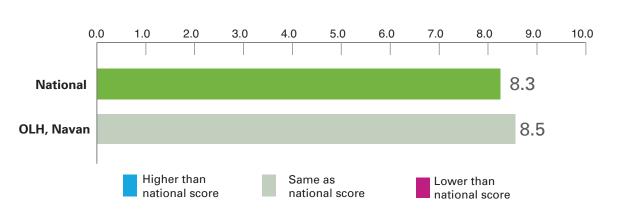


Figure 10. shows that, within the care on the ward stage, the average score for Our Lady's Hospital, Navan (8.5 out of 10) is similar to the national average (8.3 out of 10)³. This means that patients who attended Our Lady's Hospital, Navan in May 2017 reported a similar experience to the national average for this stage of care.





Care on the ward: what do these results mean?

Patients in Our Lady's Hospital, Navan had a similar experience to patients in other hospitals for care on the ward. People were positive about the choice of food at mealtimes and help they received to eat, but reported below-average experiences of being able to find someone to talk to when they were worried.

³ Though the care on the ward score for Our Lady's Hospital, Navan is higher than the national score, the difference is not statistically significant. For further information, see Appendix 4.

Examinations, diagnosis and treatment



In summary: what were patients' experiences of examinations, diagnosis and treatment?

'Examinations, diagnosis and treatment' refers to peoples' experiences in the hospital while undergoing or receiving results of tests, treatments, operations and or procedures.

179 people rated their experience of examinations, diagnosis and treatment in Our Lady's Hospital, Navan, with 30 (17%) reporting that they had a 'fair to poor' experience. However, 113 (63%) rated their experience during this stage of care as 'very good'. These experience ratings are summarised in Figure 11. below.

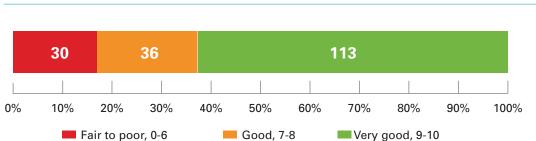


Figure 11. Experience ratings for examinations, diagnosis and treatment

What were the key findings for examinations, diagnosis and treatment?

- Q37 asked whether staff answered questions in a way patients could understand before an operation or procedure. This was the highest ranking question in this section with a score of 9.6 out of 10.
- 65 people (37%) who answered question 21 said that they did not have or only to some extent had enough time to discuss their care and treatment with a doctor.
- Our Lady's Hospital, Navan achieved an overall score of 8.1 out of 10 for the examinations, diagnosis and treatment stage. This is similar to the national average score for this stage.

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



Patients made 75 comments about: 'nursing staff', 'doctors or consultants' and 'waiting times for planned procedures'. Four of the comments were received for Q60, which asked for suggestions for improvement. Some example comments are provided below.



Quantitative results for questions on examinations, diagnosis and treatment Thirteen questions asked about examinations, diagnosis and treatment.

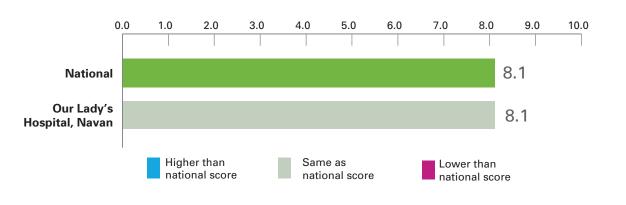
Q37, which asked whether staff answered questions in a way patients could understand before an operation or procedure, was the highest ranking question in this section with a score of 9.6 out of 10. 65 people (37%) who answered question 21 said that they did not have or only to some extent had enough time to discuss their care and treatment with a doctor.

Figure 12. summarises the scores for Our Lady's Hospital, Navan during examinations, diagnosis and treatment.

Figure 12. Our Lady's Hospital, Navan 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
Q21. Did you feel you had enough time to discuss your care and treatment with a doctor?				7	.1				\diamond		
O24. Were you involved as much as you wanted t be in decisions about your care and treatment?	0				7.4				\diamond		
O25. How much information about your condition or treatment was given to you?		7.8									
O26. Was your diagnosis explained to you in a wa that you could understand?	y	7.7								•	
Q30. Were you given enough privacy when discussing your condition or treatment?			8.6								
Q31. Were you given enough privacy when being examined or treated?		9.4									
Q33. Did a doctor or nurse explain the results of the tests in a way that you could understand?			9.4 7.9								
Q34. Before you received any treatments did a member of staff explain what would happen?			8.5							\diamond	
Q35. Before you received any treatments did a member of staff explain any risks and/or benefits in a way you could understand?	1	8.2							¢	>	
Q36. Beforehand, did a member of staff explain th risks and benefits of the operation or procedure in a way you could understand?		9.1							\diamond		
Q37. Beforehand, did a member of staff answer your questions about the operation or procedure ir a way you could understand?	ı	9.6								\diamond	
Q38. Beforehand, were you told how you could expect to feel after you had the operation or procedure?					8.	7			\diamond		
Q39. After the operation or procedure, did a member of staff explain how the operation or procedure had gone in a way you could understan	d?				8.	6				>	

Figure 13. shows that, within the examinations, diagnosis and treatment stage, the average score for Our Lady's Hospital, Navan (8.1 out of 10) is the same as the national average (8.1 out of 10). This means that patients who attended Our Lady's Hospital, Navan in May 2017 reported a similar experience of examination, diagnosis and treatment in comparison to the national average.





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

Patients in Our Lady's Hospital, Navan reported a similar experience to the national average for examination, diagnosis and treatment. People were positive about getting answers they could understand before a procedure and the privacy they were given while being examined or treated. People were less positive about having enough time to discuss their treatment with a doctor, and being involved in decisions about their care.

Discharge or transfer

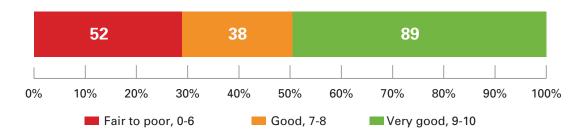


In summary: what were the experiences of patients during discharge or transfer from hospital?

'Discharge or transfer' refers to people's' experiences of the discharge process, such as notice given of discharge and the provision of information, advice and support to manage patients' conditions.

Out of the 179 people who rated their experience of discharge or transfer from the hospital, 52 (29%) said that their experience was 'fair to poor'. On the other hand, 89 (50%) reported having a very good experience of being discharged or transferred from Our Lady's Hospital, Navan. Figure 14. below summarises these experience ratings.

Figure 14. Experience ratings for discharge or transfer



What were the key findings for discharge or transfer?

- Out of 150 people, 121 (81%) said that a member of staff completely explained the purpose of the medicines they were to take home in a way they could understand.
- 45 people (36%), who answered Q46, said that they were not informed about any medication side effects to watch for when they went home.
- Our Lady's Hospital, Navan scored about the same as the national average for this stage of care, with an overall score of 7.1 out of 10. This means that the experiences of patients in this hospital were similar to those of patients in other hospitals for this stage of care.

The patient voice: what patients said about discharge or transfer from hospital

11 open-ended comments were made about 'discharge and aftercare management. 45% of these comments offered suggestions for improvement. Some examples of these comments are provided below.

Discharge and aftercare

"The offer of a wheelchair on discharge was great as I was unable to walk to the door. My worries as regards that were eliminated immediately." "We were informed at 3.30pm on Monday afternoon that mom was discharged. In this day and age when most people are at work it doesn't give us much time to organise to bring her home. Some prior notice would be great."

Quantitative results for questions on discharge or transfer from hospital

Twelve questions asked about discharge or transfer.

Out of 150 people, 121 (81%) said that a member of staff completely explained the purpose of the medicines they were to take home in a way they could understand.

45 people (36%), who answered Q46, said that they were not informed about any medication side effects to watch for when they went home.

Figure 15. summarises the scores for Our Lady's Hospital, Navan for questions on discharge or transfer from the hospital.

	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?				Ī	7.2						
Q41. Were you given enough notice about when you were going to be discharged?					7.9				\diamond		
Q42. Were your family or someone close to you given enough notice about your discharge?					7.8			<	>		
Q43. Before you left hospital, did the healthcare staff spend enough time explaining about your health and care after you arrive hom	ne?				7.3			<			
Q44. Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?				5.7		<					
Q45. Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?					8.4	1			\diamondsuit		
Q46. Did a member of staff tell you about medication side effects to watch for when you went home?				5.6			>				
Q47. Did a member of staff tell you about any danger signals you should watch for after you went home?				5.7		<					
Q48. Did hospital staff take your family or home situation into account when planning your discharge?				6.	8			¢			
Q49. Did the doctors or nurses give your family or someone close to you all the information they needed to help care for you?				6.1				•			
Q50. Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?					7.7						
Q51. Do you feel that you received enough information from the hospital on how to manage your condition after your discharge?				Ī	7.2				I		

Figure 15. Our Lady's Hospital, Navan scores for questions on discharge or transfer

7.1

Lower than

national score

Figure 16. shows that, within the discharge and transfer from hospital stage, the average score for Our Lady's Hospital, Navan (7.1 out of 10) is around the same as the national average⁴ (6.7 out of 10). This means that patients who attended Our Lady's Hospital, Navan in May 2017 reported a similar experience in comparison to the national average for this stage of care.



Same as

national score

Figure 16. Comparison of Our Lady's Hospital, Navan with the national average for discharge or transfer (out of a maximum of 10).

Discharge or transfer: what do these results mean?

Higher than

national score

Our Lady's

Hospital, Navan

Our Lady's Hospital had an average performance on this stage of care, with patients reporting a similar experience to the national average. Patients in Our Lady's Hospital reported that staff explained the purpose of medications they were to take in a way they could understand. However, many patients said that members of staff did not explain the potential side effects of medication.

⁴ Though the discharge or transfer score for Our Lady's Hospital, Navan is higher than the national score, the difference is not statistically significant. For further information, see Appendix 4.

Other aspects of care



In summary: what were patients' experiences of other aspects of care?

'Other aspects of care' refers to the more general aspects of care that are not specific to a particular stage of care, but rather, apply throughout the hospital journey.

What were the key findings for other aspects of care?

- Q52 was the highest ranking question on other aspects of care (a score of 9.4 out of 10). 164 people (92%) said that they were always treated with respect and dignity.
- Q27, which asked about whether family or friends had enough opportunity to talk to a doctor, was the lowest ranking question on other aspects of care, with a score of 7.0 out of 10.
- 158 people (89%) said that they always had confidence and trust in the hospital staff that treated them.

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



117 open-ended comments were made about: staff in general', 'communication with family and friends', and 'physical comfort and hospital facilities'.

24% of these comments offered suggestions for improvement. Some examples of these comments are provided below.

Staff in general

"All staff encountered were extremely professional, efficient and kind. We found level of care to be exceptional."

"There could be more night staff. The staff was over worked. Some nights they didn't have a break. They also couldn't do enough for us"



Quantitative results for questions on other aspects of care

Question 52 asked people if they felt that they were treated with respect and dignity while in Our Lady's Hospital, Navan in May 2017. Overall, 164 people (92%) said that they were always treated with respect and dignity. Two people (1%) said that they were not treated with respect and dignity while in hospital. This question scored an average of 9.4 out of 10, meaning that, in general, people reported a very positive experience of being treated with respect and dignity.

Figure 17. below shows patients' rating of the level of dignity and respect they were shown in hospital.

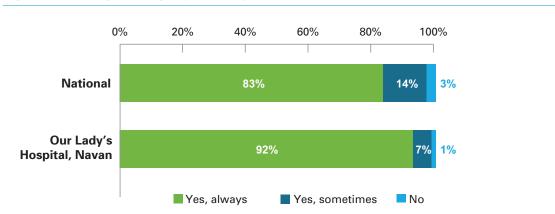


Figure 17. Ratings for dignity and respect

Question 29 asked people if they had confidence and trust in the hospital staff treating them. 158 people (89% of all people who answered Q29) said that they always had confidence and trust in the hospital staff treating them. Four people (2%) said that they did not have confidence and trust in the hospital staff treating them.

Question 11 asked people about the cleanliness of the bathrooms and toilets in Our Lady's Hospital. While 108 people (62% of people who answered Q11) said that the bathrooms and toilets were very clean, 15 people (9%) said that they were not very clean or not at all clean.

Question 27 asked people if their family or someone close to them had sufficient opportunities to talk to a doctor in Our Lady's Hospital, Navan. Out of 124 people, 77 (62%) said that their family or people close to them definitely had sufficient opportunities to talk to a doctor. However, 16 people (13%) said that their family or friends did not.

Figure 18. summarises the scores for Our Lady's Hospital, Navan for questions about other aspects of care.

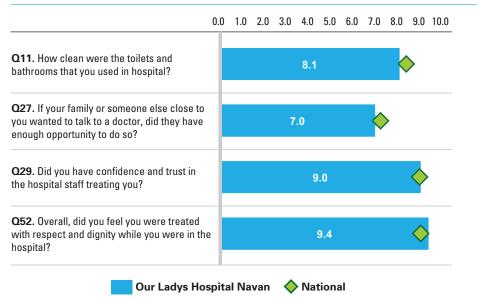


Figure 18. Our Lady's Hospital, Navan scores for questions on other aspects of care

Other aspects of care: what do these results mean?

Patients in Our Lady's Hospital reported positive experiences of being treated with dignity and respect, and had confidence in the hospital staff treating them. These areas are strongly linked with patients reporting a positive overall experience, and is thus a very positive result for Our Lady's Hospital. People had less positive views on the level of communication between hospital staff and their families or friends. Ratings of the cleanliness of toilets and bathrooms was lower than the national average.



Chapter 3 Overall experience

Ratings of overall experience

People were also asked to rate their overall hospital experience on a scale of 0 to 10, with 10 being the most positive experience, and 0 the most negative experience.

Figure 19. below provides the average overall rating of hospital experience, reported by people who completed the survey in Our Lady's Hospital, Navan, compared with the national average.

Well over half of people (65%), who stayed in Our Lady's Hospital, Navan in May 2017, reported having a very good experience in this hospital. 10% of respondents indicated a fair to poor experience in Our Lady's Hospital, Navan.

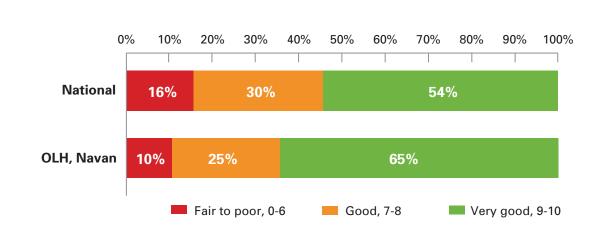


Figure 19. Overall rating of hospital experience for Our Lady's Hospital, Navan and nationally



How did patients experience hospital care in Our Lady's Hospital, Navan in May 2017?

Overall, patients' ratings of their experiences at Our Lady's Hospital were above the national average. 90% of patients at Our Lady's Hospital said they had a 'very good' or 'good' experience, compared with 84% nationally.

The majority of people were treated with respect and dignity during their time in Our Lady's Hospital, Navan. People also reported positively as regards the privacy they were given while discussing their treatment, in addition to the confidence and trust they had in the hospital staff who treated them. Overall, food was a positive experience for most people, particularly in comparison to the national average, while most people received help to eat at mealtimes, when needed.

However a number of patients reported that they did not have enough time to discuss their care and treatment with hospital staff and also felt that they were not involved in decisions about their care and treatment. These findings indicate that communication with patients during the examinations, diagnosis and treatment stage is an area needing improvement.

These findings will serve to inform quality improvement initiatives at Our Lady's Hospital, Navan.

What happens next?

The HSE has committed to using the findings of the National Patient Experience Survey 2017 to support wide ranging quality improvements in every hospital in Ireland. In direct response to what people have said in this survey, the HSE will develop and publish a national quality improvement plan, which will outline a vision and direction for the future of patient-centred care in Ireland. Each hospital will also produce a quality improvement plan to address the issues raised by its patients.

The HSE has also set up a governance structure, including an oversight group to lead the development of a national quality improvement plan, which will be made publicly available on www.patientexperience.ie in December 2017.

The Department of Health will use the information gathered to inform the development of policy in relation to acute healthcare. Finally, the findings of the survey will be used to develop HIQA's approach to monitoring of hospitals.

Appendix 1:

National Patient Experience Survey 2017 questions

No.	Question	
1	Was your most recent hospital stay planned in advance or an emergency?	
2	When you arrived at the hospital, did you go to the Emergency Department (also known as the A&E Department or Casualty)?	
3	When you had important questions to ask doctors and nurses in the Emergency Department, did you get answers that you could understand?	
4	While you were in the Emergency Department, did a doctor or nurse explain your condition and treatment in a way you could understand?	
5	Were you given enough privacy when being examined or treated in the Emergency Department?	
6	Overall, did you feel you were treated with respect and dignity while you were in the Emergency Department?	
7	Did you remain in the Emergency Department for the entire time of your stay?	
8	Following arrival at the hospital, how long did you wait before being admitted to a ward?	
9	Were you given enough privacy while you were on the ward?	
10	In your opinion, how clean was the hospital room or ward that you were in?	
11	How clean were the toilets and bathrooms that you used in hospital?	
12	When you needed help from staff getting to the bathroom or toilet, did you get it in time?	
13	Did staff wear name badges?	
14	Did the staff treating and examining you introduce themselves?	
15	How would you rate the hospital food?	
16	Were you offered a choice of food?	
17	Were you ever unable to eat during mealtimes (e.g. because you were away from the ward, recovery from surgery etc.)?	
18	Were you offered a replacement meal at another time?	
19	Did you get enough help from staff to eat your meals?	
20	When you had important questions to ask a doctor, did you get answers that you could understand?	

No.	Question	
21	Did you feel you had enough time to discuss your care and treatment with a doctor?	
22	When you had important questions to ask a nurse, did you get answers that you could understand?	
23	If you ever needed to talk to a nurse, did you get the opportunity to do so?	
24	Were you involved as much as you wanted to be in decisions about your care and treatment?	
25	How much information about your condition or treatment was given to you?	
26	Was your diagnosis explained to you in a way that you could understand?	
27	If your family or someone else close to you wanted to talk to a doctor, did they have enough opportunity to do so?	
28	Did you find someone on the hospital staff to talk to about your worries and fears?	
29	Did you have confidence and trust in the hospital staff treating you?	
30	Were you given enough privacy when discussing your condition or treatment?	
31	Were you given enough privacy when being examined or treated?	
32	Do you think the hospital staff did everything they could to help control your pain?	
33	Did a doctor or nurse explain the results of the tests in a way that you could understand?	
34	Before you received any treatments did a member of staff explain what would happen?	
35	Before you received any treatments did a member of staff explain any risks and/or benefits in a way you could understand?	
36	Beforehand, did a member of staff explain the risks and benefits of the operation or procedure in a way you could understand?	
37	Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?	
38	Beforehand, were you told how you could expect to feel after you had the operation or procedure?	
39	After the operation or procedure, did a member of staff explain how the operation or procedure had gone in a way you could understand?	
40	Did you feel you were involved in decisions about your discharge from hospital?	
41	Were you given enough notice about when you were going to be discharged?	
42	Were your family or someone close to you given enough notice about your discharge?	
43	Before you left hospital, did the healthcare staff spend enough time explaining about your health and care after you arrive home?	

No.	Question	
44	Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?	
45	Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?	
46	Did a member of staff tell you about medication side effects to watch for when you went home?	
47	Did a member of staff tell you about any danger signals you should watch for after you went home?	
48	Did hospital staff take your family or home situation into account when planning your discharge?	
49	Did the doctors or nurses give your family or someone close to you all the information they needed to help care for you?	
50	Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?	
51	Do you feel that you received enough information from the hospital on how to manage your condition after your discharge?	
52	Overall, did you feel you were treated with respect and dignity while you were in the hospital?	
53	Overall (please circle a number from 0 to 10 that summarises your experience. 0 represents a very poor experience, 10 represents a very good experience.)	
54	Who was the main person or people that filled in this questionnaire?	
55	Are you male or female?	
56	What is your month and year of birth?	
57	What is your ethnic or cultural background?	
58	Do you currently have: A medical card; Private health insurance; Both medical card and private health insurance; Neither medical card nor private health insurance?	
59	Was there anything particularly good about your hospital care?	
60	Was there anything that could be improved?	
61	Any other comments or suggestions?	

Appendix 2:

Background to the National Patient Experience Survey Programme

The National Patient Experience Survey Programme is a partnership between the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health. The aim of the National Patient Experience Survey Programme is to engage with and understand the experience of patients, and use this feedback to inform the future development, planning, design and delivery of improved patient-centred care in Irish hospitals.

The objectives of the programme are to provide patients with the opportunity to share their experiences, helping the partner organisations to:

- determine the quality of healthcare delivery in Ireland
- identify areas of best practice in Irish healthcare, as well as areas in need of improvement
- provide measures of patient experience which will inform the future planning and delivery of healthcare
- allow for comparisons of patient experiences nationally and internationally, and
- develop and build quality and safety improvement initiatives.

The programme is governed by a steering group, which is made up of patient representatives and senior decision-makers from each of the partner organisations. A delivery group and an advisory group were also set up to oversee the development and implementation of the National Patient Experience Survey.

Further information on the management of the survey is available at www.patientexperience.ie.

Appendix 3:

Identifying areas of good experience and areas needing improvement

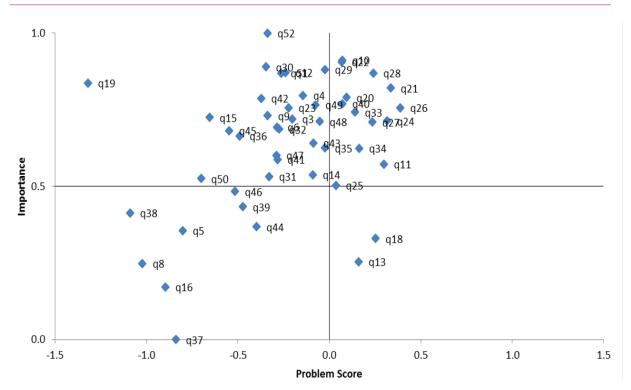
Two methods were combined to identify the areas of good experience and the areas needing improvement.

- 1. Questions that had particularly high scores out of 10 were identified as areas of good experience, while questions that had particularly low scores out of 10 were identified as areas needing improvement.
- Questions that had a strong relationship with overall ratings of experience (Q53) were selected as areas of good experience or areas needing improvement. Further detail on this process is provided below:

Some questions were more important to patients' ratings of overall experience. For example, a question on being treated with dignity and respect may have a stronger relationship with overall experience than a question on patient ratings of the hospital food.

Figure 20. below, shows a map of the survey questions based on how strongly each question is connected to overall experience. The map also shows the difference between the score for each question in Our Lady's Hospital, Navan and the score for each question nationally. This map helps to identify some of the areas of positive experience and areas needing improvement presented in Chapter 1. The importance of the relationship between each question and overall experience is given as a number between 0 and 1, with 1 being the most important possible relationship. The difference between question scores for Our Lady's Hospital, Navan and national scores is described as a 'problem score'. If a question has a problem score with a value greater than zero, it means that Our Lady's Hospital, Navan has scored less than the national average for that question. For example, if a hospital scored 8.8 for Q52 which is lower than the national average of 9.0, this would mean it had a problem score of 0.2 for this question.

Questions that have high problem scores and are important to patients' overall experience appear in the top right section of the map - these are areas needing improvement in Our Lady's Hospital, Navan. Questions that have low problem scores and are important to patients' overall experience can be found in the top left-hand section of the map - these are areas of good experience, as reported by patients of Our Lady's Hospital, Navan.





Appendix 4:

A technical note on analyses and interpretation

Preliminary note

Please note that values in figures do not always add up to 100% exactly. This is due to rounding.

Scoring methodology

The National Patient Experience Survey scoring methodology is based on the methodology adopted by the Care Quality Commission on behalf of the National Health Service (NHS) in England.

The scores for the patient journey were calculated by grouping survey questions into five stages of care⁵: admissions; care on the ward; examinations, diagnosis and treatment; discharge or transfer; and other stages of care. Scores are presented for individual questions making up a stage of care. The responses to questions in each stage were also summarised to form overall scales ranging from 0-10.

Figure A. is an example of how response options were converted into scores in the 2017 survey. It should be noted that only evaluative questions could be scored, that is, questions which assess an actual experience of care. Routing or demographic questions were not scored. More 'positive' answers were assigned higher scores than more negative response options. In the example 'No' was given a score of 0, 'Yes, sometimes' was given a score of 5 and 'Yes, always' was given a score of 10. The last response option 'I had no need to ask/I was too unwell to ask any questions' was not scored, as it cannot be evaluated in terms of best practice.

⁵ There are 48 questions relating to the patient journey stages of care. Filter questions, that is, questions whose main purpose it was to route respondents to the next applicable question, were excluded from this categorisation.

Figure A. Example of a scored question in the 2017 survey

The Emergency Department

- Q3. When you had important questions to ask doctors and nurses in the Emergency Department, did you get answers that you could understand?
 - Yes, always
 Yes, sometimes
 No

 - 5 I had no need to ask / I was too unwell to ask any questions

The table below shows how scores are calculated for a specific question. In this example the scores of five respondents are presented. The score for Q3 is calculated by summing the scores in the right hand column (10+10+5+0+5), before dividing them by the number of people who responded to this question (30/5=6). The average score for Q3 is 6 out of 10.

Q3. When you had important questions to ask doctors and nurses in the Emergency Department, did you get answers that you could understand?			
Respondent	Score		
1	10		
2	10		
3	5		
4	0		
5	5		
Sum of scores	30		

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

Comparing groups

When is a difference a 'real' difference?

Statistical tests were carried out to examine if there were significant differences in patient experience across patient groups (that is men and women, and different age groups).

A 'z-test' was used to compare patient experience data at the 99% confidence level. A z-test is a statistical test used to examine whether two population mean scores are different, when the variances are known and the sample size is large. A statistically significant difference means it is very unlikely that results were obtained by chance alone. Therefore, when a score is significantly 'higher than' or 'lower than' the national average, this is highly unlikely to have occurred by chance.

To protect anonymity of people who took part in the survey, and to allow for strong comparisons, sample sizes of less than 30 were not reported.

The National Patient Experience Survey 2017 technical report, available in 2018 at www.patientexperience.ie, provides details on all aspects of the analyses, including response rates, mapping of questions to reporting themes, computation of patient journey scores, statistical comparisons, and application of adjustment weights.

How was the survey data analysed and reported?

Quantitative survey data was analysed using the statistical package SPSS (Version 24).

The responses to the open-ended questions were transcribed and anonymised. All references to names of patients or hospital staff, places, nationalities, wards, specific health conditions, operations and procedures were removed from the qualitative comments before they were thematically analysed and coded.

Analysing open-ended comments

The last three questions (questions 59-61) of the 2017 survey encouraged participants to provide additional information, in their own words, on their experience in hospitals. The free-text comments were very useful as they allowed people to give a more indepth description of their experience. It also allowed them to talk about various things (good or bad) that could not be captured by the structured questions. Nationally, a total of 21,528 comments were received in response to the open-ended questions in the 2017 survey.

A coding framework was developed to carry out a thematic analysis of the openended responses to the free-text questions at the end of the questionnaire. All open ended-questions were analysed and multi-coded using the following 20 codes:

- Dignity, respect and privacy
- Communication with the patient
- Emergency Department management and environment
- Emergency Department waiting times
- Staffing levels
- Staff availability and responsiveness
- Other healthcare staff
- Other staff
- Food and drink
- Cleanliness and hygiene
- Nursing staff
- Doctors or consultants
- Waiting times for planned procedures
- Discharge and aftercare management
- Staff in general
- Communication with family and friends
- Hospital facilities
- Parking facilities
- Clinical information and history
- Private health insurance.

Glossary

Acute hospital: a hospital that delivers emergency, non-emergency/elective and outpatient care to people who are ill or injured.

Emergency care: refers to life-saving care. People who present to hospital with a medical emergency may need to be admitted to hospital.

Emergency department: an area in a hospital where patients can access emergency care 24 hours a day, seven days a week. The emergency department is also sometimes known as 'Accident and Emergency' (A&E) or 'casualty'.

Hospital groups: all public hospitals in Ireland are organised into seven hospital groups, six of which participated in the 2017 survey. The Children's Hospital Group is the seventh hospital group in Ireland. Paediatric hospitals and children's services were not surveyed on this occasion.

Inpatient: a person who is admitted to hospital to receive medical or surgical treatment and stays at least one night.

Non-emergency/elective care: care that is not usually urgent, but rather is planned in advance by the patient and a doctor.

Patient experience of hospital care: what a person feels, observes, perceives, recognises, understands and remembers about their medical care and treatment in hospital.

Patient journey: the patient's progression through hospital from admission to discharge.

Patient or person-centred care: care that is centred on the needs, values and preferences of the patient/person. Essential to this definition is the promotion of kindness, dignity, privacy and autonomy.

Stages of care: refers to specific points along the patient journey. The stages of care are: admissions; care on the ward; examinations, diagnosis and treatment; and discharge or transfer.

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.