



National Patient Experience Survey 2018

Our Lady of Lourdes Hospital

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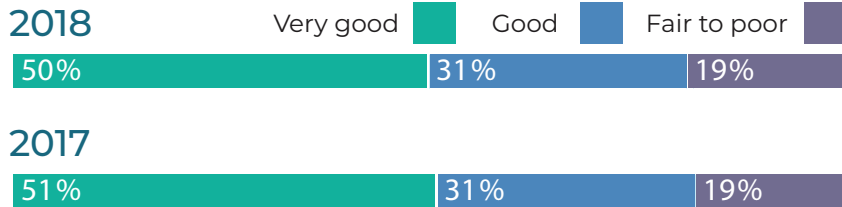
An Roinn Sláinte
Department of Health



Our Lady of Lourdes Hospital

2018 survey results

Overall experience



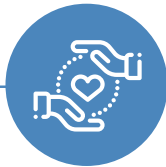
response rate

Values in figures do not always add up to 100% due to rounding.

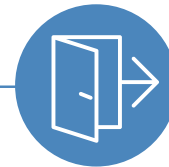
Areas of good experience



Clear explanation of test results



Help from staff to get to the bathroom



Involvement in decisions about discharge

Areas needing improvement



Respect and dignity



Information on how to manage a condition



Confidence and trust in hospital staff

The patient voice

"The level of care and kindness from surgeons and doctors was superb. Communication and updates were frequent and I felt that I could ask anything and it was explained very clearly."



"Wear gloves and clean hands. When my drip was stopped on occasions I needed the toilet, no gloves were ever used or hands washed before touching my drip."

Our Lady of Lourdes Hospital in Drogheda and Louth County Hospital in Dundalk asked for their results to be merged to ensure a sufficient response rate was achieved.

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%. 499 patients from Our Lady of Lourdes Hospital¹ took part in the survey.

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

What were the main findings for Our Lady of Lourdes Hospital?

The majority of participants from Our Lady of Lourdes Hospital reported positive experiences in hospital. 81% of participants said they had 'good' or 'very good' overall experiences, compared with 84% nationally. The hospital achieved similar scores to the national average across every stage of care.

Several areas of good experience were identified. These were areas that were related to participants' overall experiences and where participants gave above-average ratings. For example, the majority of patients received clear explanations of their test results and were involved in the decisions about their discharge from hospital.

There were also several areas needing improvement. A number of people said that they lacked confidence and trust in the staff treating them. In terms of their discharge from hospital, many patients said that they received little information from the hospital on how to manage their condition at home.

While some improvements in patient experience ratings were identified, compared with the 2017 survey, they were not statically significant. The findings of the 2018 survey will help Our Lady of Lourdes Hospital to improve patients' experiences of care in the hospital.

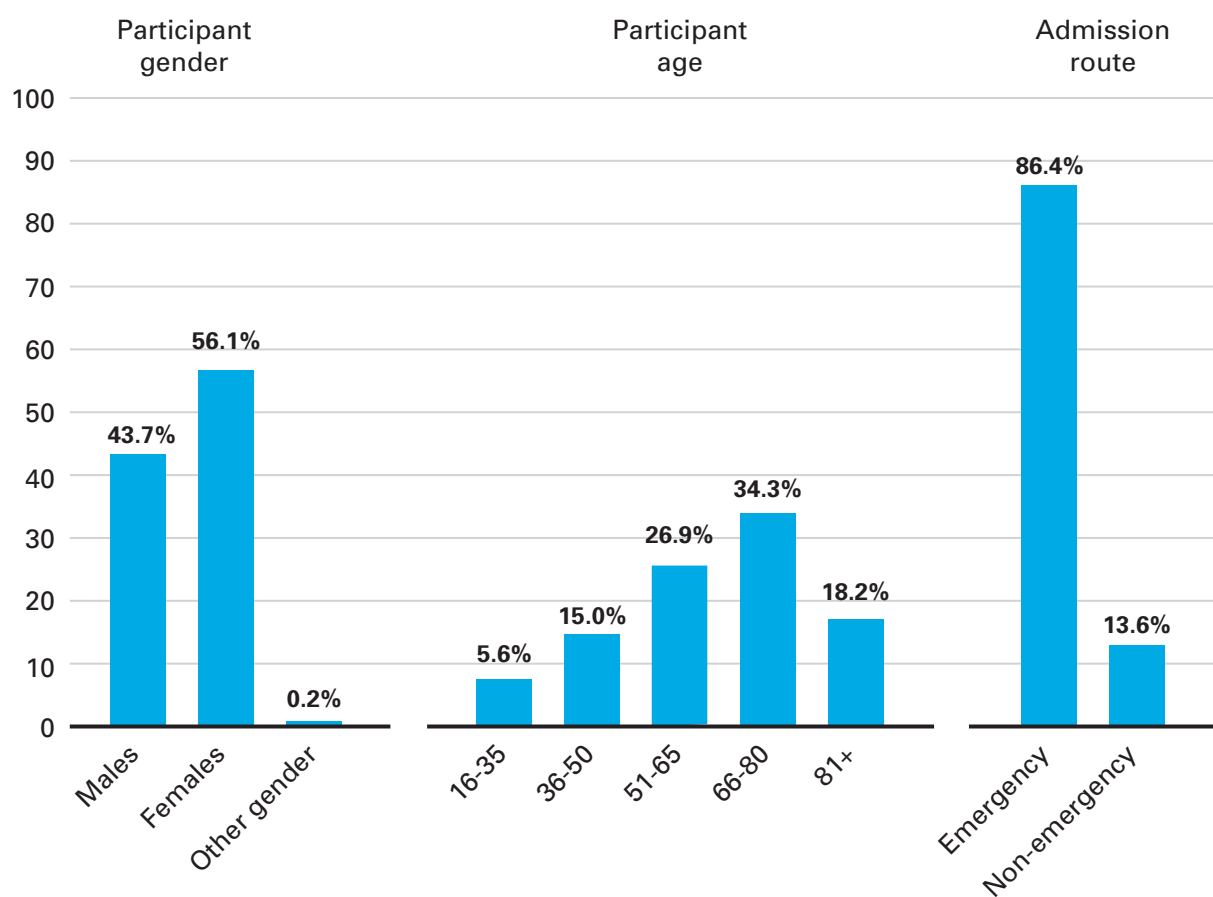
1 Our Lady of Lourdes Hospital in Drogheda and Louth County Hospital in Dundalk asked for their results to be merged to ensure a sufficient response rate was achieved.

Hospital and participant profile

Our Lady of Lourdes Hospital is a public acute hospital located in Drogheda, Co. Louth. There were 367 inpatient beds available in the hospital during the survey period of May 2018.

1,086 people discharged from Our Lady of Lourdes Hospital during the month of May 2018 were invited to participate in the survey. 499 people completed the survey, achieving a response rate of 46%. 43.7% of participants were male, 56.1% were female and 0.2% were another gender. 431 respondents (86.4%) said that their stay in hospital was an emergency. Figure 1 below provides information on the respondents who took part in the survey from Our Lady of Lourdes Hospital.

Figure 1 Participants from Our Lady of Lourdes 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 Our Lady of Lourdes Hospital are:

<p>Care on the ward</p> <p>Help from staff to get to the bathroom Q12</p>	<p>Of the 294 people who needed help from staff in getting to the bathroom or toilet, 237 (81%) said that they always received help in time.</p>
<p>Examinations, diagnosis and treatment</p> <p>Clear explanation of test results Q33</p>	<p>259 people (65% of those who answered Q33) said that doctors or nurses definitely gave them clear explanations of their test results.</p>
<p>Discharge or transfer</p> <p>Involvement in decisions about discharge Q40</p>	<p>Of the 439 people who answered this question, 277 (63%) said that they definitely were involved in decisions about their discharge from hospital.</p>

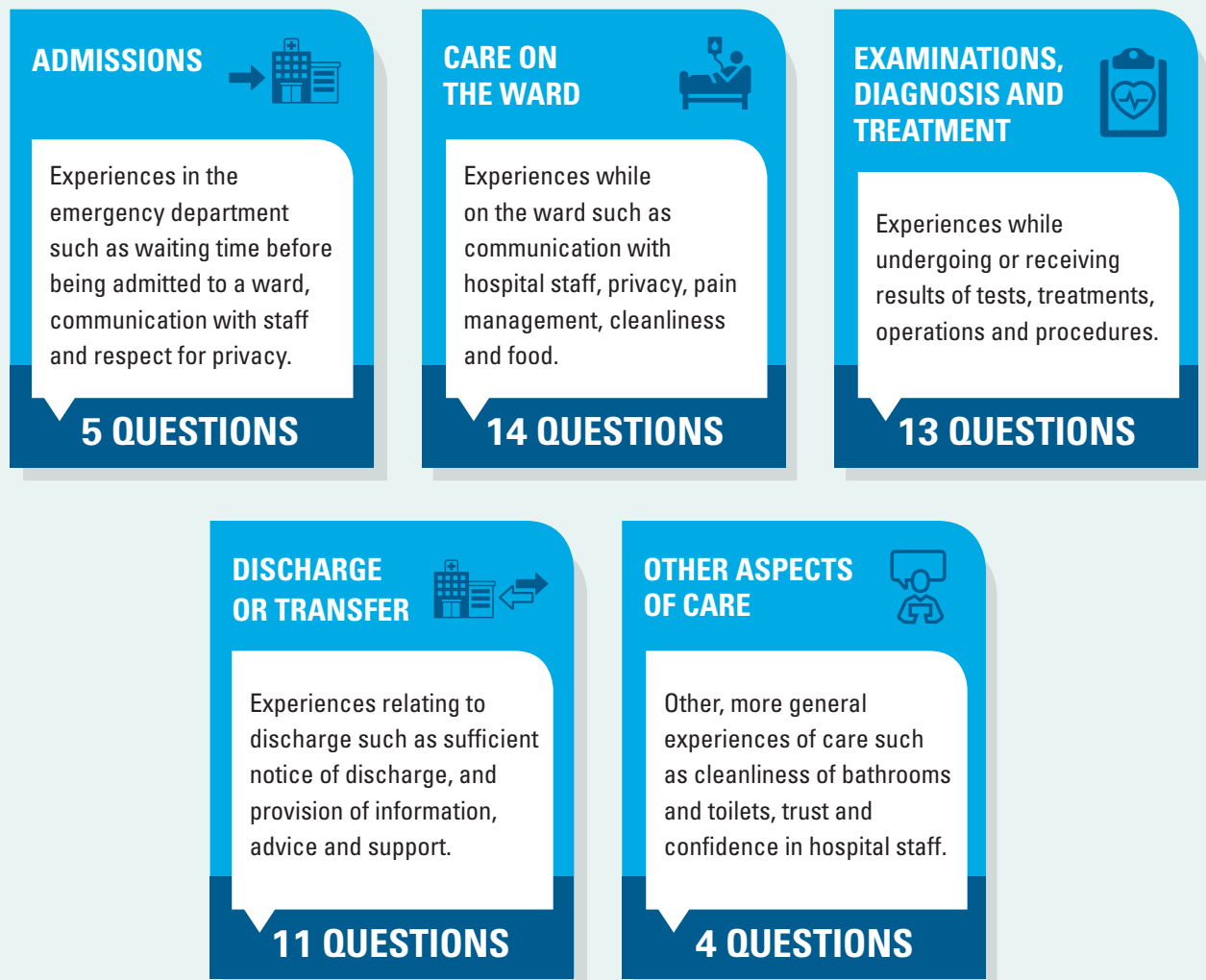
The areas needing improvement in Our Lady of Lourdes Hospital are:

<p>Other aspects of care</p>	<p>100 people (21% of those who answered Q29) said that they did not have, or only sometimes had, confidence and trust in the hospital staff treating them.</p>
<p>Confidence and trust in hospital staff Q29</p>	
<p>Discharge or transfer</p>	<p>Of the 411 people who needed help in managing their condition, 175 (43%) said that they did not receive, or only to some extent received, enough information from the hospital on how to manage their condition at home.</p>
<p>Information on how to manage a condition Q50</p>	
<p>Other aspects of care</p>	<p>Of the 464 people who answered this question, 85 (18%) said that overall they did not feel, or only sometimes felt, that they were treated with respect and dignity in the hospital.</p>
<p>Respect and dignity Q51</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.

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.

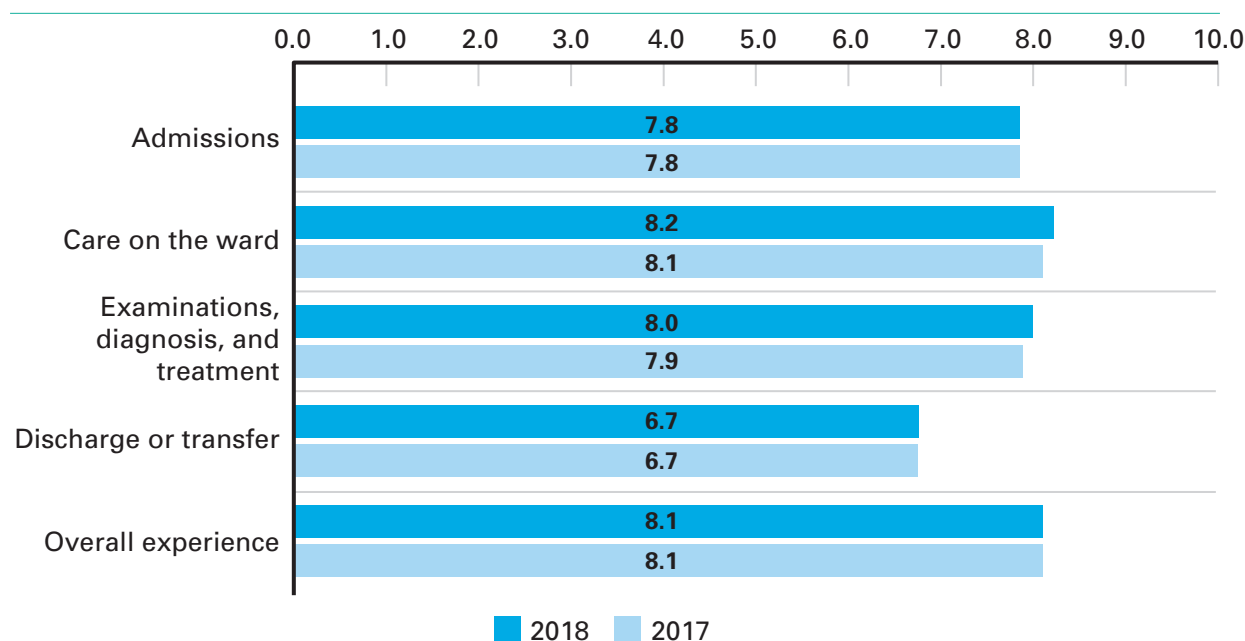
Statistical tests were carried out to examine if there were significant differences in patient experience between 2017 and 2018, as well as between a hospital and the national average. For further information on the analyses please consult Appendix 3 of the 2018 national report, available from www.patientexperience.ie.

Changes in patient experience over time

Participants' average rating of their overall experience remained the same in 2018 as in 2017. There were some minor improvements for the care on the ward and examinations, diagnosis and treatment stages, though none of the differences 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 scores² for Our Lady of Lourdes Hospital for 2017 and 2018



² Scores for the stages of care were constructed by calculating the average scores for all the questions belonging to that stage.

Admissions

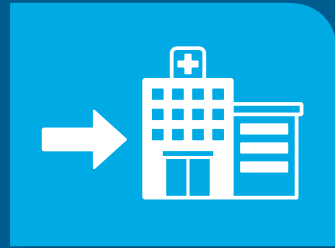


Figure 3 compares the hospital's overall score for admissions with the national average. Figure 4 shows the hospital's scores for questions on this stage of care.

Figure 3 Comparison of Our Lady of Lourdes Hospital with the national average score for admissions (out of a maximum of 10)

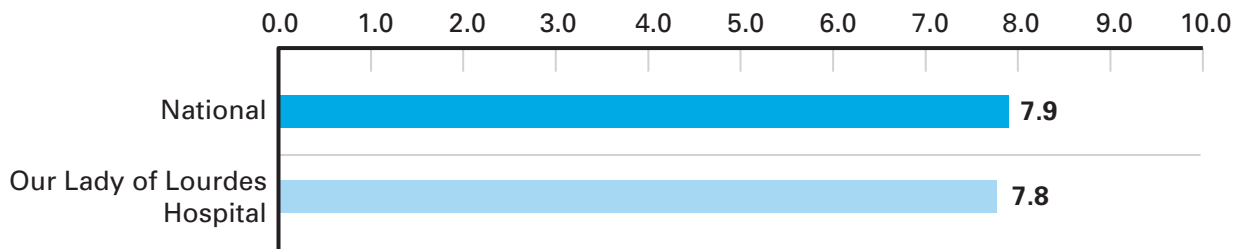
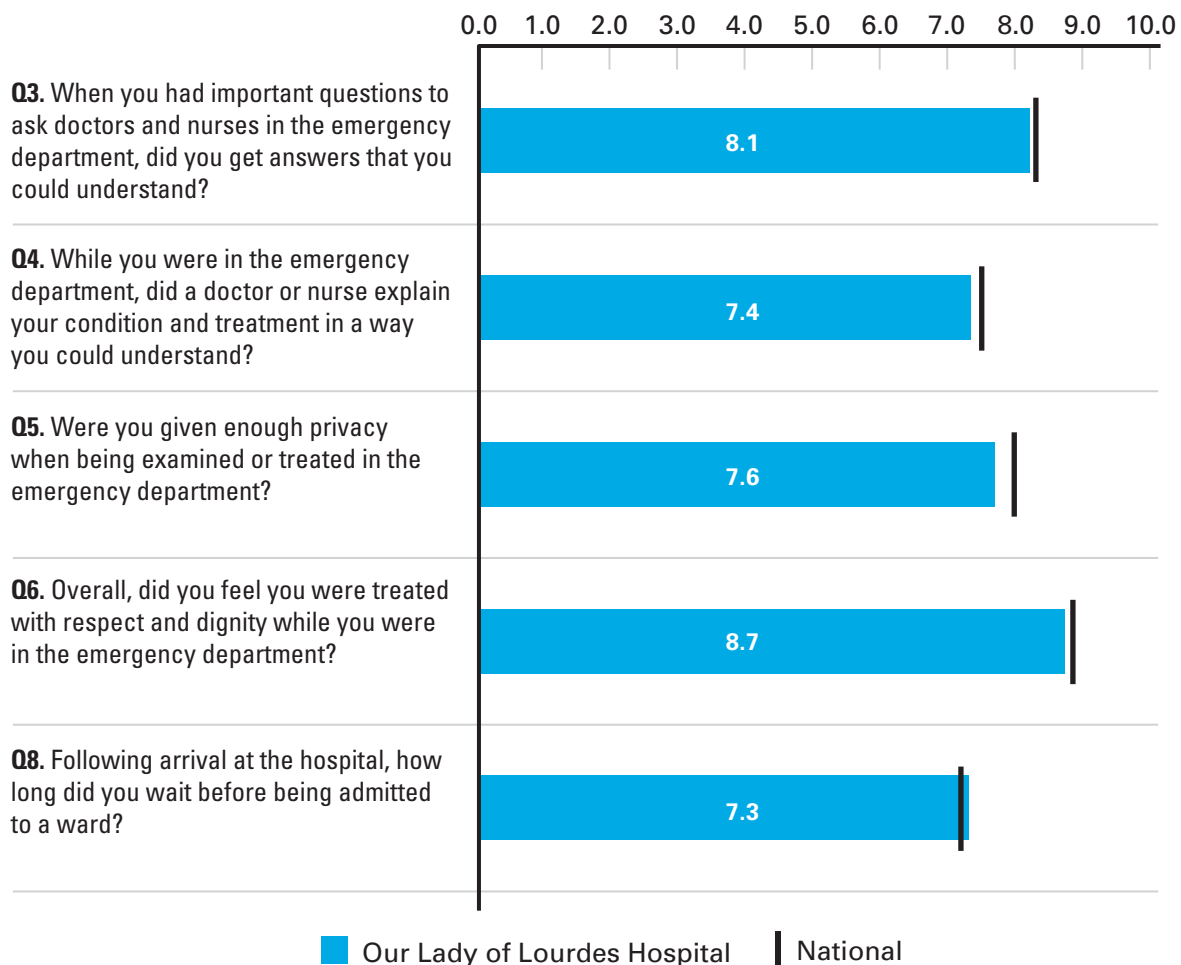


Figure 4 Our Lady of Lourdes Hospital scores for questions on admissions



Emergency department waiting times³

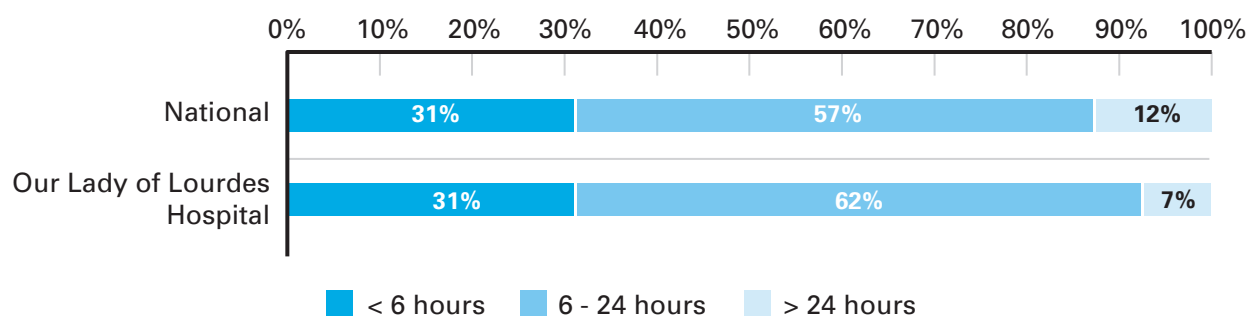
The HSE sets targets for the performance of acute hospitals, including targets on waiting times in emergency departments, such as:

- 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 Our Lady of Lourdes Hospital, 113 respondents (31%) said they were admitted to a ward within six hours of arriving at the emergency department, while 229 respondents (62%) reported waiting between six and 24 hours. 26 respondents (7%) reported waiting 24 hours or more before being admitted to a ward in Our Lady of Lourdes Hospital, with eight of these saying they waited more than 48 hours.

Figure 5 outlines the patient-reported waiting times in Our Lady of Lourdes Hospital, compared with the national average.

Figure 5 Patient-reported emergency department waiting times for Our Lady of Lourdes Hospital and nationally



³ 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: www.hse.ie/eng/services/publications/performance-reports/2018-acute-hospitals-metadata.pdf.

The patient voice: what patients said about admissions

"From entering A&E to receiving diagnosis took just a few hours. I was checked into a room soon after and operated on two days later. The doctors did not have enough time to spend long with me but gave enough time to tell me what I needed and answer questions."

"My A&E experience was awful. Waited over 9 hours in Navan A&E and then several more hours in Drogheda. Very poor communication from staff on duty while waiting which made the wait even worse."

"A&E seems totally understaffed. Doctors and nurses do an excellent job but they are definitely under a lot of pressure because A&E is so busy all the time. They do an amazing job under the circumstances."

"The treatment and speed of both the clerical and medical staff in the A&E. I was in extreme pain and was dealt with by lovely people and quickly."

Admissions: what do these results mean?

Patient ratings of admission to Our Lady of Lourdes Hospital were similar to the national average and to the hospital's 2017 score. Even though the majority of patients said that they were treated with respect and dignity in the emergency department, this question scored below-average. While the question on waiting times in the emergency department was the lowest-scoring question for this stage of care, it nonetheless scored higher than the national average. 31% 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 Our Lady of Lourdes Hospital with the national average score for care on the ward (out of a maximum of 10)

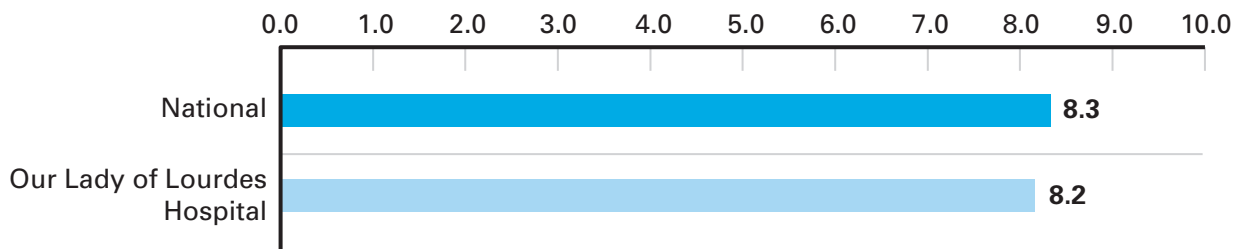
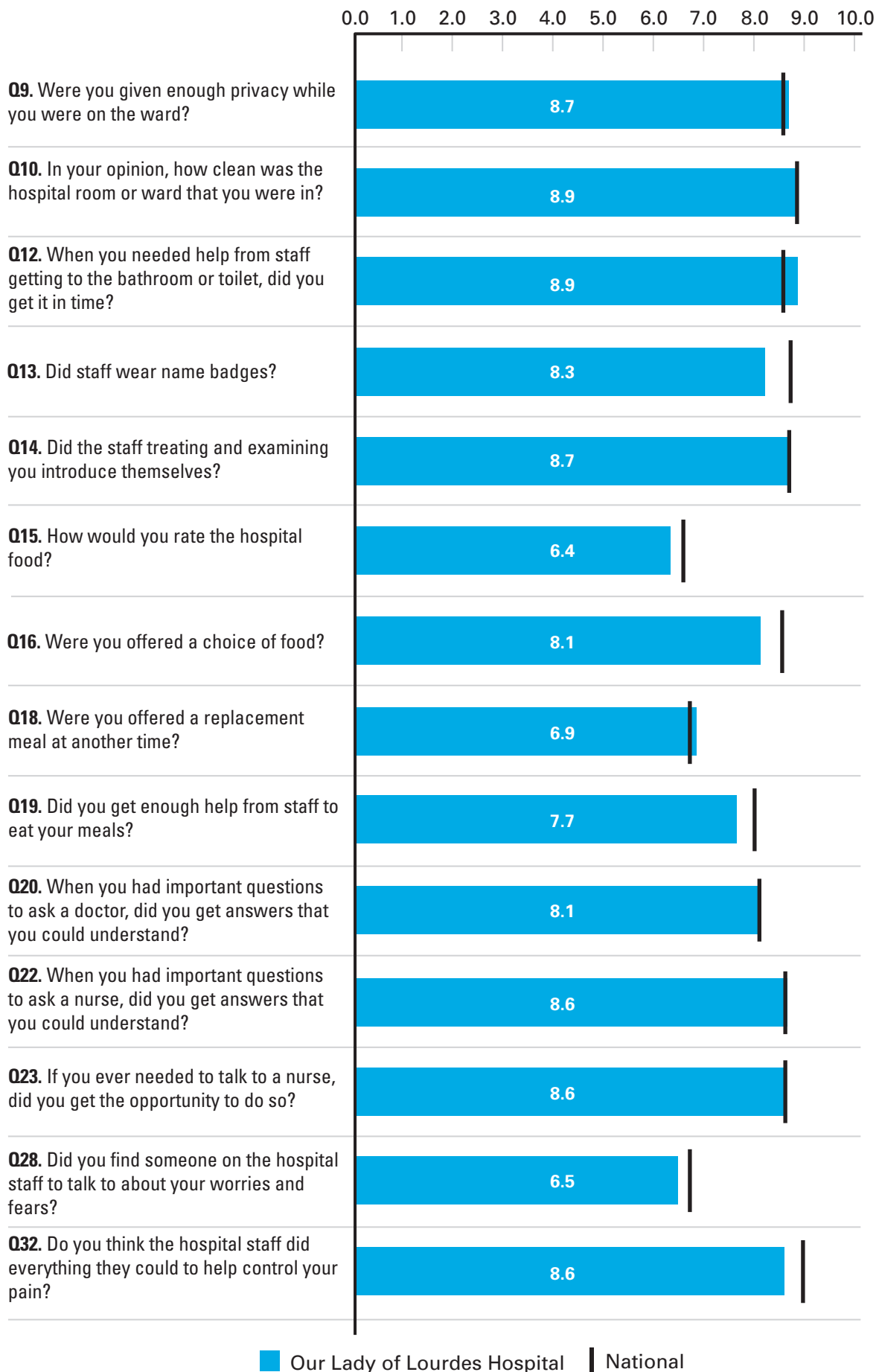


Figure 7 Our Lady of Lourdes Hospital scores for questions on care on the ward



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

"Yes, there was a male nurse. I think [nurse name] in the Cardiac ward to which I was transferred from A&E who was extremely attentive and very keen to make sure I knew all I needed to know and do whilst I was in the hospital. I was very impressed with his knowledge, commitment and caring nature."

"The nurses & doctors treated me with the most sensitive care possible. They helped me with every medical & emotional need. They could not be faulted in any way. The catering & household staff were the same - professional & caring."

"Wear gloves and clean hands. When my drip was stopped on occasions I needed the toilet, no gloves were ever used or hands washed before touching my drip. I was glad I only had to stay one night."

"The FOOD was nothing short of dreadful, how any chef could take good ingredients and leave them almost inedible when delivered to the ward will forever be a mystery to me. It takes special skill to ruin good food like this."

Care on the ward: what do these results mean?

Our Lady of Lourdes Hospital received similar ratings of care on the ward to the national average, and to last year's ratings. The highest-ranking question shows that the majority of patients got help from staff with getting to the bathroom or toilet on time. This question also scored higher than the national average. However, many patients were not satisfied with the food they ate in hospital, with this question falling below the national average.

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 Our Lady of Lourdes Hospital with the national average score for examinations, diagnosis and treatment (out of a maximum of 10)

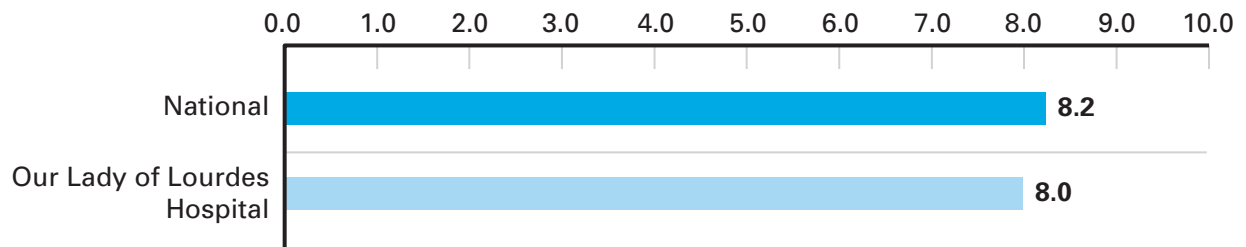
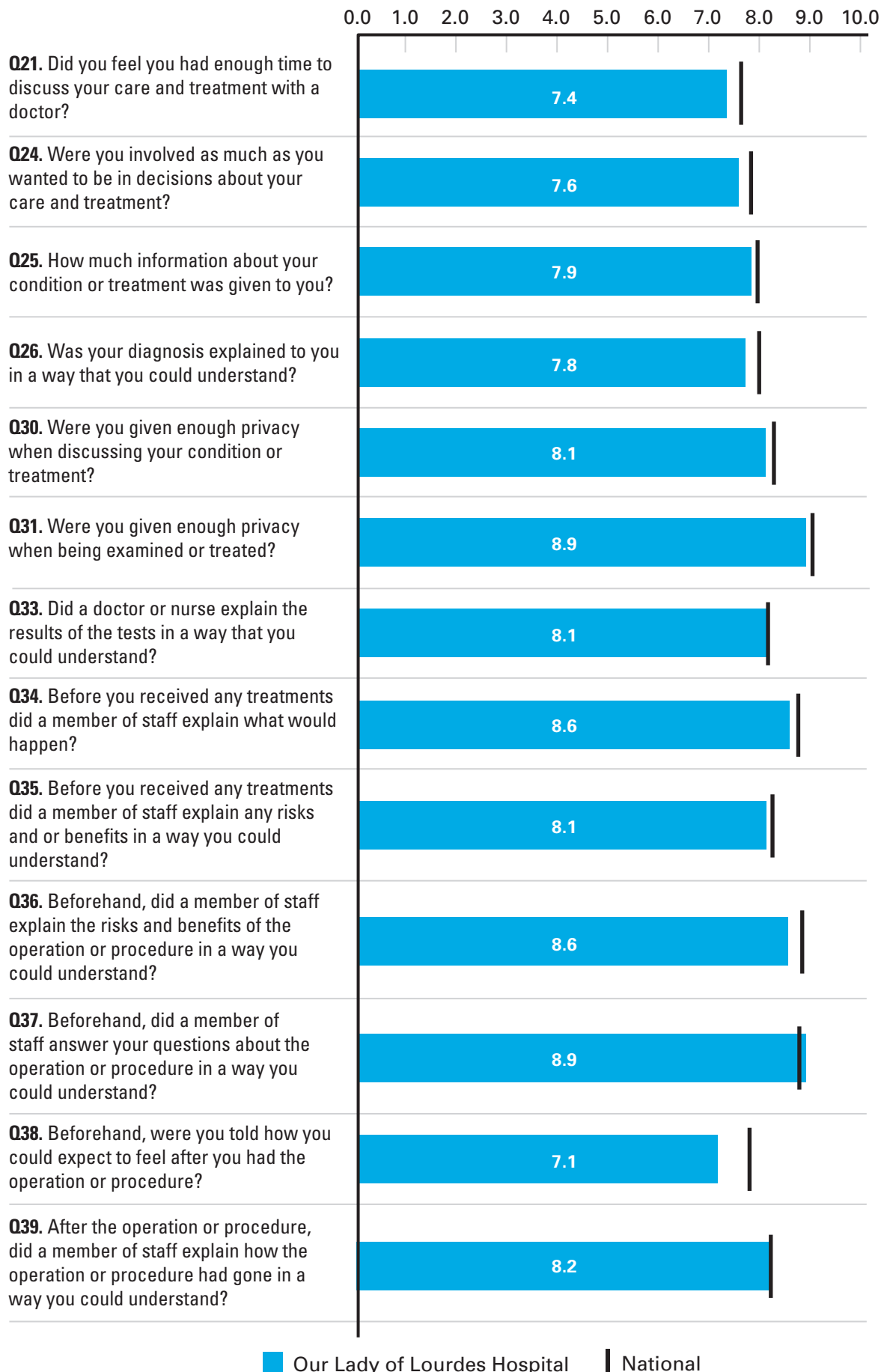


Figure 9 Our Lady of Lourdes Hospital scores for questions on examinations, diagnosis and treatment



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

"My care from the beginning of my stay was terrific. I can honestly say that the staff on the Gynae ward could not have been better. I have spent a good bit of time in hospital over the years and this was my best stay. The theatre staff on [date] came out to speak to me individually and made me feel so relaxed and included and involved, not just that I was having something 'done' to me. It was a wonderful experience instead of a bad one and I commend them. "

"The level of care and kindness from surgeons and doctors was superb. Communication and updates were frequent and I felt that I could ask anything and it was explained very clearly."

"Difficulty in achieving privacy due to 6 bedded ward. Also risk in relation to infection control due to close proximity of beds."

"The doctors never clearly explained what they thought was wrong with me. I got that I had some sort of [condition type], but I was having to piece together the likely diagnosis based on what the doctors were saying to each other. I understand that the doctors may not fully understand what is wrong with a patient (especially in the first 24h), but even a likely root-cause with caveats would provide some piece of mind and confidence that one is receiving the best possible care based on the information available."

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

Ratings of examination, diagnosis and treatment were slightly lower than the national average, and similar to what they were in 2017. Patients gave mixed ratings of the communication with staff in advance of their operation or procedure. For example, some people gave above-average ratings for the clarity of answers they received from staff before their operation; however, a number of patients said that they were not fully informed about how they could expect to feel after an operation or procedure. This was also the lowest-scoring question for examinations, diagnosis and treatment.

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.

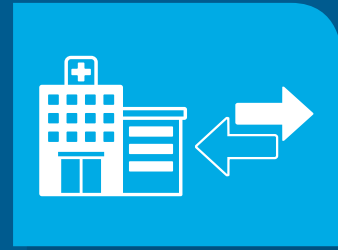


Figure 10 Comparison of Our Lady of Lourdes Hospital with the national average score for discharge or transfer (out of a maximum of 10)

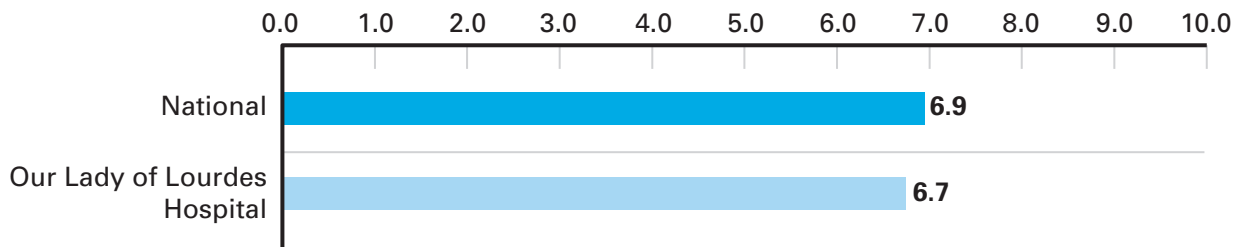
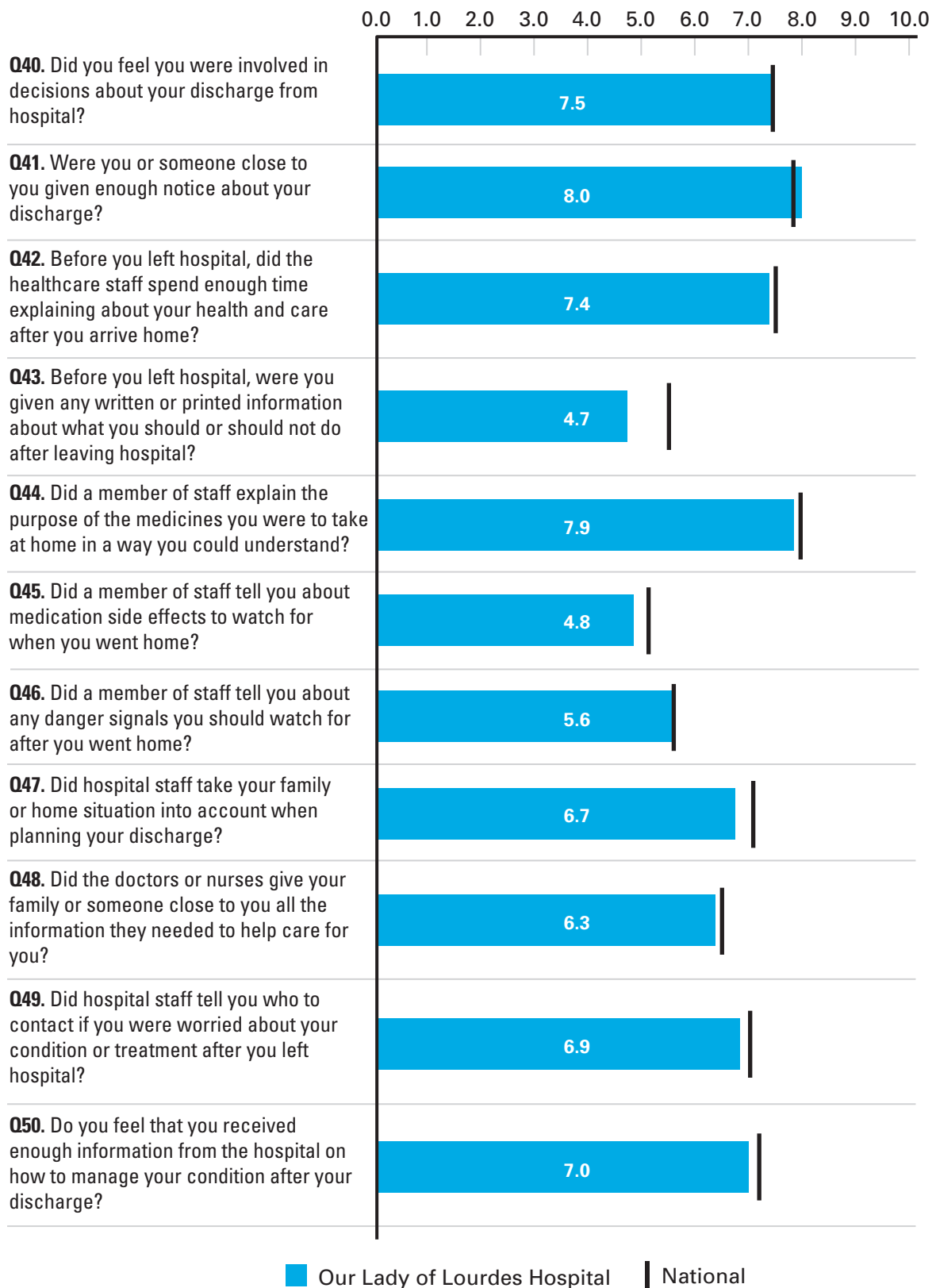


Figure 11 Our Lady of Lourdes Hospital scores for questions on discharge or transfer



The patient voice: what patients said about discharge or transfer

“Because I was given limited information on discharge, I had to phone the hospital and spoke to a very helpful nurse.”

“As a relation of this patient who is elderly and fell and [condition type] her discharge to a nursing home was very badly handled. The family wasn’t informed where or when she was being moved to until the home rang to inform that she was a patient with them.”

Discharge or transfer: what do these results mean?

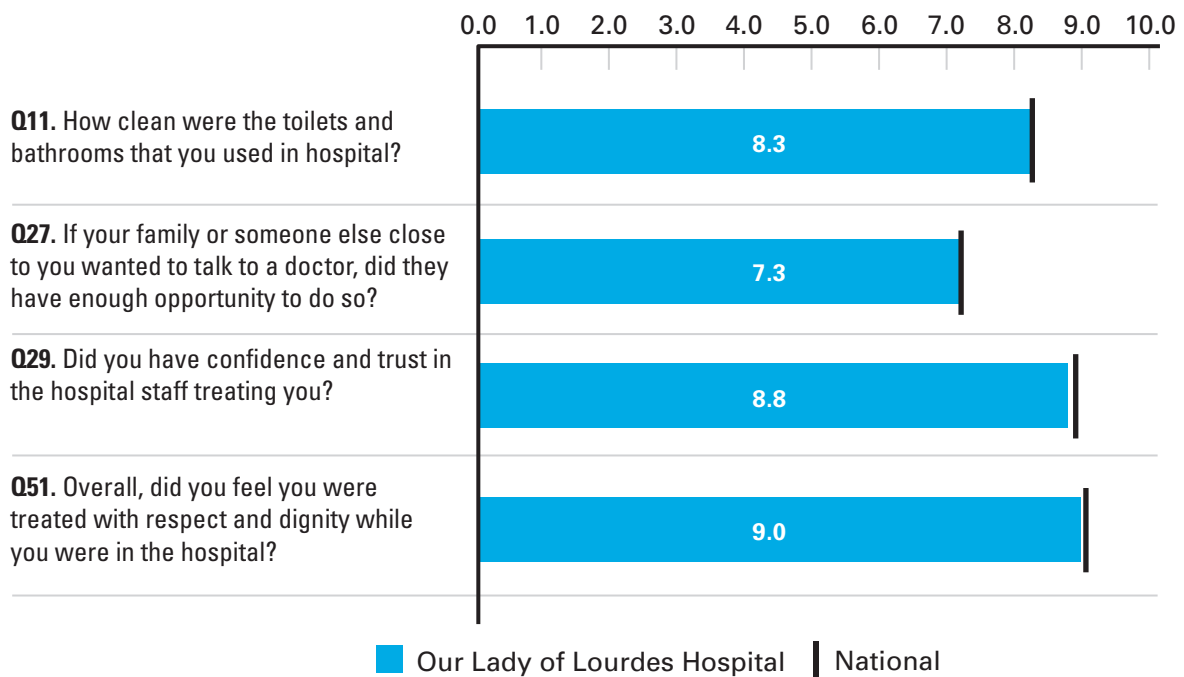
Participant ratings of this stage of care were slightly below the national average. Our Lady of Lourdes Hospital received similar ratings of discharge or transfer in 2018 as it did in 2017. The majority of patients were satisfied with the amount of notice they, or someone close to them, were given about their discharge. Many patients, however, negatively rated the discharge process. For example, the majority of patients highlighted that they were not given any written or printed information about what they should or should not do after leaving hospital. This was also the lowest-scoring question for the discharge or transfer stage of care.

Other aspects of care



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

Figure 12 Our Lady of Lourdes Hospital scores for other aspects of care



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

"Treated with great dignity and respect. Interpreters and [Nationality] personnel provided to explain things as English is not my 1st language."

"A noticeable improvement in hygiene and cleanliness from my last visit. I had a very thorough testing and felt confident leaving hospital that I have no health issues."

"Staff need to learn how important basic communication is. My next of kind had to constantly seek out staff to get basic information. No continuity of care - different nurses over 50 days every day. Very little confidence in our health care system."

"Communication with family explaining worries about reoccurring [condition type] while being off [medication] & [medication] for so long, it was family noticed slurred speech and informed a nurse who then put procedures in place."

Other aspects of care: what do these results mean?

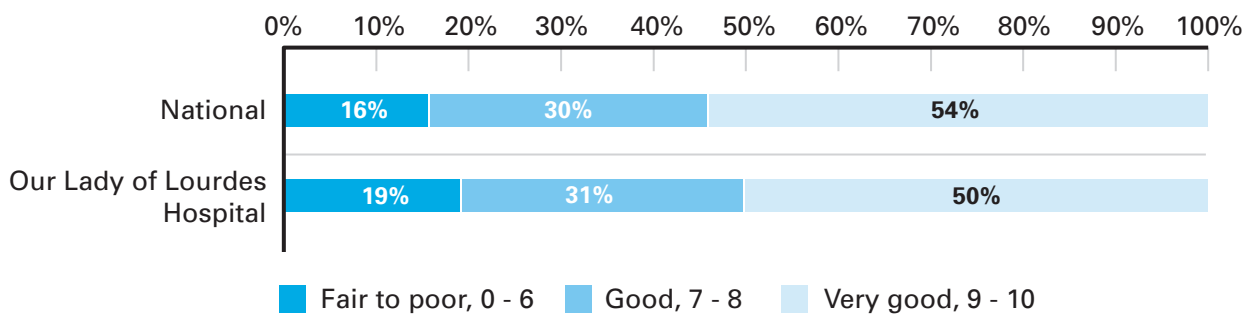
The ratings for the questions on other aspects of care were all below the national average. For example, while most participants said they were treated with respect and dignity, a number did not give a very positive rating in this area. Likewise, while most people said that their families had the opportunity to talk to a doctor, a number of patients pointed out that did this not always happen.

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. 50% of participants from Our Lady of Lourdes Hospital rated their care as very good, slightly below the national figure of 54%.

Figure 13 compares the average overall rating of hospital experience for Our Lady of Lourdes Hospital with the national average.

Figure 13 Overall rating of hospital experience for Our Lady of Lourdes Hospital and nationally



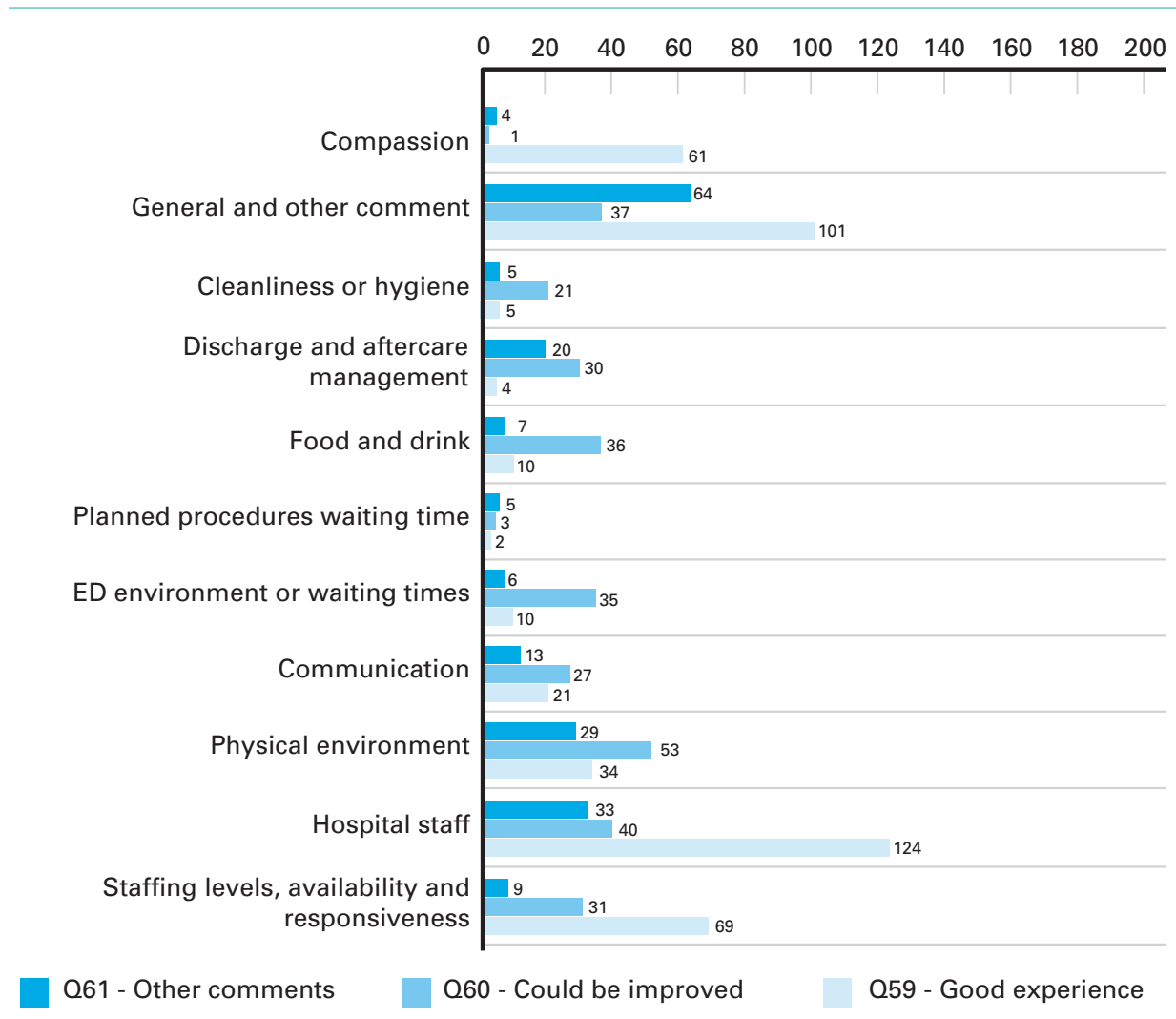
In their own words: analysis of patients' comments

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, 950 comments were received from patients of Our Lady of Lourdes Hospital in response to the free-text questions in the 2018 survey.

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

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

Figure 14 Participant comments by theme



Conclusion

What were patients' experiences of hospital care in Our Lady of Lourdes Hospital in May 2018?

Most patients had a positive overall experience at Our Lady of Lourdes Hospital. 81% of patients in the hospital said they had a 'good' or 'very good' experience, compared with 84% nationally.

Our Lady of Lourdes Hospital received similar scores to the national average across every stage of care. Participant ratings of care were also generally similar to those received in 2017.

Several areas of good experience were identified. Patients were very satisfied with the help they got from staff in getting to the bathroom or toilet. People also reported positive experiences of communication in hospital, with many saying that they always received clear explanations of their test results. In addition, patients gave positive ratings of their involvement in decisions about their discharge from hospital.

Patients also identified areas for improvement. A significant number of patients said that they were not treated with respect and dignity and did not always have confidence and trust in the staff treating them. The majority of patients who required information from the hospital on how to manage their condition at home said that they did not receive it. 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 Our Lady of Lourdes Hospital improve the experiences of patients in the hospital.

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 Our Lady of Lourdes 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.

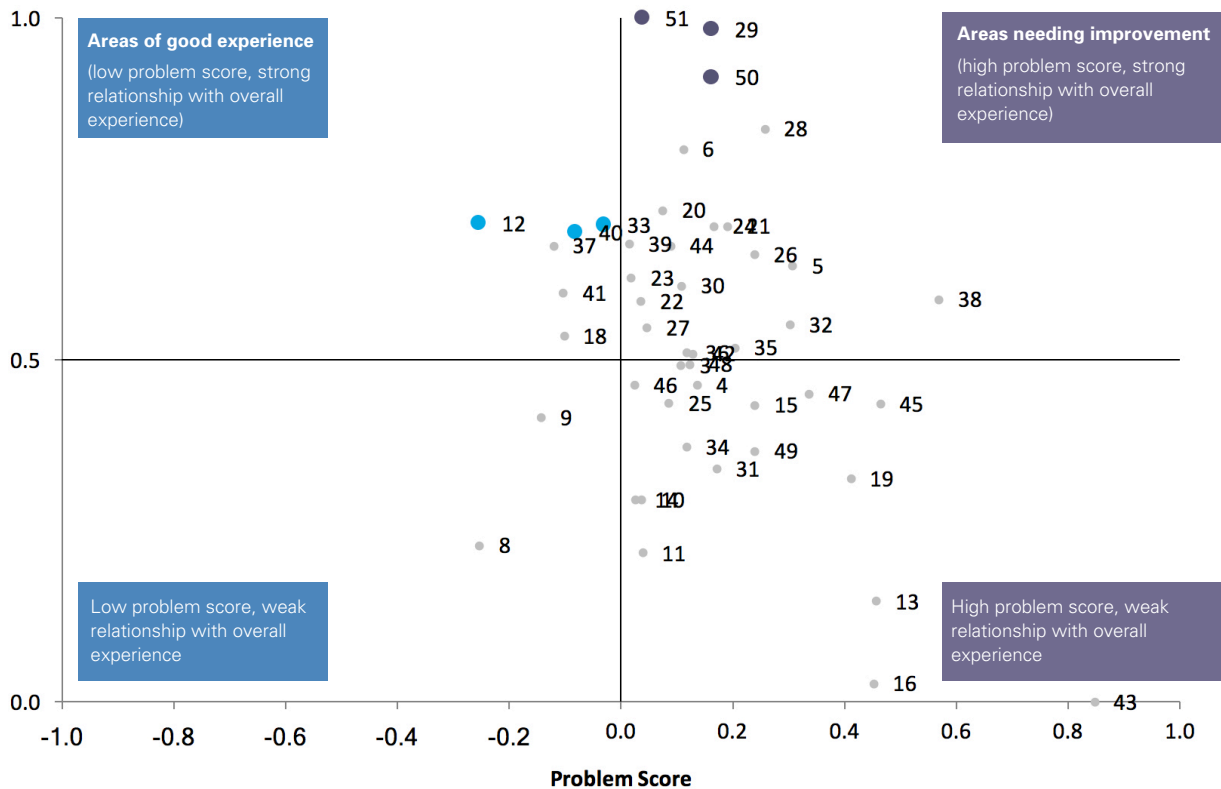
Interpreting the improvement map

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.