



National Patient Experience Survey 2018

St Luke's General Hospital



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Seirbhís Sláinte Build Níos Fearr Bette á Forbairt Serv



An Roinn Sláinte Department of Health



St Luke's General Hospital

2018 survey results **Overall experience** 2018 Very good Good Fair to poor 43% 52% 29% 19% 2017 43% 34% 22% response rate Values in figures do not always add up to 100% due to rounding. Areas of good experience Clear answers from Respect and dignity Privacy while being examin the ED ined or treated in the ED a nurse Areas needing improvement Confidence and trust in Respect and dignity Clear answers from a hospital staff doctor The patient voice "I had a very pleasant "Space between beds experience in Kilkenny very tight. Privacy is an hospital. The nurses issue as patients next to and care staff were you could hear all that very helpful and was being discussed by caring. I cannot praise nursing/medical staff." them highly enough." 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%. 288 patients from St Luke's General 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 <u>www.patientexperience.ie/improvements-in-care</u>.

What were the main findings for St Luke's General Hospital?

The majority of participants from St Luke's General Hospital reported positive experiences in hospital. 81% of participants said they had 'good' or 'very good' overall experiences, compared with 84% nationally. The hospital scored above-average for admissions but below-average on examinations, diagnosis and treatment.

A number of areas of good experience were identified. Patients of St Luke's General Hospital were very positive about communication with nurses and the majority said that when they had important questions, they always received answers they could understand from nurses. In addition, most patients said they were treated with respect and dignity in the emergency department. Furthermore, most patients said they received sufficient privacy while being examined or treated in the emergency department.

However, there were also several areas needing improvement. For example, many patients in St Luke's General Hospital were dissatisfied with the level of respect and dignity shown to them during their stay. Furthermore, an important number of people said that they lacked confidence and trust in the staff treating them.

Some improvements in patient experience ratings were identified since the 2017 survey. The findings of the 2018 survey will help St Luke's General Hospital to improve patients' experiences of care in the hospital.

Hospital and participant profile

St Luke's General Hospital is a public acute hospital located in Kilkenny. There were 219 inpatient beds available in the hospital during the survey period of May 2018.

628 people discharged from St Luke's General Hospital during the month of May 2018 were invited to participate in the survey. 288 people completed the survey, achieving a response rate of 45%. 44.4% of participants were male and 55.6% were female. 259 respondents (89.9%) said that their stay in hospital was an emergency. Figure 1 below provides information on the respondents who took part in the survey from St Luke's General Hospital.



Participants from St Luke's General Hospital by gender, age group and admission Figure 1

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 St Luke's General Hospital are:

Admissions	193 people (82% of those who answered this question) said that they
Privacy while being examined or treated in the emergency department Q5	were definitely given enough privacy while being examined or treated in the emergency department.
Admissions	215 people (89% of those who answered this question) said that they
Respect and dignity in the emergency department Q6	were always treated with respect and dignity in the emergency department.
Care on the ward	193 people (76% of those who answered this question) said that
Clear answers from a nurse Q22	when they had important questions to ask a nurse they always got answers that they could understand.

The areas needing improvement in St Luke's General Hospital are:

Care on the ward	Of the 253 people who had important questions to ask a doctor, 95 (38%)						
Clear answers from a doctor Q20	said that they did not get, or only sometimes got answers that they could understand.						
Other aspects of care	Of the 272 people who answered this question, 65 (24%) said that they						
Confidence and trust in hospital staff Q29	did not have, or only sometimes had confidence and trust in the hospital staff treating them.						
Other aspects of care	Of the 271 people who answered this question, 51 (19%) said that they						
Respect and dignity Q51	were not, or were only sometimes, treated with respect and dignity while they were in the hospital.						

Survey results for the stages of care along the patient journey

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

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



Interpreting the results for the stages of care

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

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

Changes in patient experience over time

There was little change from 2017 to 2018 in participants' average rating of their overall experience. Some small improvements for care on the ward and discharge or transfer were identified; however, the differences were not 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 scores¹ for St Luke's General 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 St Luke's General Hospital with the national average score for admissions (out of a maximum of 10)



* Denotes a statistically significant difference from the national average.

Figure 4 St Luke's General Hospital scores for questions on admissions



Emergency department waiting times²

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

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

In St Luke's General Hospital, 75 respondents (34%) said they were admitted to a ward within six hours of arriving at the emergency department, while 122 respondents (56%) reported waiting between six and 24 hours. 21 respondents (10%) reported waiting 24 hours or more before being admitted to a ward in St Luke's General Hospital, with 3 of these saying they waited more than 48 hours.

Figure 5 outlines the patient-reported waiting times in St Luke's General Hospital, compared with the national average.





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

The patient voice: what patients said about admissions

"Yes the care received from [name] a male nurse working in A&E was exceptional, he had excellent communication skills and a very good rapport with patients and family members, reassuring us while we were in A&E."

"A&E departments are very under-staffed. I attended after an RTA and was left for 2 hours before being seen. Left to sleep on corridor in hospital for 4 hours in A&E."

"St Luke's Hospital needs between 40/60 additional beds on the wards due to volume of patients. I have had two admissions since October and spent 5 days on the corridors — not the fault of anyone, but it would be fair to say that it is the Achilles heel of St Luke's and could be improved upon." "Excellent care in A&E."

Admissions: what do these results mean?

Patient ratings of admission to St Luke's General Hospital were similar to what they were in the 2017 survey but were significantly higher than this year's national average. The majority of patients were very positive in terms of the respect and dignity they were shown in the emergency department, with this question scoring above-average. However, a number of people said that they did not receive entirely understandable explanations about their condition. This question scored below the national average.

St Luke's General Hospital performed above the national average on emergency department waiting times. 34% of participants said that they were admitted to a ward within the recommended six hours. This is below the target level. 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 St Luke's General Hospital with the national average score for care on the ward (out of a maximum of 10)



	0.0	1.0	2.0	3.0	4.0	5.0	6.0	7.0	8.0	9.0	10.0
Q9. Were you given enough privacy while you were on the ward?	9	-			7.8	-					
Q10. In your opinion, how clean was the hospital room or ward that you were in?					8.8						
Q12. When you needed help from staff getting to the bathroom or toilet, did you get it in time?					8.5						
Q13. Did staff wear name badges?					8.6						
Q14. Did the staff treating and examining you introduce themselves?					8.5						
Q15. How would you rate the hospital food?					6.6						
Q16 . Were you offered a choice of food?					8.9						
Q18. Were you offered a replacement meal at another time?					6.2						
Q19. Did you get enough help from staff to eat your meals?	D				8.0						
020. When you had important questions to ask a doctor, did you get answers that you could understand?					7.6						
022. When you had important questions to ask a nurse, did you get answers that you could understand?					8.6						
023. If you ever needed to talk to a nurse did you get the opportunity to do so?	,				8.3						
028. Did you find someone on the hospita staff to talk to about your worries and fears?					6.4						
032. Do you think the hospital staff did everything they could to help control you pain?	r				8.8						

Figure 7 St Luke's General Hospital scores for questions on care on the ward

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

"Nothing. The ward & everything to do with the stroke unit was spotless." "I would like to highlight how kind and caring every member of staff was. Caring staff, nurses, doctors, admin, technicians, x-ray and household staff."

"Space between beds very tight. Privacy an issue as patients next to you could hear all that was being discussed by nursing / medical staff. Cleaning was being done when dinners served. Not enough help for patients who couldn't feed themselves- food left away from them- no assistance given to eat meals." "I found communication with a key member of staff difficult @ ward level. There was a huge turnover of staff & no key person looking after my Dad to communicate with around his care. This is v. frustrating for family members. A large portion of time was put in trying to find someone to communicate effectively with."

Care on the ward: what do these results mean?

St Luke's General Hospital received slightly higher ratings of care on the ward in 2018 compared to last year's survey. Participant ratings for this stage of care were somewhat lower than the national average, though this difference was not statistically significant. Patients gave mixed answers to the questions on food, however a large number of people said that they were always offered a choice of food; with this question scoring above the national average. Nevertheless, many patients gave below-average ratings for Q18 as they were dissatisfied with the availability of replacement meals.

Examinations, diagnosis and treatment



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

Figure 8 Comparison of St Luke's General Hospital with the national average score for examinations, diagnosis and treatment (out of a maximum of 10)



* Denotes a statistically significant difference from the national average.

Figure 9 St Luke's General Hospital scores for questions on examinations, diagnosis and treatment

	0.0	1.0	2.0	3.0	4.0	5.0	6.0	7.0	8.0	9.0	10.0
021. Did you feel you had enough time to discuss your care and treatment with a doctor?					7.0					l	l
024. Were you involved as much as you wanted to be in decisions about your care and treatment?					7.5						
025. How much information about your condition or treatment was given to you?					7.4						
026. Was your diagnosis explained to you in a way that you could understand?					7.6						
Q30. Were you given enough privacy when discussing your condition or treatment?					7.6						
Q31. Were you given enough privacy when being examined or treated?					8.7						
Q33. Did a doctor or nurse explain the results of the tests in a way that you could understand?					7.5						
034. Before you received any treatments did a member of staff explain what would happen?					8.5						
Q35. Before you received any treatments did a member of staff explain any risks and or benefits in a way you could understand?					7.7						
Q36. Beforehand, did a member of staff explain the risks and benefits of the operation or procedure in a way you could understand?					8.3						
Q37. Beforehand, did a member of staff answer your questions about the operation or procedure in a way you could understand?					8.4						
Q38. Beforehand, were you told how you could expect to feel after you had the operation or procedure?					7.9						
Q39. After the operation or procedure, did a member of staff explain how the operation or procedure had gone in a way you could understand?					7.9						

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

"I had a very pleasant experience in Kilkenny hospital. The nurses and caring staff were very helpful and caring. I cannot praise them highly enough. The doctors sometimes could take more time explaining the diagnosis more clearly."

"I know the doctors and nurses are excellent at their jobs and it is always very busy. I just needed a bit more time for them to explain my treatment. Between A&E and the surgical ward my file was missing - it was left in the wheelchair they brought me up in. No one knew til they found the file that I was supposed to be fasting and no one told me." "Treatment of elder patients, given no privacy. Nurses discussed patients' conditions with the possibility of others overhearing. Carers would roll their eyes and be quite arrogant towards the older patients. Time taken to receive medicine. Urine bags were emptied during dinner time very off-putting."

"The nurse staff and my consultant were very good. They explained every detail about my condition as simple as they could so I could understand it and went out of their way to help."

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

Ratings of examination, diagnosis and treatment were similar to last year, but were significantly lower than the 2018 national average. A significant number of people were satisfied with the privacy they were given when being examined or treated. Many patients were, however, much less positive about the time they had to discuss their care and treatment with a doctor. In both areas the hospital scored below the national average.

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 related to this stage of care.



Figure 10 Comparison of St Luke's General Hospital with the national average score for discharge or transfer (out of a maximum of 10)



	0.0	1.0	2.0	3.0	4.0	5.0	6.0	7.0	8.0	9.0	10.0
Q40. Did you feel you were involved in decisions about your discharge from hospital?					6.9					I	I
Q41. Were you or someone close to you given enough notice about your discharge?					7.4						
042. Before you left hospital, did the healthcare staff spend enough time explaining about your health and care after you arrive home?					7.3						
Q43. Before you left hospital, were you given any written or printed information about what you should or should not do after leaving hospital?					5.4						
Q44. Did a member of staff explain the purpose of the medicines you were to tal at home in a way you could understand?					7.6						
Q45. Did a member of staff tell you about medication side effects to watch for when you went home?					5.0						
Q46. Did a member of staff tell you about any danger signals you should watch for after you went home?					4.9						
Q47. Did hospital staff take your family or home situation into account when planning your discharge?					6.9						
Q48. Did the doctors or nurses give your family or someone close to you all the information they needed to help care for you?					6.1						
Q49. Did hospital staff tell you who to contact if you were worried about your condition or treatment after you left hospital?					6.5						
Q50. Do you feel that you received enough information from the hospital on how to manage your condition after your discharge?					6.7						

Figure 11 St Luke's General Hospital scores for questions on discharge or transfer

The patient voice: what patients said about discharge or transfer

"A little more explanation re meds on discharge - I took the stomach tablets, even though I didn't need the heavy pain meds, and discovered later that without the latter, I didn't need the former. I was in hospital during the May heatwave, and had to sit on a concrete step in the physic carpark, to let the sun on my face for a short while. I feel a dedication of some space to 'wellness', rather than the 'sickness' might help - but I understand limited resources vs priorities."

"I feel an elderly man should not be discharged without a family member collecting him. He was discharged to a waiting area over the coffee dock in his night wear & had to wait for one of his family to collect him."

Discharge or transfer: what do these results mean?

St Luke's General Hospital received slightly improved ratings of discharge or transfer in 2018 compared to its score in the 2017 survey. Participant ratings for this stage of care were still below the national average in 2018, however, the difference was not statistically significant. In addition, the hospital scored below the national average on every question related to discharge or transfer. Even though the majority of patients said they received a clear explanation of the purpose of the medicines they were prescribed, most people said they left the hospital not fully informed of the danger signals to watch out for.

Other aspects of care

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



Figure 12 St Luke's General Hospital scores for other aspects of care



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

"The treatment, care and attention I received from everyone was exceptional doctors, consultant, nurses, diagnostic staff - they were all fabulous. I could not fault any care I received. I was treated with respect and dignity at all times (with the exception of one isolated incident). I would commend the kitchen (serving) staff also. I witnessed many random acts of kindness by them towards vulnerable patients and they were unfailingly pleasant and helpful at all the time."

"Whoever had the low, mean frustrating idea of mixing men and women in the wards? It is degrading and humiliating to old people who paid their taxes all their working lives and who are entitled to respect and dignity and privacy in their old age."

"The staff did all they could and I was treated with courtesy and respect at all times."

"Nurses / doctors / consultants are too busy to spend time with family & patient to know what's best all round plans / action for the patient. They simply treat the area of concern & ignore any other underlying condition. Less paperwork & more 'caring' required."

Other aspects of care: what do these results mean?

With the exception of Q11, the ratings for the questions on other aspects of care were below the national average. For example, while most participants said they were treated with respect and dignity, an important number did not give a positive rating in this area. Furthermore, a number of people said that their families and friends often did not get the opportunity 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. 52% of participants from St Luke's General 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 St Luke's General Hospital with the national average.





In their own words: analysis of patients' comments

The last three questions (questions 59-61) of the survey asked patients to provide additional information, in their own words, on their experiences in hospitals. These free-text questions allowed people to give a more in-depth description of specific aspects of their care. It also allowed them to talk about various things (good or bad) that could not be captured by the structured questions. In total, 602 comments were received from patients of St Luke's General 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 'hospital staff' and 'physical environment' themes.



Figure 14 Participant comments by theme

Conclusion

What were patients' experiences of hospital care in St Luke's General Hospital in May 2018?

The majority of participants had a positive overall experience in St Luke's General Hospital. 81% of patients at the hospital said they had a 'good' or 'very good' experience, compared with 84% nationally.

St Luke's General Hospital scored above-average on admissions, but below-average on examinations, diagnosis and treatment. The differences between the national average and the remaining stages of care were not statistically significant. Participant ratings of care were generally more positive than those received in 2017, but none of the differences were statistically significant.

A number of areas of good experience were apparent. The majority of patients said that when they had important questions, they always received answers they could understand from nurses. In addition, most patients said they were treated with respect and dignity in the emergency department. Furthermore, most patients said they received sufficient privacy while being examined or treated in the emergency department.

Several areas needing improvement were identified. Some patients of St Luke's General Hospital said that they did not get clear answers from doctors and that they were not always treated with respect and dignity. A number of patients also did not have complete confidence and trust in the staff treating them.

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 doctors did not answers their questions in a manner that they could understand were less likely to give a positive rating of their overall experience.

The findings of the 2018 survey will be used to help St Luke's General 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 St Luke's General 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

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- 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.