



National Patient Experience Survey 2018

University Hospital Kerry

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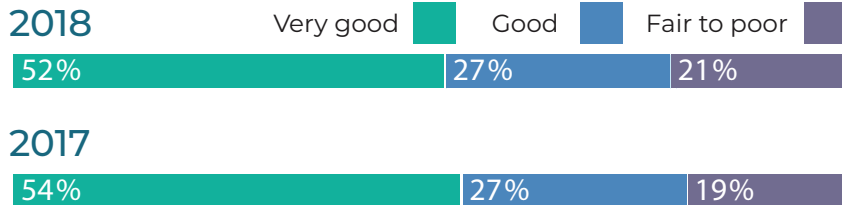
An Roinn Sláinte
Department of Health



University Hospital Kerry

2018 survey results

Overall experience



response rate

Areas of good experience



Offer of a replacement meal



Explanation of the purpose of medications



Information on how to manage a condition

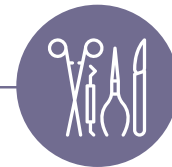
Areas needing improvement



Respect and dignity



Confidence and trust in hospital staff



Clear explanation of the risks/benefits of an operation or procedure

The patient voice

"The doctors explained everything to me every step of the way which helped me understand what was going on."



"I had to keep a very close eye on meds and tablets I was given because there were mistakes, mostly at night, maybe because of shortage of staff and nurses overworked."

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%. 239 patients from University Hospital Kerry 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 University Hospital Kerry?

The majority of participants from University Hospital Kerry reported positive experiences in hospital. 79% 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, participants who required replacement meals generally received them. In addition, participants were usually clearly informed about medications to take at home and how to manage their condition after discharge.

However, there were also several areas needing improvement. A number of participants felt that the risks and benefits of a procedure they were due to undergo were not explained clearly by a member of staff. In addition, below-average scores were reported in relation to patients' confidence and trust in hospital staff, and being treated with respect and dignity.

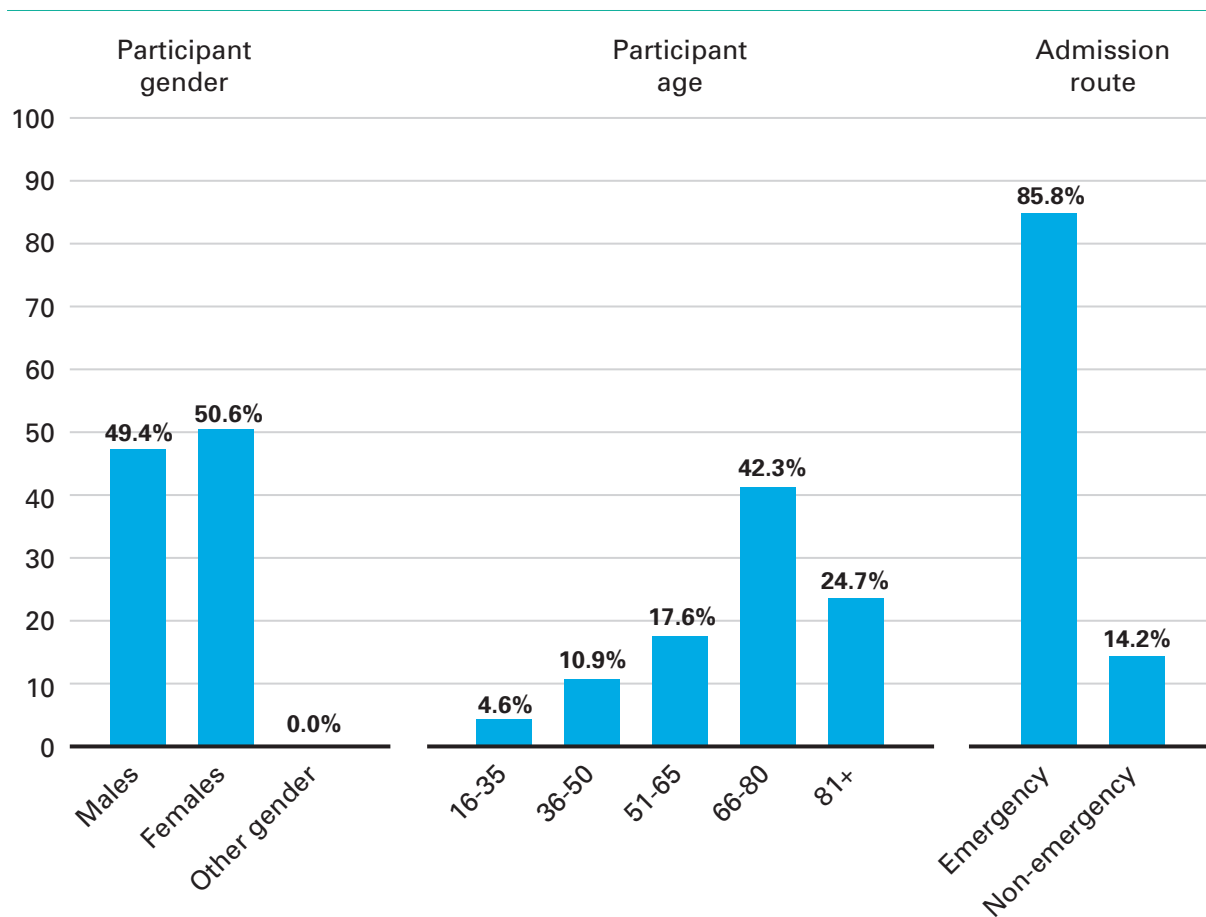
Some improvements in patient experience ratings were identified compared with the 2017 survey. The findings of the 2018 survey will help University Hospital Kerry to continue to improve patients' experiences of care in the hospital.

Hospital and participant profile

University Hospital Kerry is a public acute hospital located in Co. Kerry. There were 260 inpatient beds available in the hospital during the survey period of May 2018.

483 people discharged from University Hospital Kerry during the month of May 2018 were invited to participate in the survey. 239 people completed the survey, achieving a response rate of 49%. 49.4% of participants were male and 50.6% were female. 205 respondents (85.8%) said that their stay in hospital was an emergency. Figure 1 below provides information on the respondents who took part in the survey from University Hospital Kerry.

Figure 1 Participants from University Hospital Kerry 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 University Hospital Kerry are:

<p>Care on the ward</p>	<p>44 (69%) of the 64 people who missed a meal said that they were always offered a replacement.</p>
<p>Offer of a replacement meal Q18</p>	
<p>Discharge or transfer</p>	<p>135 people (76%) said that a member of staff completely explained the purpose of medications they were to take at home.</p>
<p>Explanation of the purpose of medications Q44</p>	
<p>Discharge or transfer</p>	<p>124 people (64%) said that they were definitely given enough information on how to manage their condition after discharge.</p>
<p>Information on how to manage a condition Q50</p>	

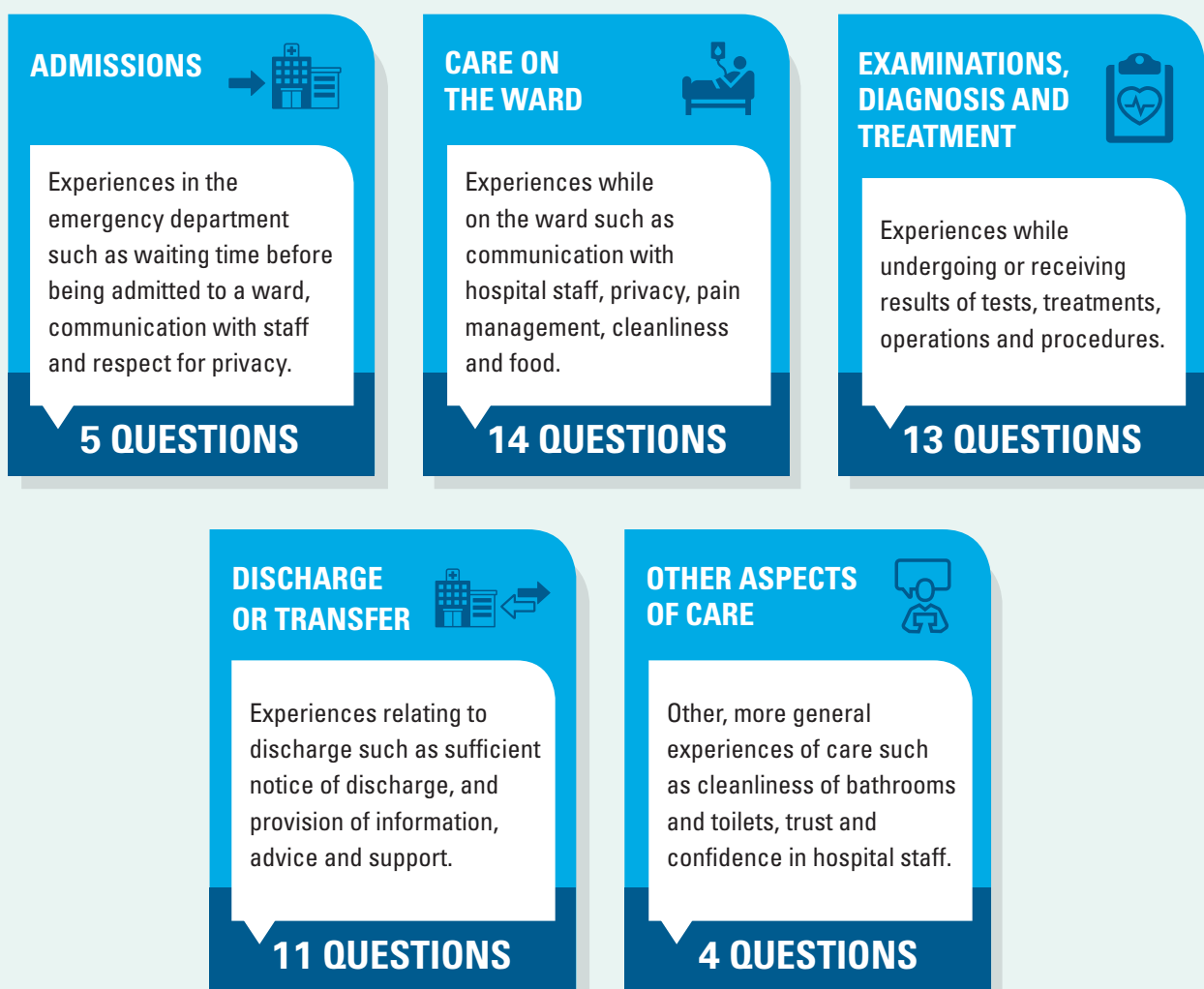
The areas needing improvement in University Hospital Kerry are:

Other aspects of care	<p>Of the 232 people who answered this question, 45 (19%) said that they did not have, or only sometimes had, confidence and trust in the hospital staff treating them.</p>
Confidence and trust in hospital staff Q29	
Examinations, diagnosis and treatment	<p>33 people (26%) said that a member of staff did not explain, or only to some extent explained, the risks and benefits of a procedure in a way they could understand.</p>
Clear explanation of the risks/benefits of an operation or procedure Q36	
Other aspects of care	<p>44 people (19%) said that they were not, or were only sometimes, treated with respect and dignity while they were in hospital.</p>
Respect and dignity Q51	

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.

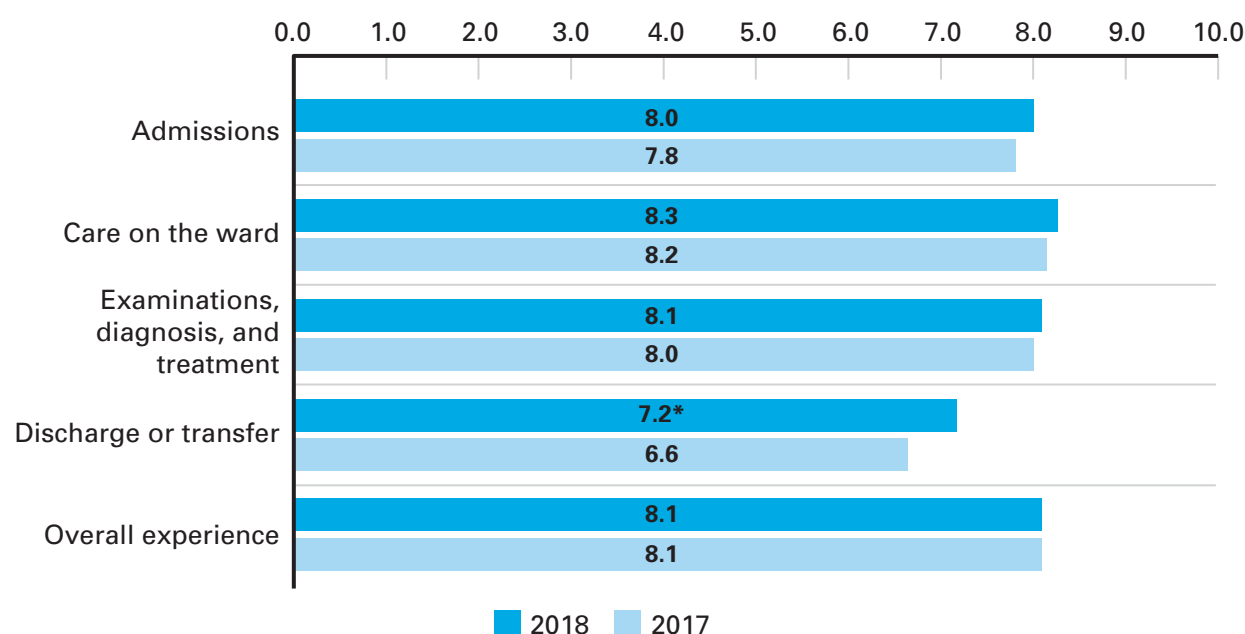
Statistical tests were carried out to examine if there were significant differences in patient experience between 2017 and 2018, as well as between a hospital and the national average. For further information on the analyses please consult Appendix 3 of the 2018 national report, available from www.patientexperience.ie.

Changes in patient experience over time

Participants' average rating of their overall experience remained the same in 2018 as in 2017. The greatest improvement for University Hospital Kerry has been achieved in the area of discharge or transfer. In addition, the 2018 ratings for admissions; care on the ward; and examinations, diagnosis and treatment are slightly above what they were in 2017. 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 University Hospital Kerry for 2017 and 2018



* Denotes a statistically significant difference between 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

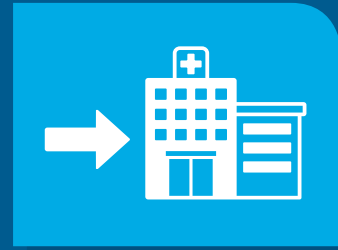


Figure 3 compares the hospital's overall score for admissions with the national average. Figure 4 shows the hospital's scores for questions on this stage of care.

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

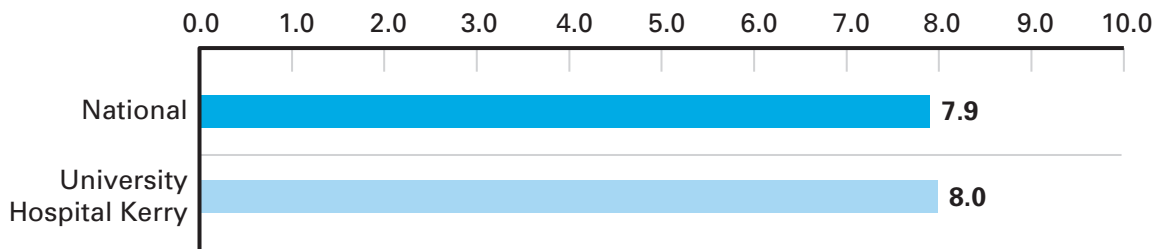
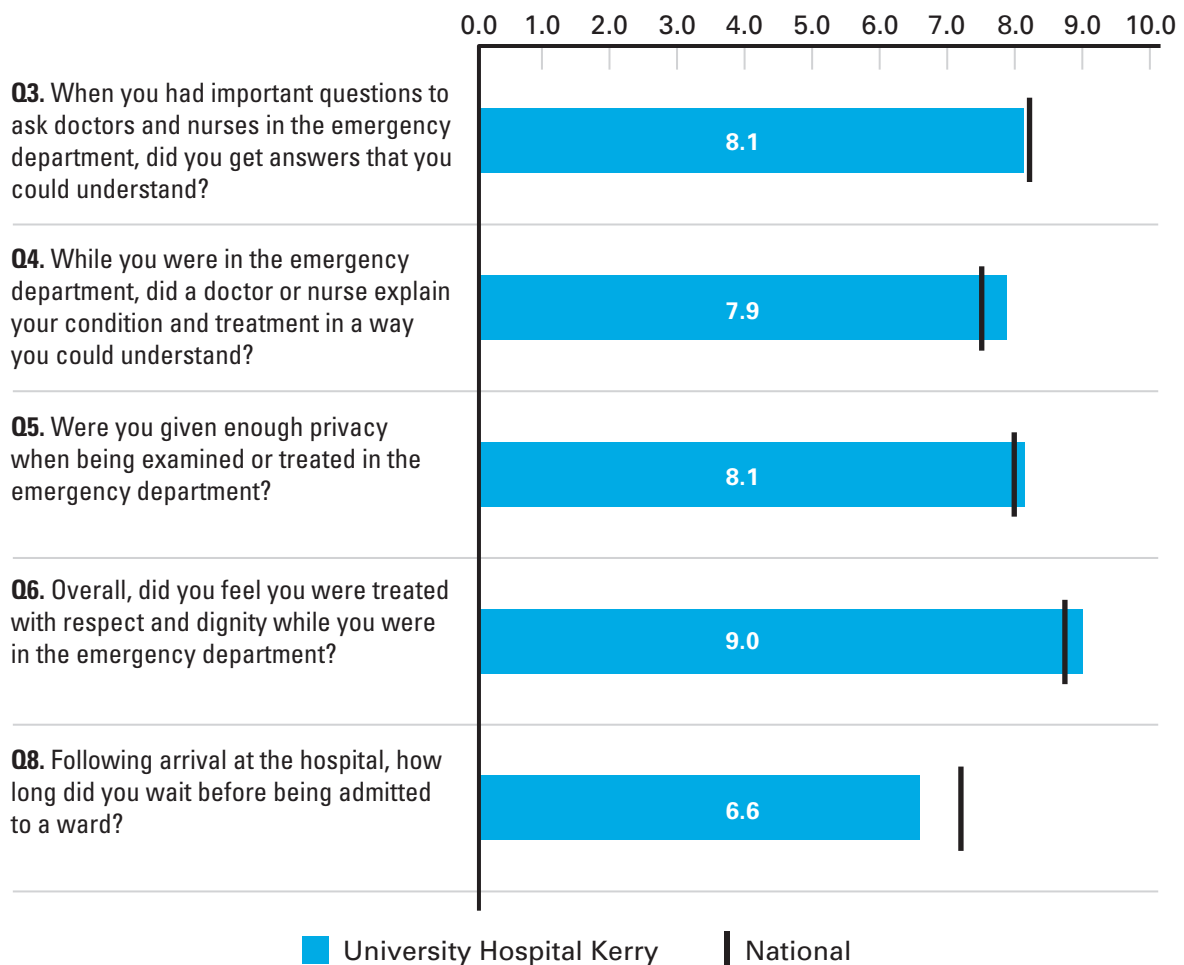


Figure 4 University Hospital Kerry scores for questions on admissions



Emergency department waiting times²

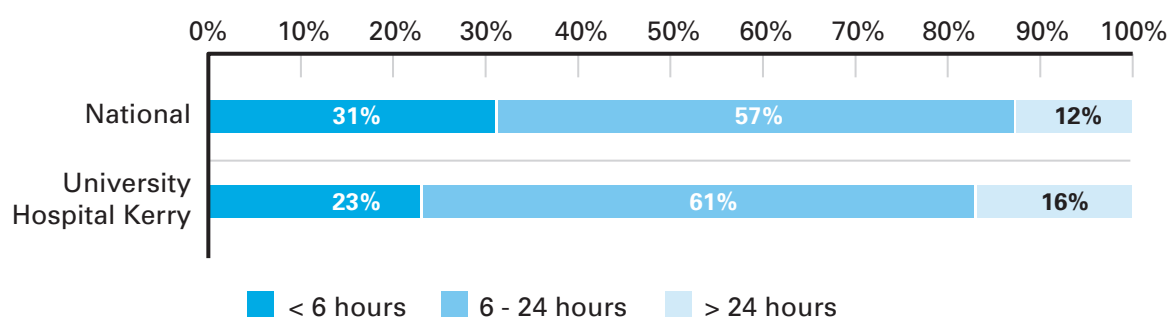
The HSE sets targets for the performance of acute hospitals, including targets on waiting times in emergency departments, such as:

- 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 University Hospital Kerry, 43 respondents (23%) said they were admitted to a ward within six hours of arriving at the emergency department, while 114 respondents (61%) reported waiting between six and 24 hours. 30 respondents (16%) reported waiting 24 hours or more before being admitted to a ward in University Hospital Kerry, with 7 of these saying they waited more than 48 hours.

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

Figure 5 Patient-reported emergency department waiting times for University Hospital Kerry and nationally



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

The patient voice: what patients said about admissions

"Though I was on a trolley for some time, staff were always very busy & always had a smile on their face."

"Overall I got excellent attention from the staff in A and E and in the ward."

"Overcrowding in A+E. I was one day on a chair and two days on a trolley before getting a bed. There were people sicker than me and on trollies — it's disgraceful. Nurses & doctors are under awful pressure. The health system needs to change."

"The waiting time in A+E, for elderly people. I was on a trolley for 17 hrs at my age and there were older than me — that is not right in this day & age."

Admissions: what do these results mean?

Patient ratings of admission to University Hospital Kerry were slightly more positive than in the 2017 survey and were similar to this year's national average. In general, participants reported positive experiences of communication from nurses and privacy in the emergency department. However, the hospital performed below the national average on emergency department waiting times. 23% 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 University Hospital Kerry with the national average score for care on the ward (out of a maximum of 10)

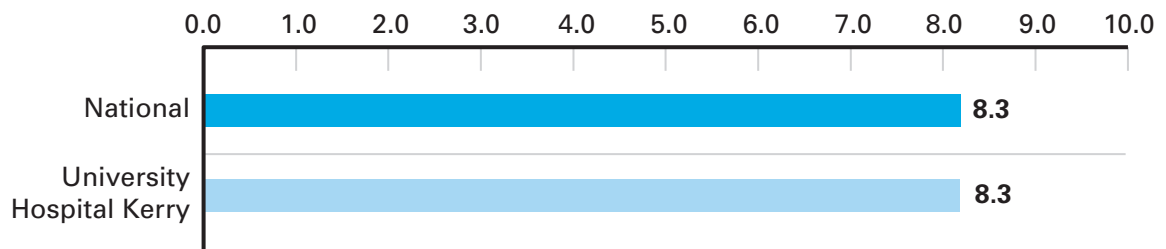
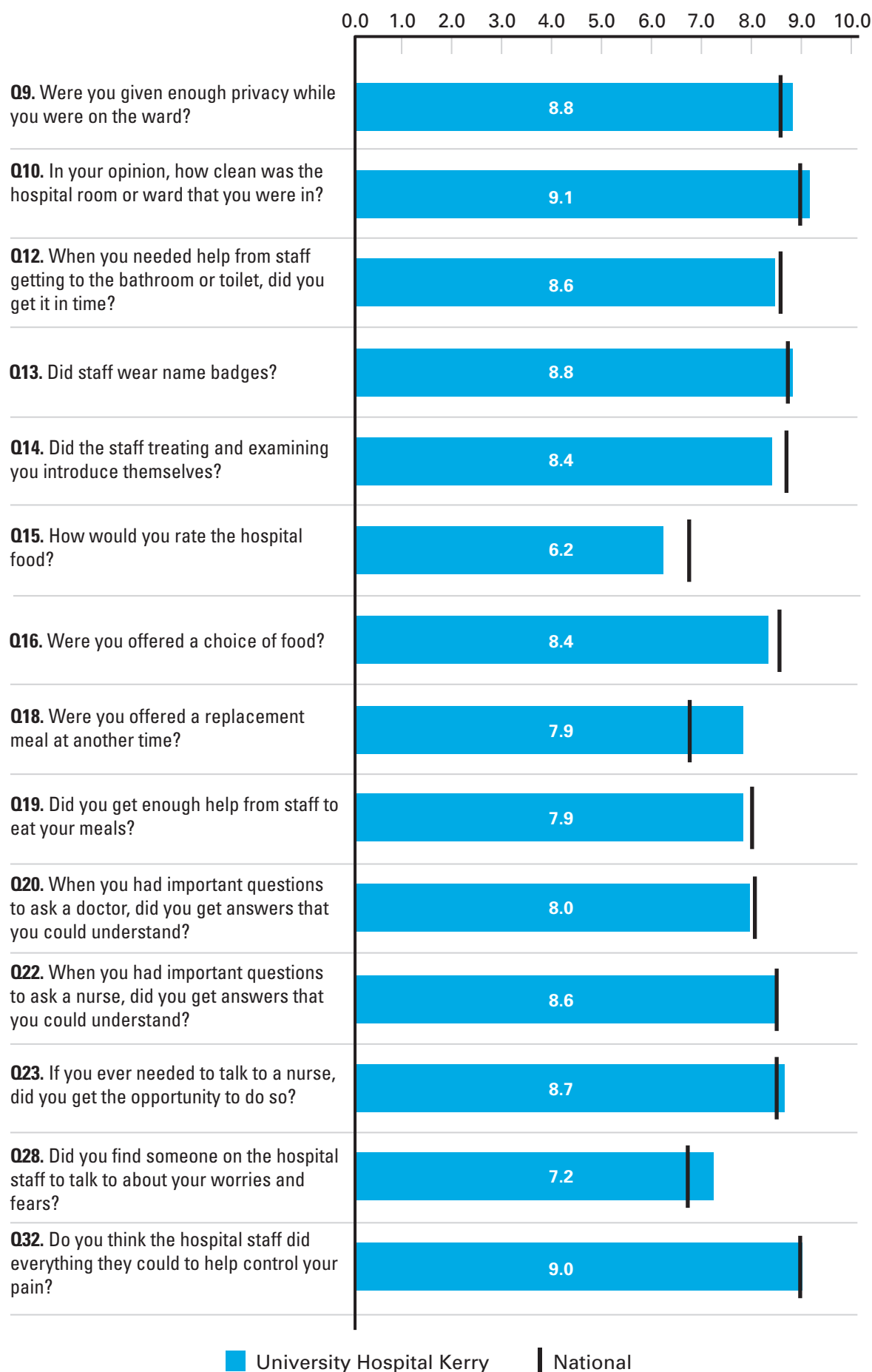


Figure 7 University Hospital Kerry scores for questions on care on the ward



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

"The general atmosphere in the ward, as created by the doctors and nurses, was bright and cheerful. The cleaning staff, who did an excellent job in keeping the place clean, were also cheerful and respectful. The catering staff who brought our meals, likewise, and were happy to accommodate any requests one might have."

"Food could be improved, not very tasty, same nearly every day. Toilets could be cleaned a lot better and deodorised. Cleaners could do with more training on hygiene in wards."

"Every staff member was excellent in their role and took care of the patient and their family and explained everything at all times and treated us all with great care and dignity."

"I had to keep a very close eye on meds and tablets I was given because there were mistakes, mostly at night, maybe because of shortage of staff and nurses overworked."

Care on the ward: what do these results mean?

University Hospital Kerry received slightly higher ratings of care on the ward than in last year's survey. Participant ratings for this stage of care were similar to the national average. Patients gave mixed views of the food in the hospital but the majority of patients who required a replacement meal received one. Overall, patient ratings of the hospital food were below the national average. However, the majority of patients were satisfied with the cleanliness of the room or ward they stayed in.

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 University Hospital Kerry with the national average score for examinations, diagnosis and treatment (out of a maximum of 10)

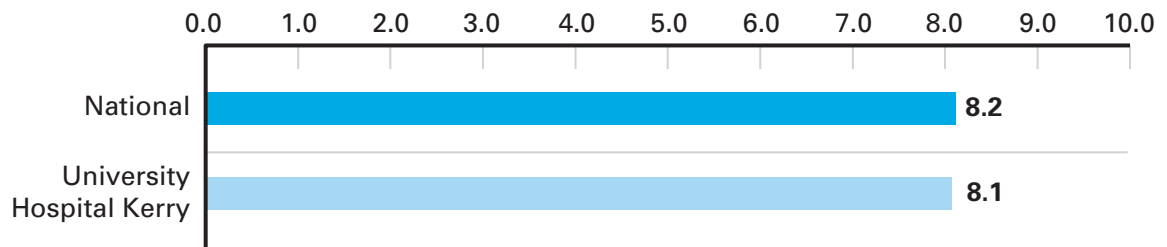
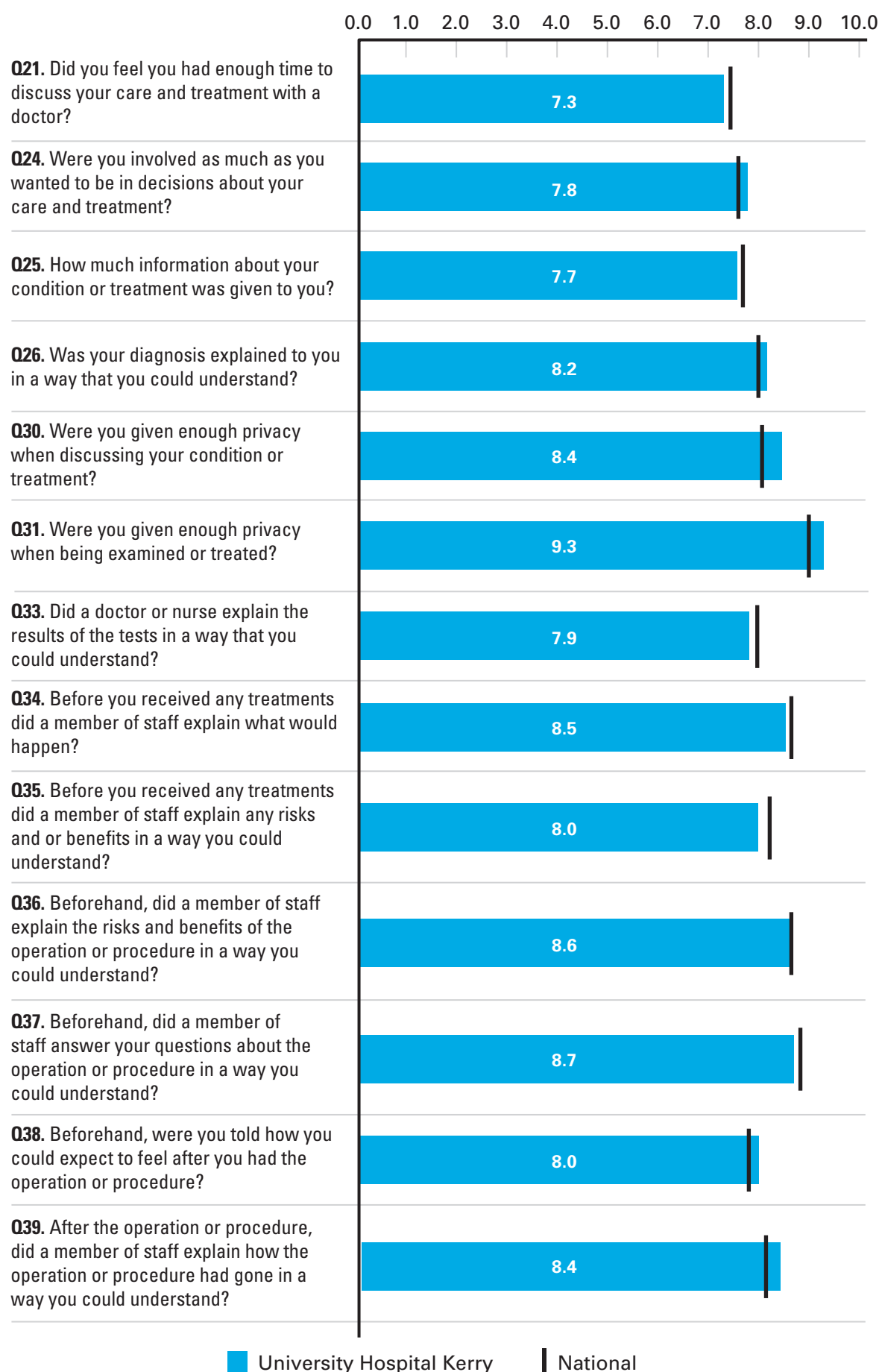


Figure 9 University Hospital Kerry scores for questions on examinations, diagnosis and treatment



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

"The care and attention I received was excellent and was very happy with that. The doctors explained everything to me every step of the way which helped me understand what was going on."

"I had blood taken on a number of occasions and while I was told mostly of my results, one test, even after repeated requests, was never revealed and I had to ask my GP to find out the results after I had gone home. My impression is that this was a result of poor communication between the path lab and the ward."

"Patient's opinion was not taken into account when doctors and nurses were still looking for a diagnosis and left waiting unnecessary lengths of time for further tests, when departments were obviously not busy."

"Doctors and nurses and all staff were extremely helpful and my stay was very well managed. Thanks to everyone involved."

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

Ratings of examination, diagnosis and treatment were slightly higher than last year and were similar to this year's national average. Participants were generally positive about the privacy they experienced while discussing and receiving treatment, with above-average scores on these questions. University Hospital Kerry received slightly below-average scores for the amount of time patients had to discuss their care and treatment with a doctor. Patients who felt they didn't have enough time with a doctor were less likely to give a positive overall rating of their care.

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.

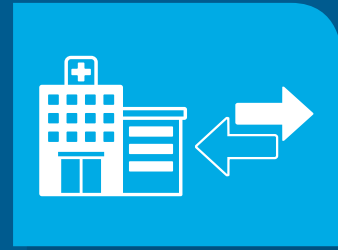


Figure 10 Comparison of University Hospital Kerry with the national average score for discharge or transfer (out of a maximum of 10)

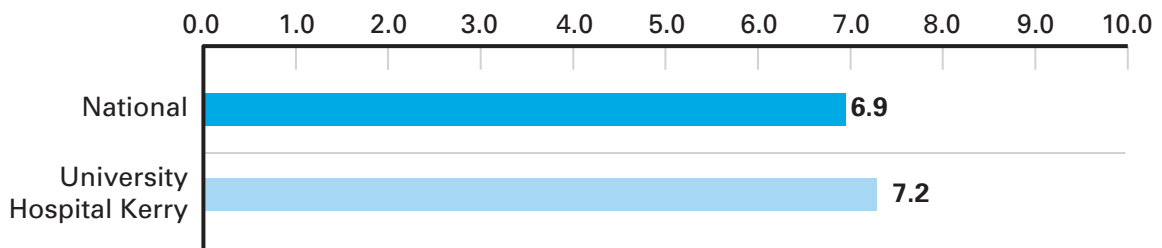
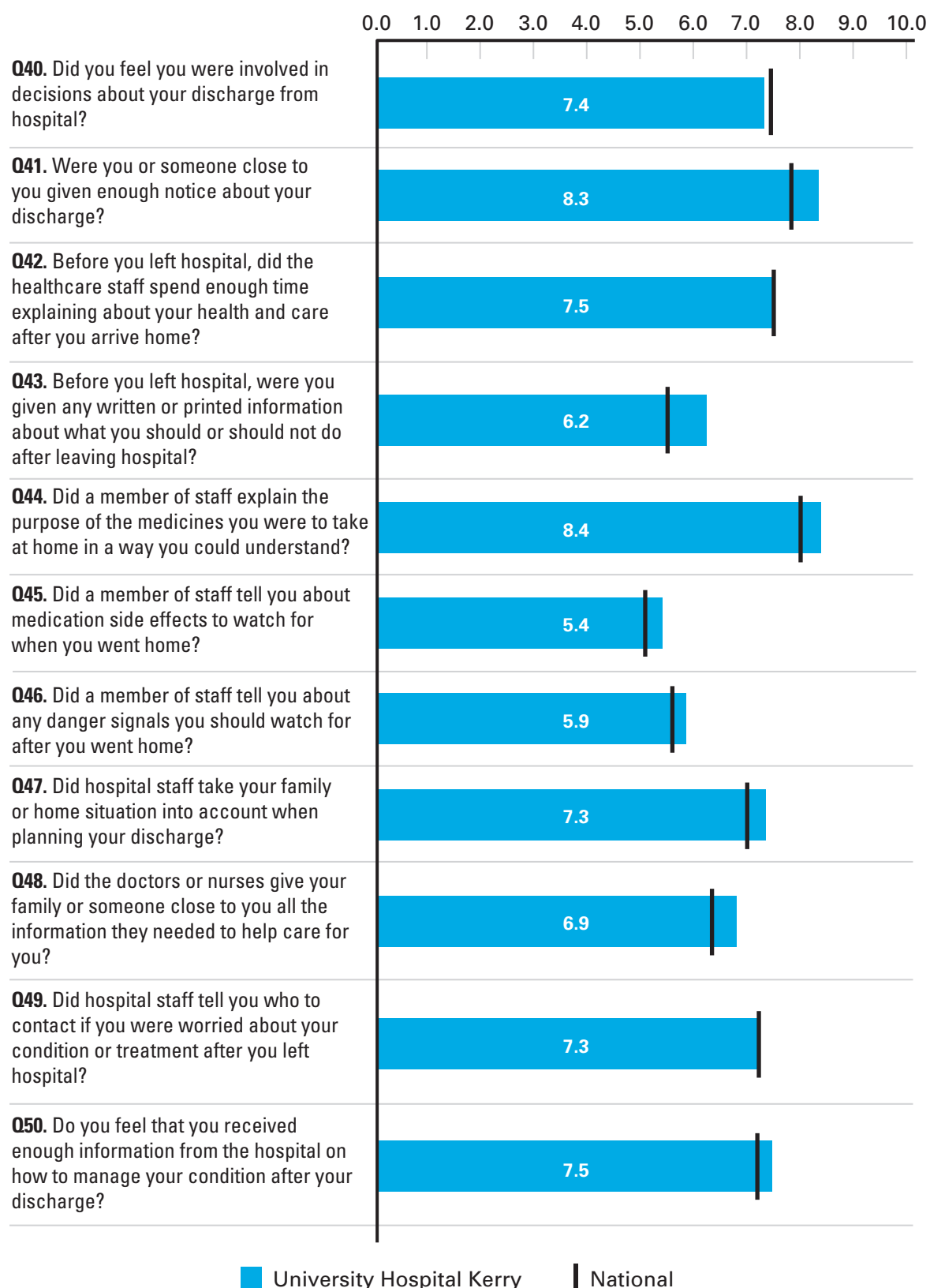


Figure 11 University Hospital Kerry scores for questions on discharge or transfer



The patient voice: what patients said about discharge or transfer

“The staff arranged for my stay in respite care after discharge and I really appreciated this and benefitted greatly from that respite.”

“I feel I was discharged far too early after my surgery — surgery on a Friday and discharged on Sunday. They tried to discharge me on the Saturday! Madness. My pain was severe. I ended up being re-admitted 10 days later.”

Discharge or transfer: what do these results mean?

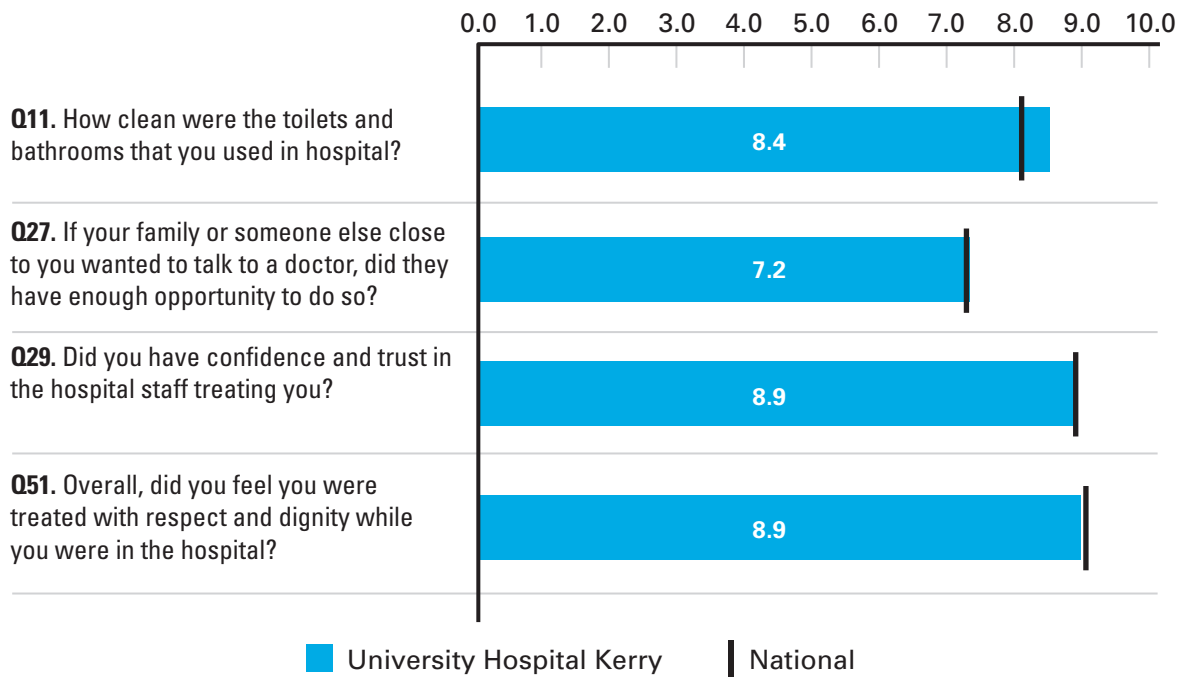
University Hospital Kerry received significantly higher ratings for discharge or transfer in 2018 compared to the 2017 survey. Participant ratings for this stage of care were also slightly above the national average. Most participants said that they received sufficient notice of their discharge and were happy with the clarity of explanations regarding medication. However, a significant number of patients said that they did not receive sufficient information on medication side effects and the potential danger signals to watch out for at home. Nonetheless, both questions scored above average.

Other aspects of care



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

Figure 12 University Hospital Kerry scores for other aspects of care



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

"Friendly, approachable staff; willing to listen and answer questions. Staff listened to patients' narrative and showed empathy & compassion. However, some staff focused more on completing tasks rather than building rapport."

"I am paying private health insurance for the past 30 years of my life and I was not too pleased to be in a public ward with five other people (mixed company)."

"I was treated with the very best of respect. Thanks to all the staff."

"A handle and a non-slip surface [are needed] in the showers. Replace old and broken toilet seats and other fittings. Lower beds to accommodate shorter people and people with limited mobility. Due to my limited mobility, plus complications after surgery, I was unable to get into or out of the bed and spent the week sitting and sleeping in a chair."

Other aspects of care: what do these results mean?

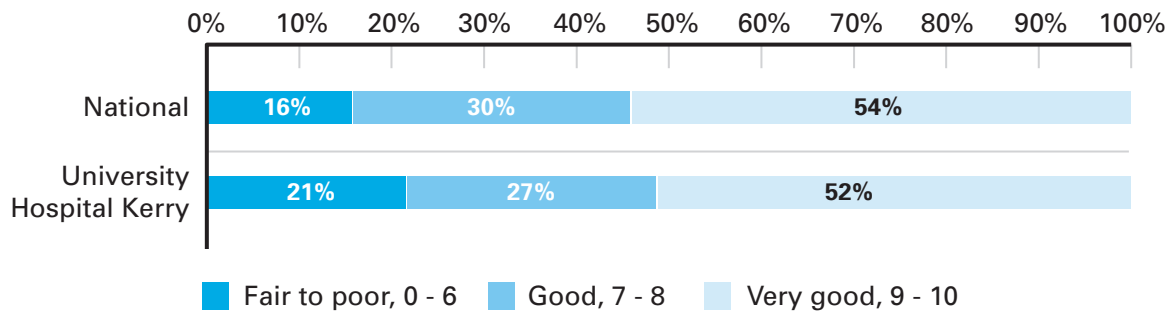
The ratings for the questions on other aspects of care were at, or slightly below, the national average. For example, while most participants said they were treated with respect and dignity, some did not give a positive rating in this area. The majority of patients gave positive ratings of bathroom cleanliness, though some said that improvements were necessary.

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 University Hospital Kerry rated their care as very good, slightly below the national figure of 54%.

Figure 13 compares the average overall rating of hospital experience for University Hospital Kerry with the national average.

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



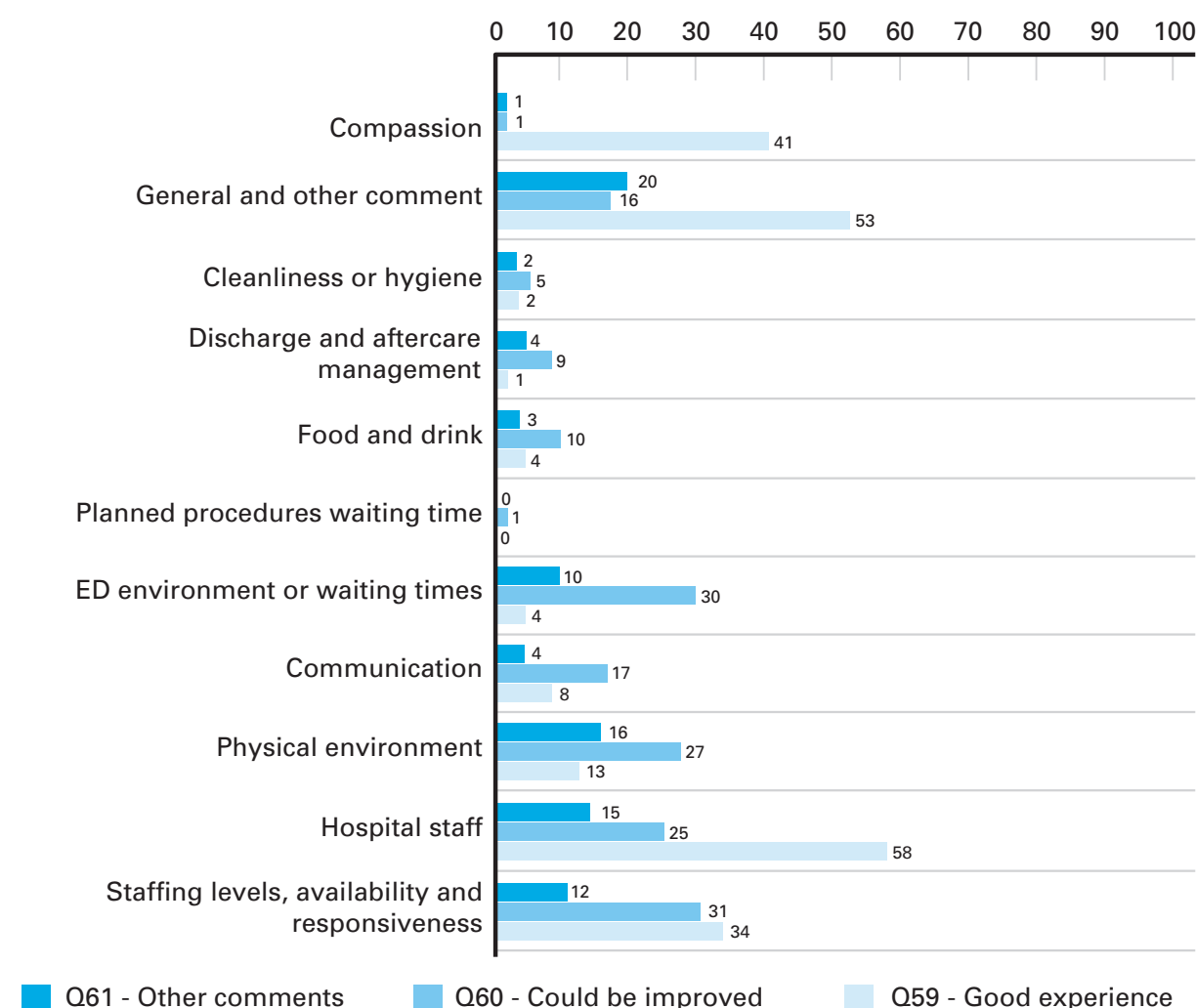
In their own words: analysis of patients' comments

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, 477 comments were received from patients of University Hospital Kerry 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 comment' themes. For Q60, most comments were associated with the 'ED environment or waiting times' and to 'staffing levels, availability and responsiveness'. Finally, most responses to Q61 referred to the 'general comment' or 'physical environment' themes.

Figure 14 Participant comments by theme



Conclusion

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

Most participants said they had a positive overall experience in University Hospital Kerry. 79% of patients said they had a 'good' or 'very good' experience, compared with 84% nationally.

University Hospital Kerry received similar scores to the national average across every stage of care. Participant ratings of care were generally more positive than those received in 2017, particularly in relation to discharge or transfer.

A number of areas of good experience were identified. Most participants said that they received enough information on how to manage their condition after discharge and were happy with the level of clarity provided on medication they were to take at home. Participants also reported that, in the main, replacement meals were provided when required.

Several areas needing improvement were also identified. A number of participants felt that the risks and benefits of a procedure they were due to undergo were not explained clearly by a member of staff. In addition, some patients did not have confidence and trust in the hospital staff treating them. Furthermore, several patients of University Hospital Kerry felt that they were not treated with respect and dignity.

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 University Hospital Kerry 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 University Hospital Kerry. 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.

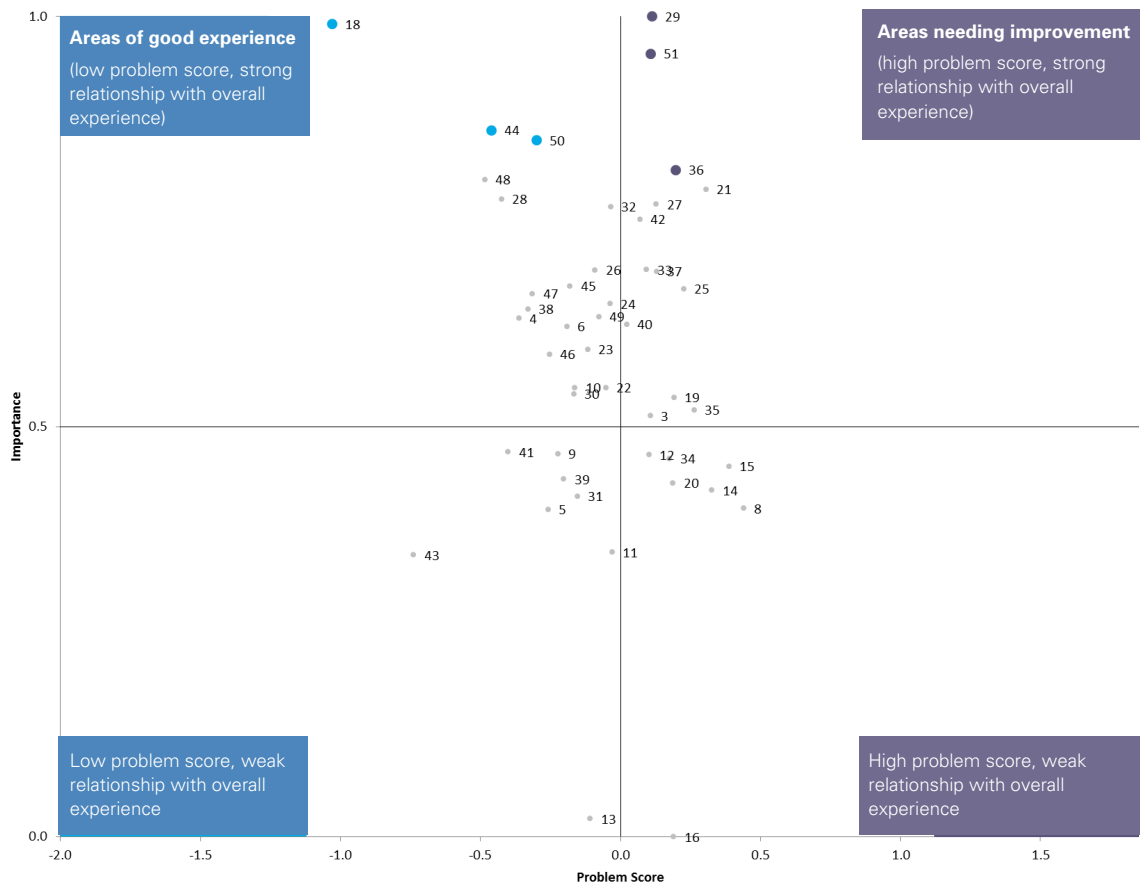
Interpreting the improvement map

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.