

National Patient Experience Survey 2017 RCSI Hospital Group

National Patient Experience Survey 2017

Royal College of Surgeons in Ireland (RCSI) Hospital Group







Background to the National Patient Experience Survey

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 aim of the National Patient Experience Survey Programme is to engage with and understand the experiences of patients, and use this feedback to inform the future development, planning, design and delivery of improved patient-centred care in Irish hospitals.

The survey took place, for the first time, in May 2017. All adult patients discharged between 1 and 31 May 2017, who spent 24 hours or more in a public acute hospital and who held an address in the Republic of Ireland were eligible to take part in the National Patient Experience Survey. In total, 40 public acute hospitals participated.

Maternity, cancer, paediatric, psychiatric and day (less than 24 hours stay) hospital services, as well as private hospitals, were not part of the survey on this occasion.

Further information on the management of the survey is available at <u>www.patientexperience.ie</u>.









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Executive summary

Overall, patients' ratings of their experiences at a hospital in the Royal College of Surgeons (RCSI) Hospital Group were below the national average. 81% of patients who attended a hospital in the hospital group said they had a 'very good' or 'good' experience, compared with 84% nationally.

Only 25% of people reported that they were admitted to a ward within six hours of arriving at the emergency department, compared with 30% nationally. The findings indicate that this group performed below the national average and also fell short of the HSE waiting times targets.

The RSCI Hospital Group scored below the national average for every stage of care related to the patient journey, with the exception of admissions where it scored comparably to the national average.

These findings will serve to inform quality improvement initiatives in RCSI Hospital Group.



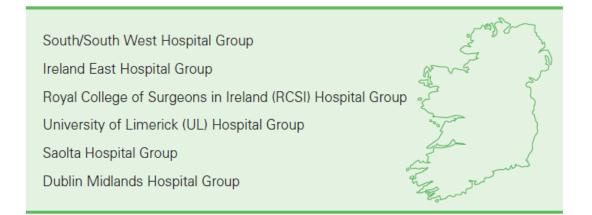




Profile of Royal College of Surgeons Hospital Group

Royal College of Surgeons in Ireland (RCSI) Hospital Group is one of seven hospital groups in Ireland¹. Hospital groups were established in Ireland in 2013 with the aim of integrating hospital networks in order to provide safer, more effective care. The purpose of this report is to compare the results for this hospital group with other groups, and also to explore variation in results between the hospitals within the group. Specific reports on the results of the National Patient Experience Survey for each hospital, and associated quality improvement plans are available at <u>www.patientexperience.ie</u>.

The people who responded to the National Patient Experience Survey were admitted to a hospital in one of the six hospital groups listed below:



There are five eligible hospitals in RCSI Hospital Group (Table 1). 4,248 eligible patients were discharged from a hospital in the RCSI Hospital Group during the survey period of 1 - 31 May 2017. The RCSI Hospital Group provides emergency as well as elective inpatient care. Patients were asked to answer questions across each stage of care. However, people who were not admitted through an emergency department did not answer the questions on admissions.







¹ The Children's Hospital Group is the seventh hospital group in Ireland. Paediatric hospitals and children's services were not surveyed on this occasion.



Hospital Name	Number of inpatient beds [*]	Number of eligible discharges	Number of participants	Emergency Department
Beaumont Hospital	641	1,673	826	Yes
Cavan and Monaghan Hospital	240	657	289	Yes
Connolly Hospital	215	800	372	Yes
Louth County Hospital ^{**}	2	39		No
Our Lady of Lourdes Hospital ^{**}	336	1,131	546**	Yes

Table 1. Profile of hospitals in RCSI Hospital Group

*Refers to the number of inpatients beds in May 2017.

**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. While the report refers to 'Our Lady of Lourdes Hospital' throughout, the responses of survey participants who attended Louth County Hospital are included.







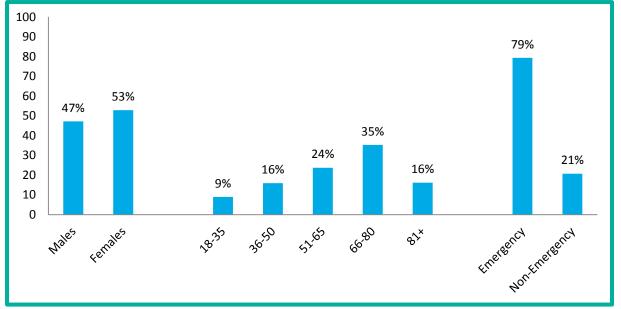
Who took part in the survey?

Description of the respondents who took part in the survey

4,248 people discharged from a hospital in RCSI Hospital Group during the month of May 2017 were invited to participate in the survey. 2,033 people completed the survey, achieving a group response rate of 48%.

47% of people who responded to the survey were male and 53% were female. 79% of respondents entered hospital through an emergency department. Figure 1. below provides information on the patients from RCSI Hospital Group who took part in the survey.









Findings of the 2017 survey

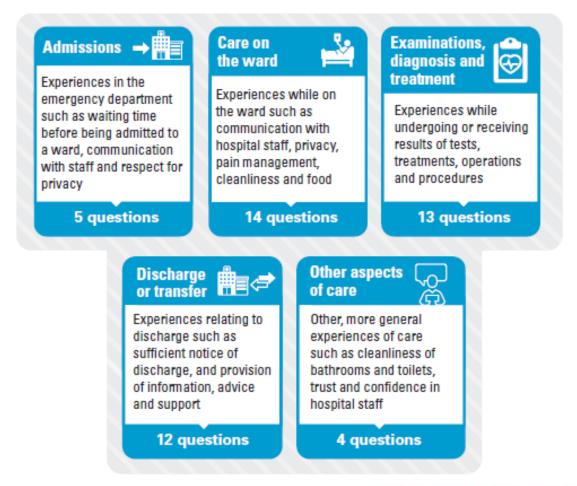
The stages of care along the patient journey

The National Patient Experience Survey 2017 followed the patient on their 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









Appendix 1 includes a list of all questions in the 2017 survey.

Appendix 2 provides a brief technical note on analyses and interpretation.

The findings of the National Patient Experience Survey 2017 were officially launched on 11 December 2017. The national, individual hospital and hospital group reports, as well as the HSE's response to the findings, can be downloaded from <u>www.patientexperience.ie</u>.







National Patient Experience Survey 2017 RCSI Hospital Group

The patient journey

Care on the ward

Experiences while on the ward, such as communication with hospital staff, privacy, pain management, cleanliness and food.



Experiences in the emergency department, such as waiting times and respect for privacy.



Examinations, diagnosis and treatment

Experiences while undergoing or receiving the results of tests, treatments, operations and procedures.



Discharge or transfer

Experiences relating to discharge, such as sufficient notice of discharge, and the provision of information, advice and support.

 Only patients who were admitted to a hospital with an emergency department answered questions on admission to hospital.

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771

Very good, 9-10

80%

100%

60%

Good, 7-8

Admissions

323

20%

0%

323 people (22%) had a 'fair to poor' experience of admission to a hospital in RCSI Hospital Group. However, on the other hand 771 (52%) people rated their experience as 'very good'. Only patients who said they had entered hospital on an emergency basis were asked to answer questions on this stage of care. The findings are summarised in Figure 3. Emergency department waiting times are a key element of patients' experiences of admission to hospital and findings for the group and its constituent hospitals are reported in Figures 7 and 8.

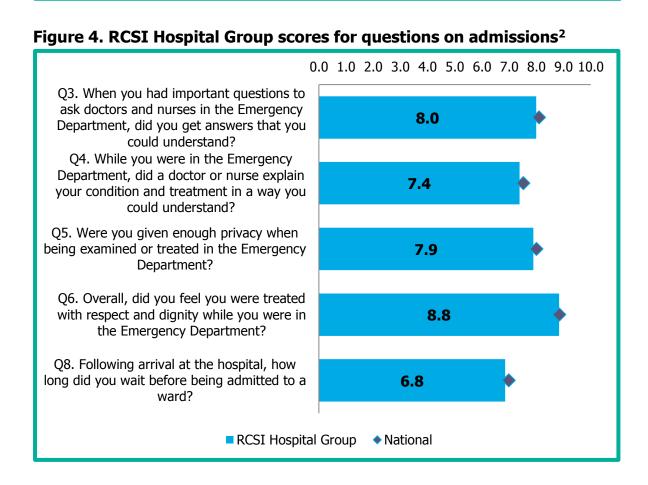


40%

399

Figure 3. Experience ratings for admissions

Fair to poor, 0-6



² Appendix 2 explains how the survey questions were scored.

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Findhmeannacht nu Searbhi Beath Service Executive





Figure 5. Comparison of hospital scores for admissions with the group average (out of a maximum of 10)³

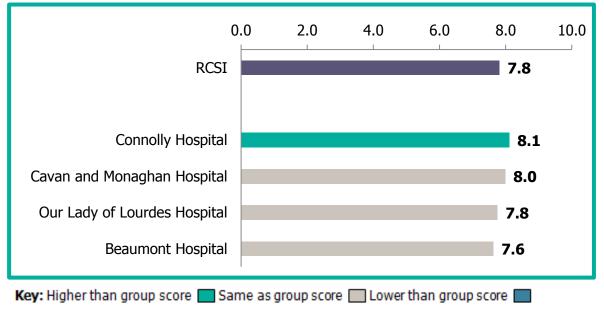
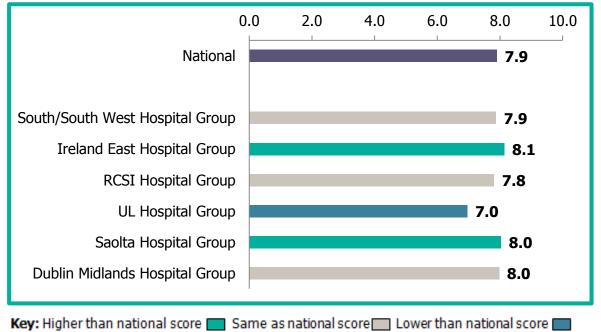


Figure 6. Comparison of hospital group scores for admissions with the national average (out of a maximum of 10)



³ The shading on the graphs shows whether a difference exists between two scores and whether this difference is statistically significant. Sometimes, the grey shading suggests that two scores are the same even though they have different values. In such cases the difference is not statistically significant. For further information, see Appendix 2.

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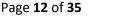




Figure 7. Patient-reported emergency department waiting times for hospitals in RCSI Hospital Group and nationally

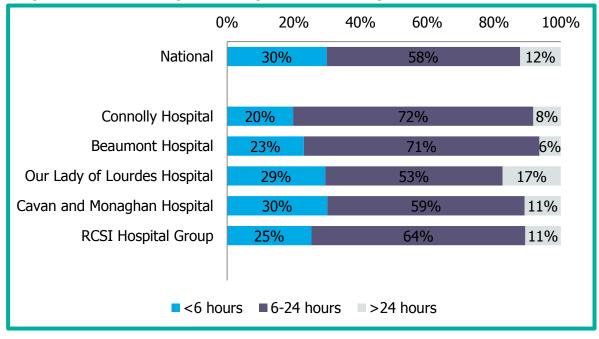
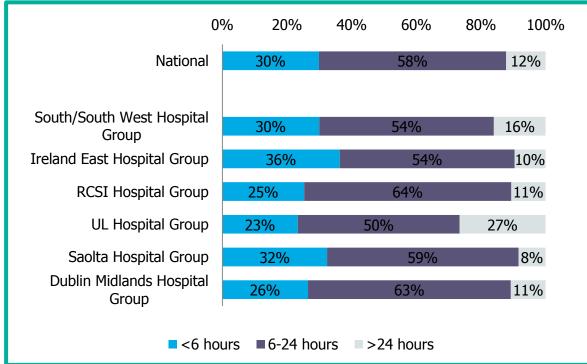


Figure 8. Patient-reported emergency department waiting times for all hospital groups and nationally









Care on the ward

357 respondents (18%) said that their experience of care on the ward in a hospital in the RSCI Hospital Group was 'fair to poor'. However, 968 respondents (49%) reported having a 'very good' experience. Figure 9. summarises patients' experiences of care on the ward.

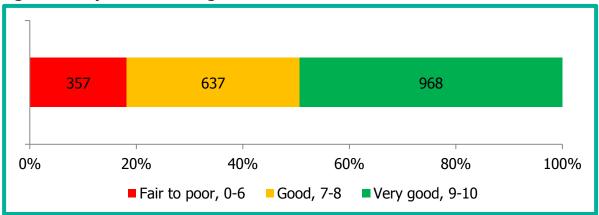


Figure 9. Experience ratings for care on the ward









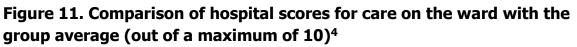
Figure 10. RCSI Hospital Group scores for questions on care on the ward

0	0.0	2.0	4.0	6.0	8.0	10.0
Q9. Were you given enough privacy while you were on the ward?			8.6		•	
Q10. In your opinion, how clean was the hospital room or ward that you were in?			8.7			
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?			8.7		•	
Q15. How would you rate the hospital food?		6.0)	•		
Q16. Were you offered a choice of food?			8.0		•	
Q18. Were you offered a replacement meal at another time?		6.2	2	•		
Q19. Did you get enough help from staff to eat your meals?			7.9		•	
Q20. When you had important questions to ask a doctor, did you get answers that you could understand?			8.1		•	
Q22. When you had important questions to ask a nurse, did you get answers that you could understand?			8.4			
Q23. If you ever needed to talk to a nurse, did you get the opportunity to do so?			8.3			
Q28. Did you find someone on the hospital staff to talk to about your worries and fears?		6.2	2	•		
Q32. Do you think the hospital staff did everything they could to help control your pain?			8.8		•	
RCSI Hospital Group National 						









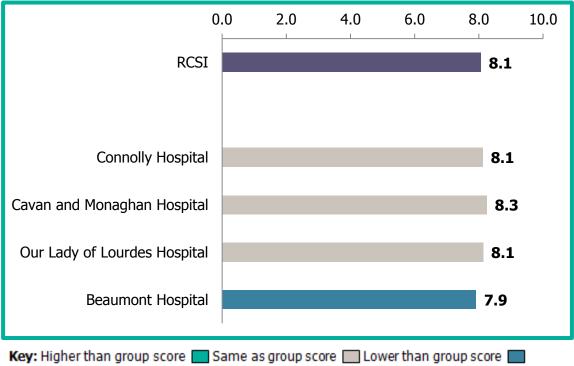
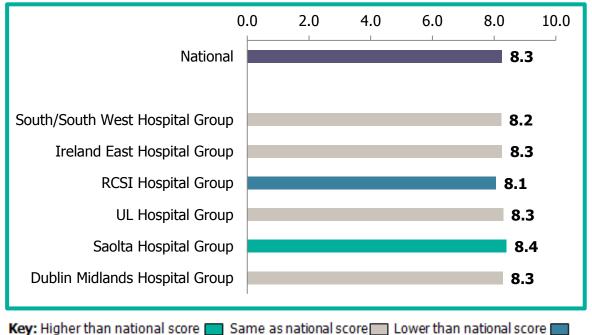


Figure 12. Comparison of hospital group scores for care on the ward with the national average (out of a maximum of 10)



⁴ The shading on the graphs shows whether a difference exists between two scores and whether this difference is statistically significant. Sometimes, the grey shading suggests that two scores are the same even though they have different values. In such cases the difference is not statistically significant. For further information, see Appendix 2.







Examinations, diagnosis and treatment

459 respondents (23%) said that their experience of examinations, diagnosis and treatment in RCSI Hospital Group was 'fair to poor'. However, 1,030 respondents (53%) reported having a 'very good' experience in this regard. Figure 13. summarises patients' experiences of examinations, diagnosis and treatment.

Figure 13. Experience ratings for examinations, diagnosis and treatment

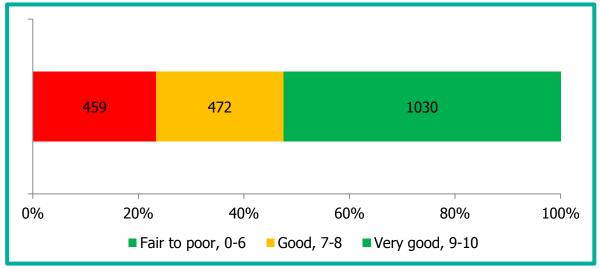
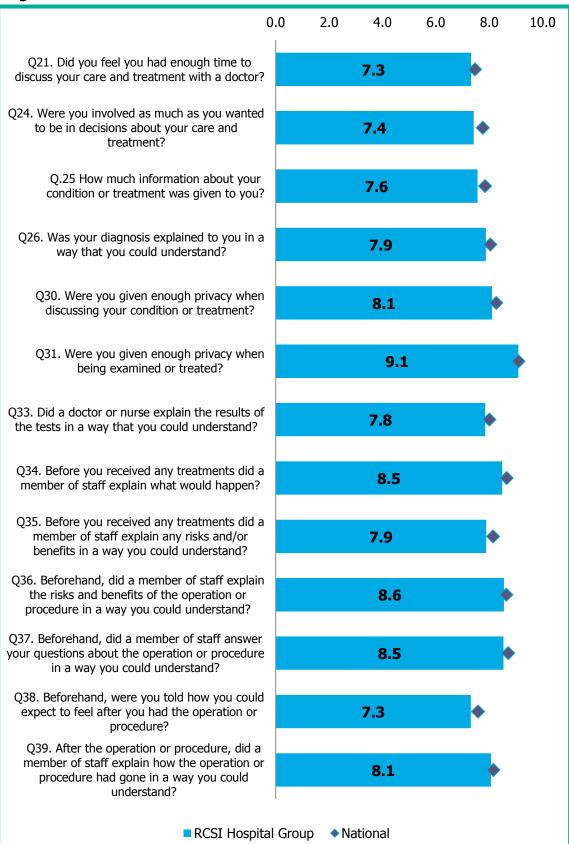








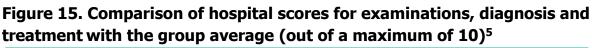
Figure 14. RCSI Hospital Group scores for questions on examinations, diagnosis and treatment











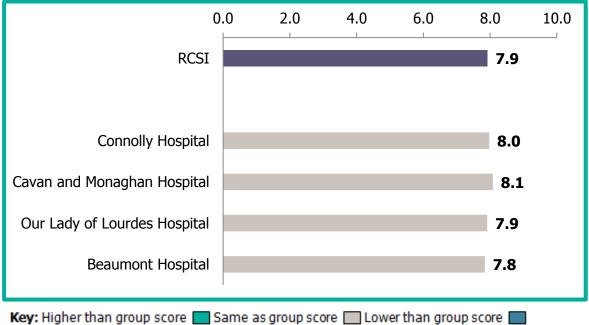
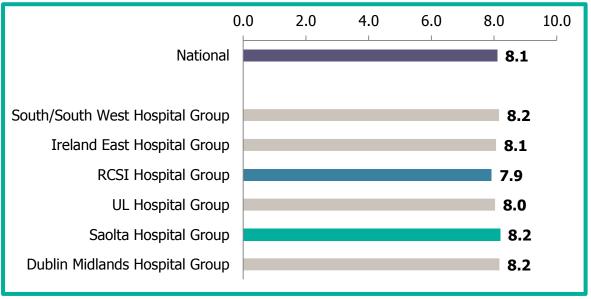


Figure 16. Comparison of hospital group scores for examinations, diagnosis and treatment with the national average (out of a maximum of 10)



Key: Higher than national score 🔄 Same as national score 🔄 Lower than national score 🥅







⁵ The shading on the graphs shows whether a difference exists between two scores and whether this difference is statistically significant. Sometimes, the grey shading suggests that two scores are the same even though they have different values. In such cases the difference is not statistically significant. For further information, see Appendix 2.



Discharge or transfer

891 people (46%) said that their experience of being discharged or transferred from a hospital in RCSI Hospital Group was 'fair to poor'. However, 642 (33%) reported having a 'very good' experience of this stage of care. Figure 17. below summarises these experience ratings.



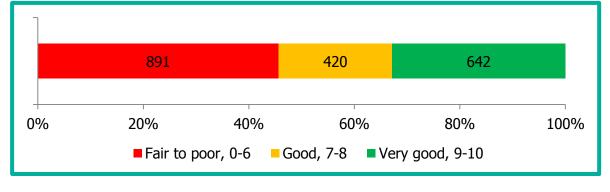
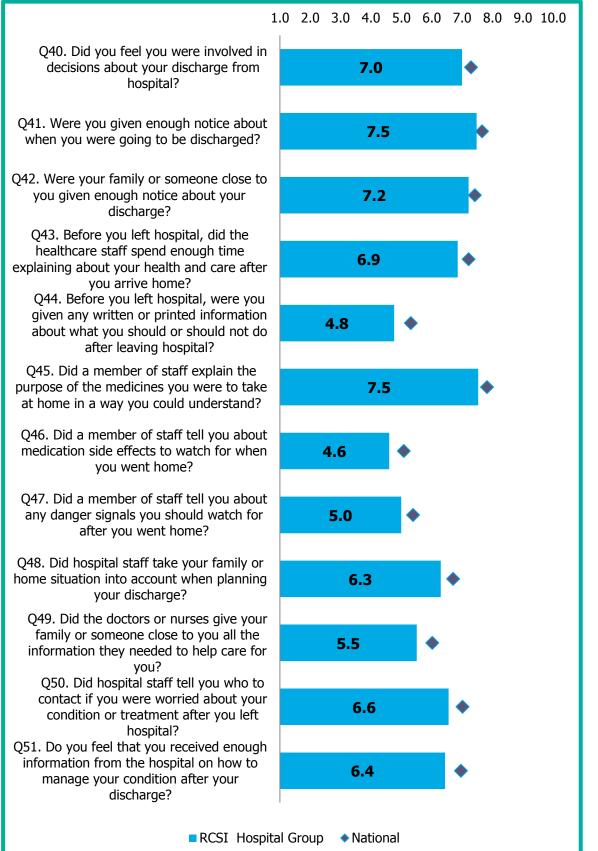








Figure 18. RCSI Hospital Group scores for questions on discharge or transfer











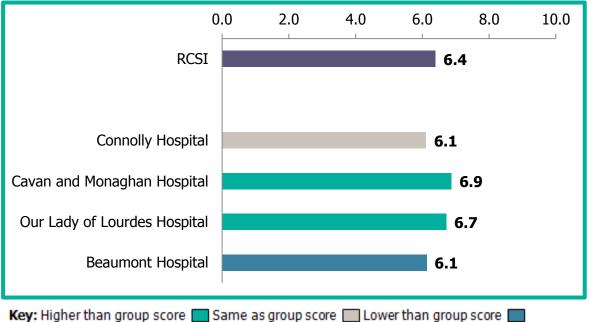
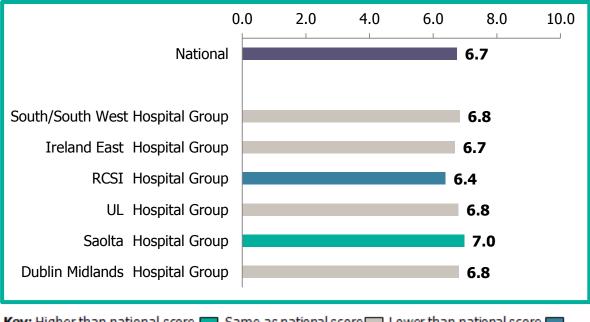


Figure 20. Comparison of hospital group scores for discharge or transfer with the national average (out of a maximum of 10)



Key: Higher than national score 🔄 Same as national score 🔄 Lower than national score 🥅







⁶ The shading on the graphs shows whether a difference exists between two scores and whether this difference is statistically significant. Sometimes, the grey shading suggests that two scores are the same even though they have different values. In such cases the difference is not statistically significant. For further information, see Appendix 2.



Other aspects of care

Figure 21. RCSI Hospital Group scores for questions on other aspects of care

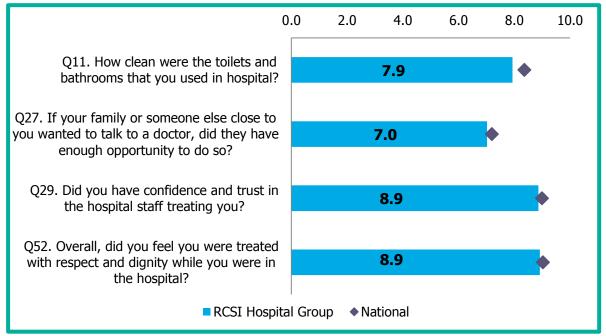
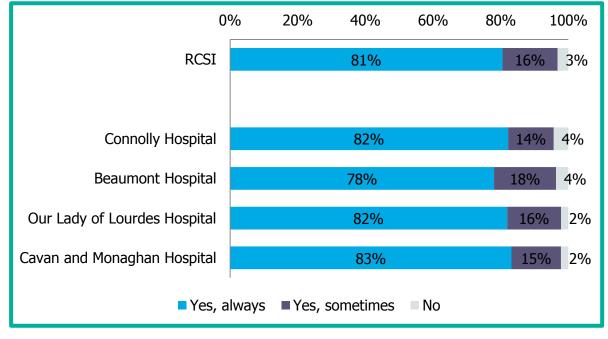


Figure 22. RCSI Hospital Group ratings for dignity and respect (Q52)









Overall experience

The 2017 National Patient Experience Survey asked people to rate their overall hospital experience on a scale from 0 to 10, with 0 indicating a very negative and 10 indicating a very positive experience. In RCSI Hospital Group, 50% of patients said that they had a 'very good' experience in hospital, compared with 54% nationally.

Figure 23. Overall rating of hospital experience for RCSI Hospital Group and nationally

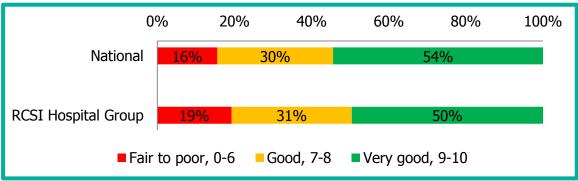
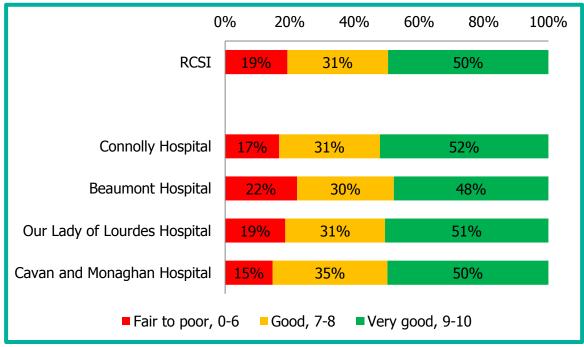


Figure 24. Overall rating of hospital experience for RCSI Hospital Group compared with individual hospitals











Areas needing improvement

This section outlines areas where RCSI Hospital Group performed well, and areas needing improvement.

Figure 25. maps the survey questions according to how strongly they are connected to overall experience. The map also shows the difference between the score for each question in the RCSI Hospital Group and the score for each question nationally. This map helps to identify some of the areas of positive experience in the group, and the areas needing improvement.

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 most important possible relationship. The difference between question scores for RCSI Hospital Group and national scores is described as a 'problem score', shown on the horizontal axis. If a question has a problem score with a value greater than zero, it means that RCSI Hospital Group has scored lower than the national average for that question. For example, if a hospital group scored 8.8 for Q52, which is lower than the national average of 9.0, this would mean that it had a problem score of 0.2 for this question. Questions that have high problem scores and a strong relationship with overall experience appear in the top-right quadrant of the map — these are areas needing improvement in RCSI Hospital Group. The list of questions in each quadrant are listed on Figure 25. For reference, the full list of survey questions can be found in Appendix 1.

For example, Q51 — 'Do you feel you received enough information from the hospital on how to manage your condition after discharge?' has a problem score greater than 0 and a significant relationship with overall experience. This suggests it is an area where the group should focus quality improvement efforts.

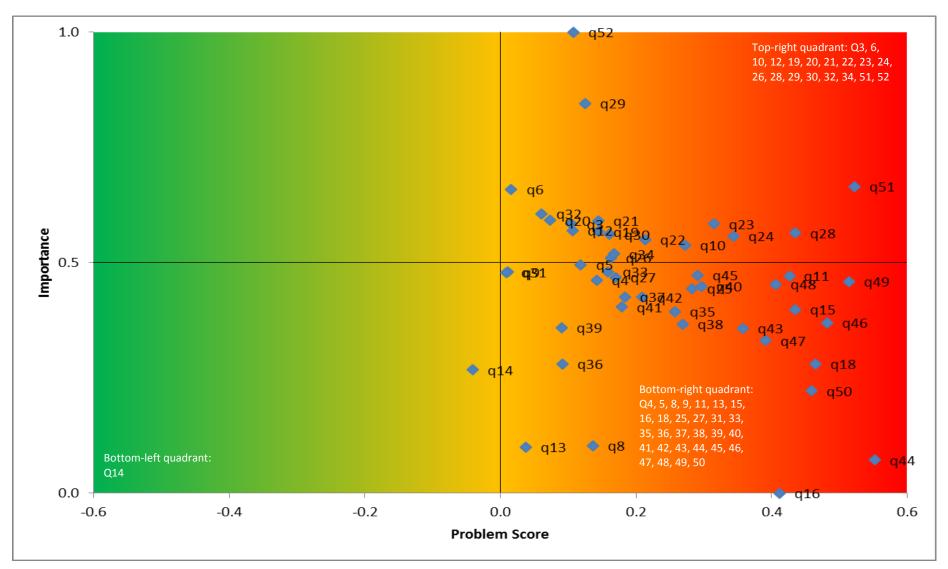
The group scored above the national average on Q14 – 'Did the staff treating and examining you introduce themselves?' has a problem score of less than 0. Though it does not have a strong relationship with overall experience, this is a positive result for the group.













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An Roinn Sláinte

DEPARTMENT OF HEALTH





Conclusion

Overall, patients' ratings of their experiences at a hospital in RCSI Hospital Group were below the national average. 81% of patients who attended a hospital in this group said they had a 'very good' or 'good' experience, compared with 84% nationally.

Patients at Connolly Hospital and Our Lady of Lourdes Hospital were most likely to rate their hospital experience as 'very good', compared with other hospitals in the group.

In terms of areas needing improvement in this group, patients did not always receive enough information on how to manage their condition after discharge. Some patients also said that they did not always have confidence in hospital staff, while others felt that they were not always treated with respect and dignity in hospital. RCSI Hospital Group performed below the national average in all of these areas.

RCSI Hospital Group performed below the national average on all admissions related questions, with the exception of Q6 which had the same score as the national average. This was the highest rated area for the admissions stage of care indicating that patients felt that they were treated with respect and dignity in the emergency room. Only 25% of people reported being admitted to a ward within six hours of arriving at the hospital, compared with 30% nationally. The group scored below the national average in this area and also fell short of HSE waiting time targets⁷.

As regards care on the ward, many RCSI Hospital Group patients said that hospital staff did everything they could to help control their pain. While this was the highest scoring area for this stage of care, the hospital group still performed below the national average on pain management. A large number of patients in this group rated the food they received while in hospital as fair or poor. Furthermore, many patients reported difficulties finding a member of the hospital staff to talk to if they had any worries and fears. RCSI scored below the national average in both of these areas.

Patients of RCSI Hospital Group reported high levels of privacy when being examined or treated. Patients also had positive responses to the explanations they received on the risks and benefits of their operation or procedure. However, patients







⁷ The HSE 2017 targets can be viewed at: https://www.hse.ie/eng/services/publications/KPIs/Acute-Hospitals-KPI-Metadata-2017.pdf



were often not told how they could expect to feel after an operation or procedure. Furthermore, many patients of the hospital group said that they did not feel as though they had enough time to discuss their care and treatment with a doctor. The group scored below the national average in both of these instances.

Discharge or transfer was the lowest scoring stage of care for the hospital group, with no questions scoring higher than the national average for this stage. A number of patients did not feel adequately prepared to manage their condition at home and large numbers reported not having been told about any potential medication side effects. In addition, in terms of post-hospital care, many patients said they were not given written or printed information on what they should or should not do after leaving hospital.

The survey has provided valuable information on patients' experiences in acute hospitals at national, hospital group and hospital levels. The findings have been used to develop and implement quality improvement initiatives in RCSI Hospital Group, intended to address the issues identified by patients.







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?		
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?
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

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 care⁸: 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.







⁸ 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?				
	1 10	110 Yes, always			
	2 5	Yes, sometimes			
	3 0	No			
	₄M	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 adding 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		

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).

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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 the 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.

