

# National Inpatient Experience Survey 2019

## Royal Victoria Eye and Ear Hospital

## 2019 survey results

### Respondents



**76**

Number of respondents



**59.7**

Average age



**53%**

Participation rate

### Overall experience

#### 2019

Very Good  
**82%**

Good  
**18%**

Fair to Poor  
**0%**

#### 2018

Very Good  
**65%**

Good  
**30%**

Fair to Poor  
**5%**

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

### Stages of care



**9.4**

out of 10

#### Care on the ward

Patient ratings of 'care on the ward' in the hospital were above both the national average and last year's survey.

**9.3**

out of 10

#### Examination, diagnosis and treatment

Ratings of 'examination, diagnosis and treatment' were above the national average and significantly higher than last year's survey.



**8.9**

out of 10

#### Discharge or transfer

Participant ratings of 'discharge or transfer' were above the national average and similar to last year's survey.



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## About the National Inpatient Experience Survey 2019

The National Inpatient Experience Survey<sup>1</sup> 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. It was conducted for the first time in 2017 and repeated in 2018 and 2019.

Nationally, 26,897 people were invited to participate in the third National Inpatient Experience Survey. In total, 12,343 people responded, resulting in a response rate of 46%. 76 patients from the Royal Victoria Eye and Ear Hospital took part.

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 and 2018 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 <https://yourexperience.ie/inpatient/hospital-initiatives/>.

## What were the main findings for the Royal Victoria Eye and Ear Hospital

The majority of participants from the Royal Victoria Eye and Ear Hospital reported positive experiences in hospital. 100% of participants said they had 'good' or 'very good' overall experiences, compared with 84% nationally. The hospital scored above the national average across all stages of care.

Three areas of good experience were identified. These were areas that were related to participants' overall experiences and where participants gave significantly above-average ratings. For example, many patients said that they were always treated with respect and dignity and were given sufficient notice of their discharge from hospital. Patients also reported positively on hospital food.

There were significant improvements across every stage of care from the 2018 survey, apart from 'discharge or transfer', which received similar ratings to last year.

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<sup>1</sup> The survey was previously entitled the 'National Patient Experience Survey'. The name was updated in 2019 to more accurately reflect the target population.

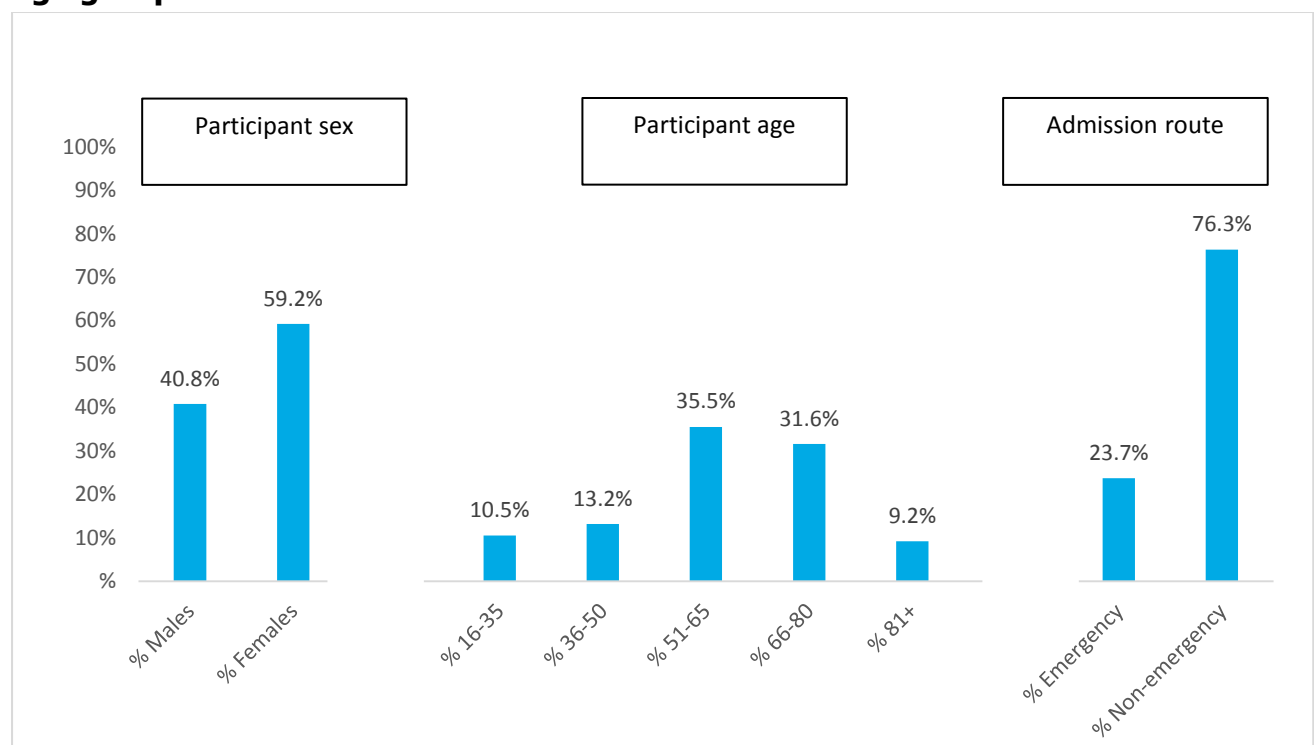
The findings of the 2019 survey will help the Royal Hospital Eye and Ear Hospital to improve patients' experiences of care in hospital.

## Hospital and participant profile

The Royal Victoria Eye and Ear Hospital is located in Dublin city. There were 25 inpatient beds available in the hospital during the survey period of May 2019.

144 people discharged from the Royal Victoria Eye and Ear Hospital during the month of May 2019 were invited to participate in the survey. 76 people completed the survey, achieving a response rate of 53%. 41% of participants were male and 59% were female. 18 respondents (24%) said that their stay in hospital was an emergency<sup>2</sup>. Figure 1 below provides information on the respondents who took part in the survey from the Royal Victoria Eye and Ear Hospital.

**Figure 1 Participants from the Royal Victoria Eye and Ear Hospital by sex, age group and admission route**



<sup>2</sup> Patients were asked if their hospital stay was planned in advance or an emergency. While the Royal Victoria Eye and Ear Hospital does not have an emergency department, patients may have felt that their condition was an emergency. It is also possible that these patients were originally admitted to a hospital with an emergency department before being transferred to the Royal Victoria Eye and Ear Hospital.

## 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. The list includes the relevant stage of care and question number for each area. Appendix 1 explains how these areas were identified.

In the Royal Victoria Eye and Ear Hospital, the scores for all questions across the five stages of care were above or the same as the national average. While no specific areas for improvement were identified using the methodology outlined in Appendix 1, there was still room for improvement on a number of questions. Patients' comments also identified areas where improvement was possible.

### The areas of good experience in the Royal Victoria Eye and Ear Hospital are:

#### Care on the ward

##### Food rating | Q15

64 (90%) of the 71 people who answered this question rated the hospital food as good or very good.

#### Discharge or transfer

##### Sufficient notice of discharge | Q41

Of the 73 people who answered this question, 63 (86%) said that they, or someone close to them, definitely received sufficient notice of their discharge.

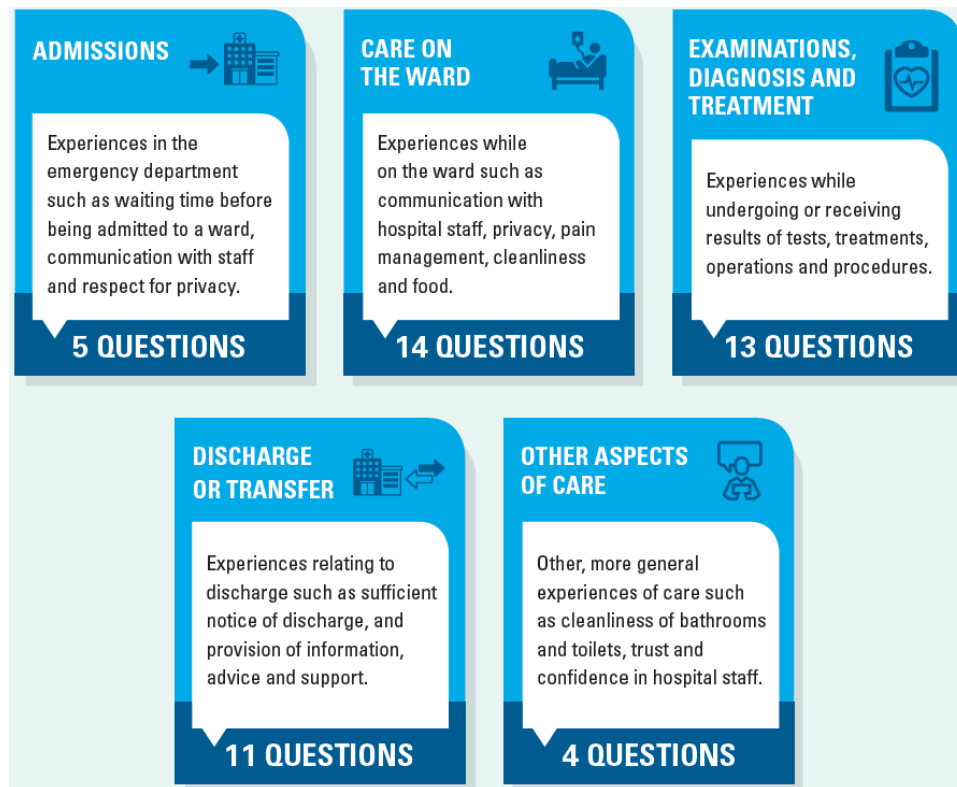
#### Other aspects of care

##### Respect and dignity | Q51

Of the 74 people who answered this question, 69 (93%) said that they were always treated with respect and dignity while they were in the hospital.

## Survey results for the stages of care along the patient journey

The National Inpatient Experience Survey 2019 follows the patient journey through hospital from admission to discharge. The 2019 questionnaire is available to download from [www.yourexperience.ie](http://www.yourexperience.ie). The survey questions were grouped into five stages along the patient journey<sup>3</sup>:



### Interpreting the results for the stages of care

Scores out of 10 are given for each question belonging to a stage of care or to a stage as a 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 2018 and 2019, as well as between a hospital and the national average. Throughout this report, when the hospital scored significantly above the national average, this is described as 'higher'. When a hospital scored significantly below the national average, it is described as 'lower'. When there is no

<sup>3</sup> As Royal Victoria Eye and Ear Hospital does not have an emergency department, survey participants did not answer the questions on Admissions.

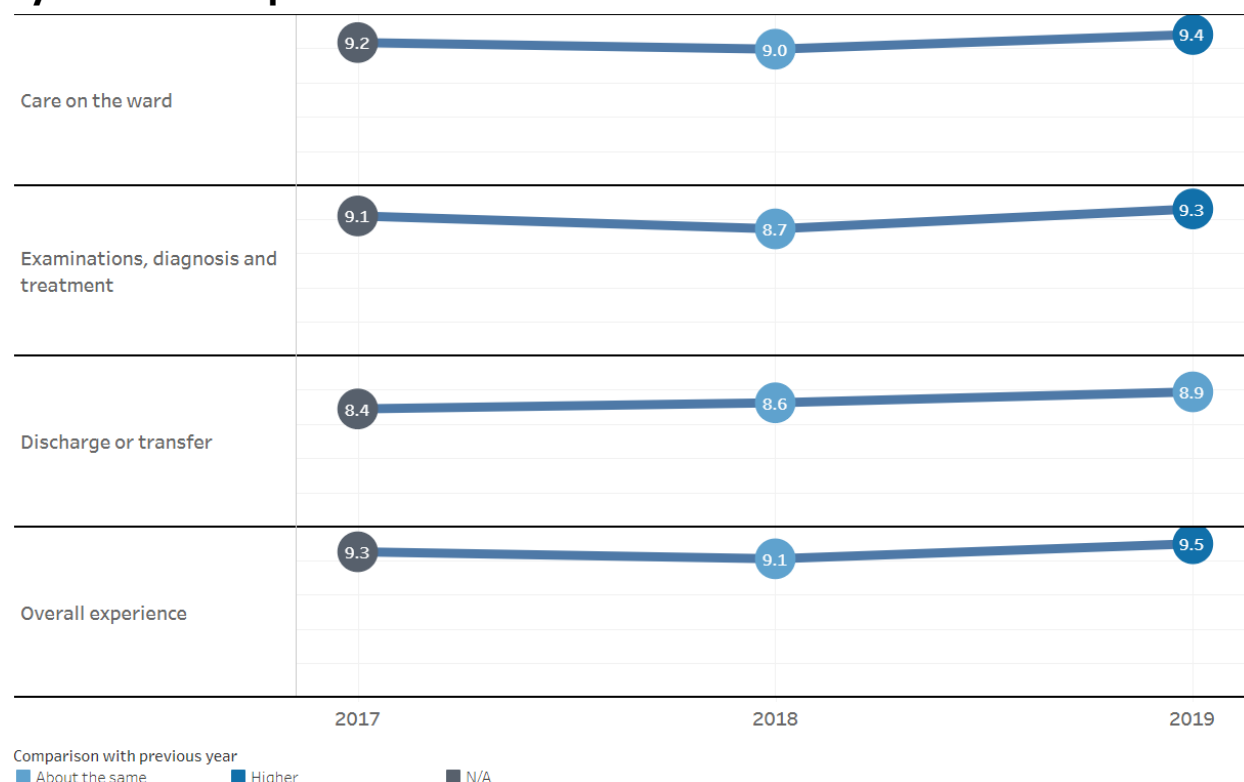
statistically significant difference between the hospital's score and the national average, it is described as 'about the same'. For further information on the analyses please consult Appendix 3 of the 2019 national report, available from [www.yourexperience.ie](http://www.yourexperience.ie).

## Changes in patient experience over time

There was a significant improvement in patient experience across all stages of care from the 2018 survey, with the exception of 'discharge or transfer', which received similar ratings to 2018. 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 Annual comparison of stage of care scores<sup>4</sup> for the Royal Victoria Eye and Ear Hospital.**



<sup>4</sup> Scores for the stages of care were constructed by calculating the average scores for all the questions belonging to that stage.

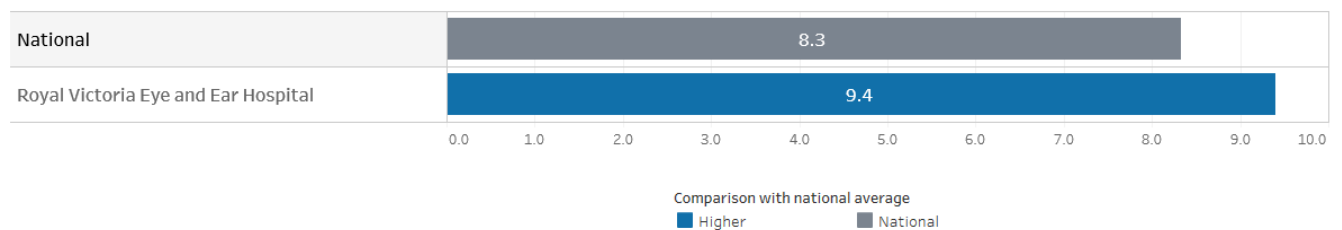




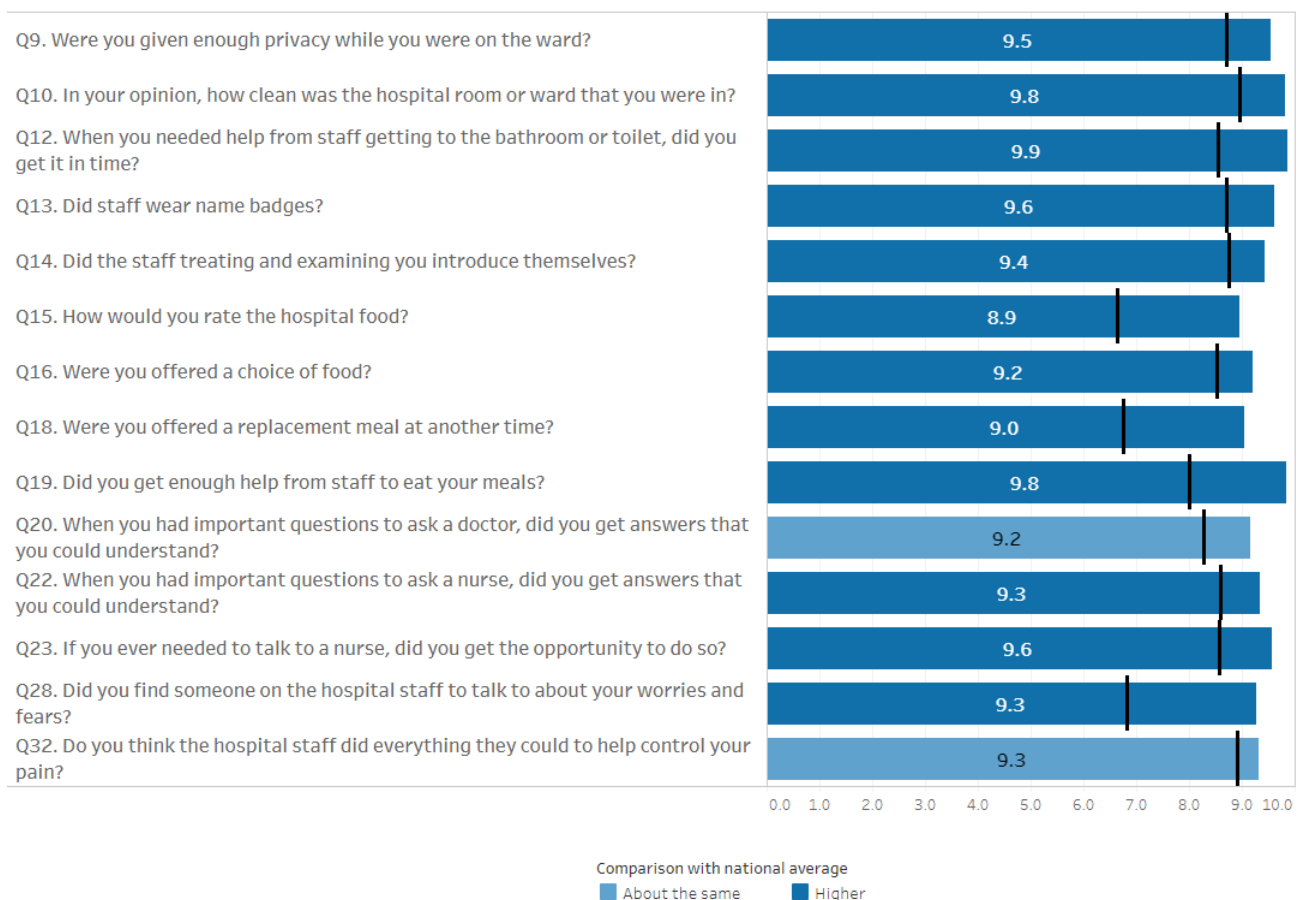
## Care on the ward

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

**Figure 3 Comparison of the Royal Victoria Eye and Ear Hospital with the national average score for 'care on the ward' (out of a maximum of 10).**



**Figure 4 The Royal Victoria Eye and Ear Hospital scores for questions on 'care on the ward'\***



\*The black line represents the national average

### Care on the ward: what do these results mean?

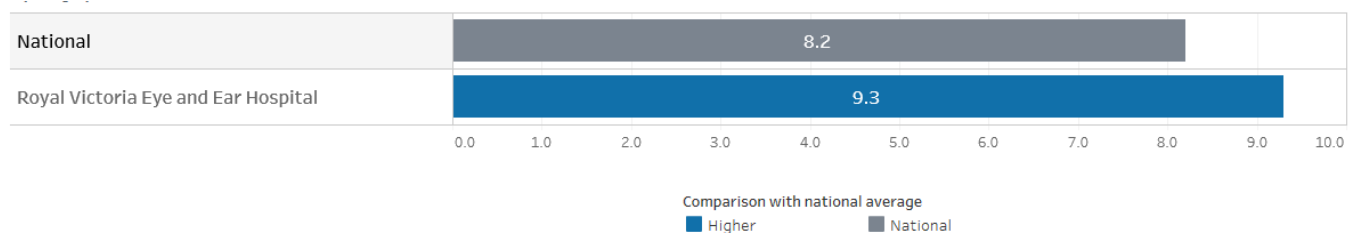
Patient ratings of 'care on the ward' in the Royal Victoria Eye and Ear Hospital were above both the national average and last year's survey. Most patients said that they always received help from staff to get to the bathroom or toilet on time. The lowest scoring question for this stage related to patient ratings of the hospital food. Nevertheless, the hospital scored above the national average for this question.



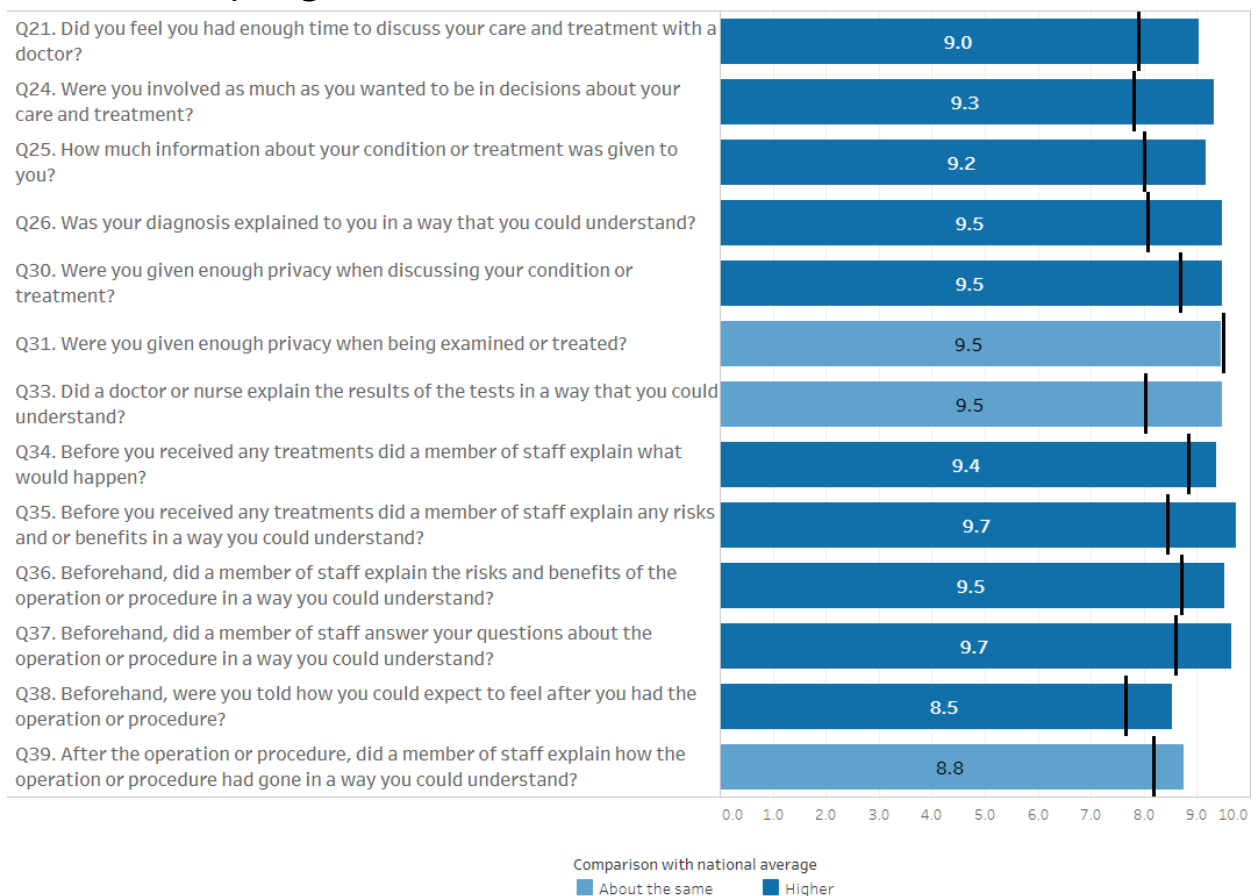
## Examinations, diagnosis and treatment

Figure 5 compares the hospital's overall score for 'examinations, diagnosis and treatment' with the national average. Figure 6 shows the hospital's scores for questions on this stage of care.

**Figure 5 Comparison of the Royal Victoria Eye and Ear Hospital with the national average score for 'examinations, diagnosis and treatment' (out of a maximum of 10).**



**Figure 6 The Royal Victoria Eye and Ear Hospital scores for questions on 'examinations, diagnosis and treatment'\***



\*The black line represents the national average

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

The hospital scored above the national average for this stage and received significantly higher ratings than in 2018. Most patients said that before they received any treatments, a member of staff explained any risks and benefits to them in a way they could understand. Patients also reported that members of staff answered their questions about operations or procedures in a way they could understand. The lowest scoring question for this stage related to patients being told how they could expect to feel after their operation or procedure. Nevertheless, the hospital still scored above the national average for this question.

**DISCHARGE  
OR TRANSFER**

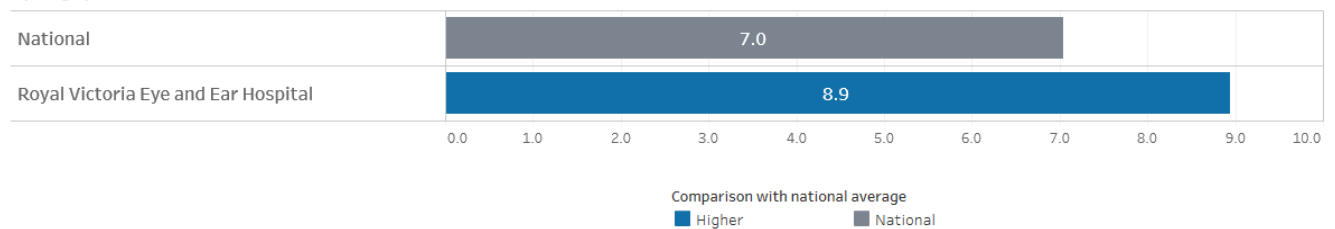
Experiences relating to discharge such as sufficient notice of discharge, and provision of information, advice and support.

**11 QUESTIONS**

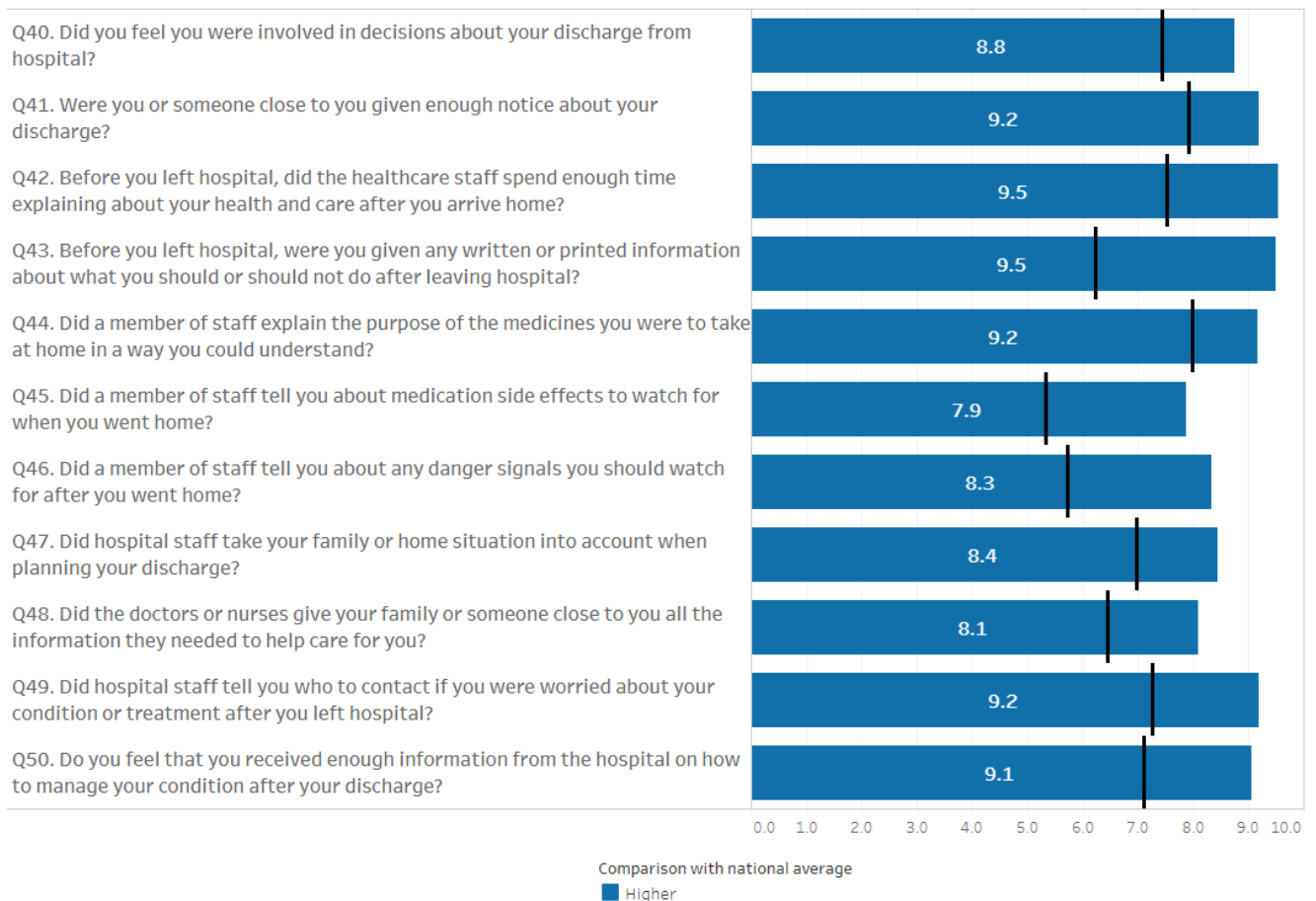
## Discharge or transfer

Figure 7 compares the hospital's overall score for 'discharge or transfer' with the national average. Figure 8 shows the hospital's scores for questions on this stage of care.

**Figure 7 Comparison of the Royal Victoria Eye and Ear Hospital with the national average score for 'discharge or transfer' (out of a maximum of 10).**



**Figure 8 The Royal Victoria Eye and Ear Hospital scores for questions on 'discharge or transfer'\***



\*The black line represents the national average

### Discharge or transfer: what do these results mean?

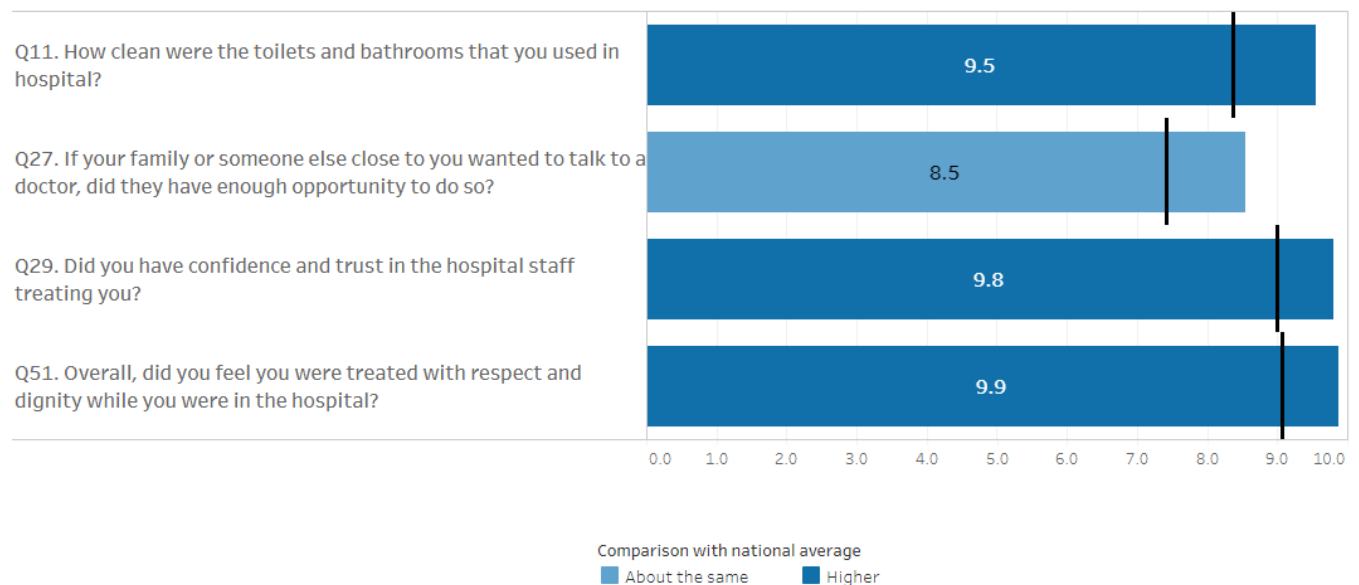
Participant ratings for this stage of care were above the national average and similar to last year's survey. Most patients felt that healthcare staff spent enough time providing explanations of their health and care for when they returned home, and also said that they received written or printed information on what they should or should not do at home. However, a number of patients said that the potential side effects of medication were not explained to them prior to leaving the hospital, though the hospital scored above the national average for this question. This was the lowest scoring question for this stage of care.



## Other aspects of care

Figure 9 shows the hospital's scores for questions on this stage of care.

**Figure 9 The Royal Victoria Eye and Ear Hospital scores for 'other aspects of care'\***



\*The black line represents the national average

### Other aspects of care: what do these results mean?

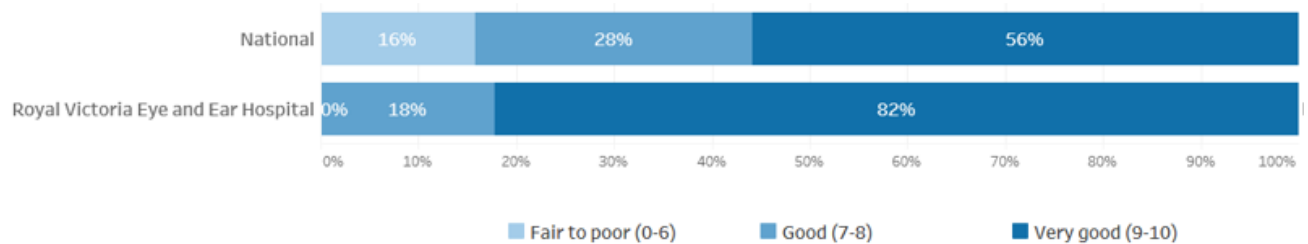
Most participants said they were treated with respect and dignity while in Royal Victoria Eye and Ear Hospital. On the other hand, a number of people said that their families were not given sufficient opportunity to talk to a doctor.

## 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. 82% of participants from the Royal Victoria Eye and Ear Hospital rated their care as very good, above the national figure of 56%.

Figure 10 compares the average overall rating of hospital experience for the Royal Victoria Eye and Ear Hospital with the national average.

**Figure 10 Overall rating of hospital experience for the Royal Victoria Eye and Ear Hospital and nationally**





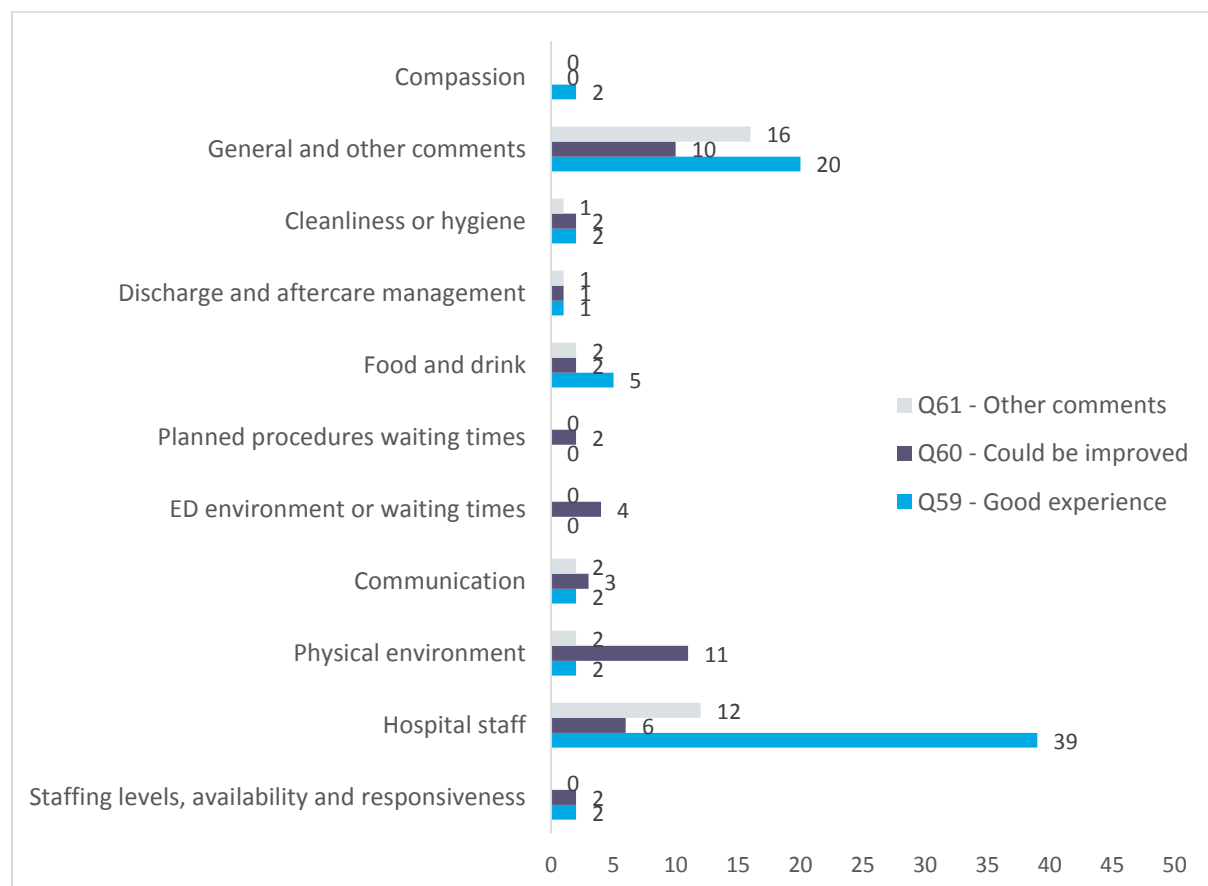
## In their own words: analysis of patients' comments

The last three questions (questions 59-61) of the survey asked patients to provide additional information, in their own words, on their experiences in hospital. 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, 111 comments were received from patients of the Royal Victoria Eye and Ear Hospital in response to the free-text questions in the 2019 survey.

Figure 11 shows the breakdown of 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.

When asked what was good about their care, most patient comments related to the 'hospital staff' and 'general and other comments' themes. Most of the comments suggesting improvements related to the 'physical environment' and 'general and other comments' themes. Responses to Q61 covered various themes. A selection of relevant comments from these themes is provided in Figure 12.

**Figure 11 Participant comments by theme**



## Figure 12 Example comments

### Positive comments

"Yes, was an excellent hospital from the doctor and nurses to the catering staff, I can't praise them enough; all were lovely."	"The doctors and nurses were very good and in particular the staff that looked after me before the operation took place. They explained and put me at ease and I felt less nervous."
"I was very impressed with all the staff, their professionalism and general pleasantness."	"The surgeon was especially kind and skilled - gave me great care and attention. Catering staff and food exceptionally good."
"I can't speak highly enough of all the staff at the Royal Eye and Ear Hospital, they were all incredibly kind, attentive and 100% professional — always smiling and no request was ever a problem! Many thanks to all!!"	"The care and treatment and food. I always got a cup of tea when I asked for it."

### Suggestions for improvement

"Cleaner came to "clean" the ward — with no gloves, wiped all sills, bed frames, bed tables and hand sanitization pumps with one cloth — no rinsing. This is not cleaning, this is spreading germs. Insufficient pain relief, always had to call for nurse for pain relief."
"I do not think it is very respectful or professional for medical staff not to introduce themselves to the patient or to discuss personal information relative to themselves in the middle of an examination of the patient."
"The food was very poor. I got multiple different times of when I would be discharged. I was lead to believe it would be in the evenings but I was asked to leave mid morning. They did not check if I had a lift or someone at home to look after me which I did not."

## Conclusion

### What were patients' experiences of hospital care in the Royal Victoria Eye and Ear Hospital in May 2019?

The majority of participants from the Royal Victoria Eye and Ear Hospital reported positive experiences in hospital. 100% of participants said they had 'good' or 'very good' overall experiences, compared with 84% nationally. The hospital achieved above-average scores for all stages of care.

Three areas of good experience were identified. These were areas that were related to participants' overall experiences and where participants gave significantly above-average ratings. For instance, patients reported that they were given sufficient notice of their discharge from hospital and also said that they were treated with respect and dignity. Hospital food was also rated positively by participants in 2019.

There were significant improvements from the 2018 survey across most stages of care, apart from 'discharge or transfer', which remained largely the same.

The findings of the 2019 survey will be used to help the Royal Victoria Eye and Ear Hospital improve the experiences of patients in hospital.

## Appendix 1: Areas of good experience and areas needing improvement

### Improvement map

It is important for hospitals to know if they scored above or below the national average for each question, and this is shown in the improvement map in Figure 13. The improvement map also shows which questions are related to patients' overall experience in hospital. Some questions had a stronger relationship with overall experience than others.

For example, Question 51 which asked patients if they were treated with respect and dignity had a strong relationship with overall experience. This means that patients who said they were treated with respect and dignity were very likely to give a positive rating of their overall experience. Patients who felt they were not treated with respect and dignity tended to give more negative ratings of their overall experience.

Other questions had a weaker relationship with overall experience – this means that patients' experiences in these areas had little bearing on how they rated their overall experience. An example is Question 43 which asked patients if they were given any written or printed information about what they should or should not do after leaving hospital. The relationship between written or printed information and patients' ratings of their overall experience was weak. This means that even if all patients received information, patients may have given negative ratings of their overall experience, or if nobody received written or printed information, patients may still have given positive ratings of their overall experience.

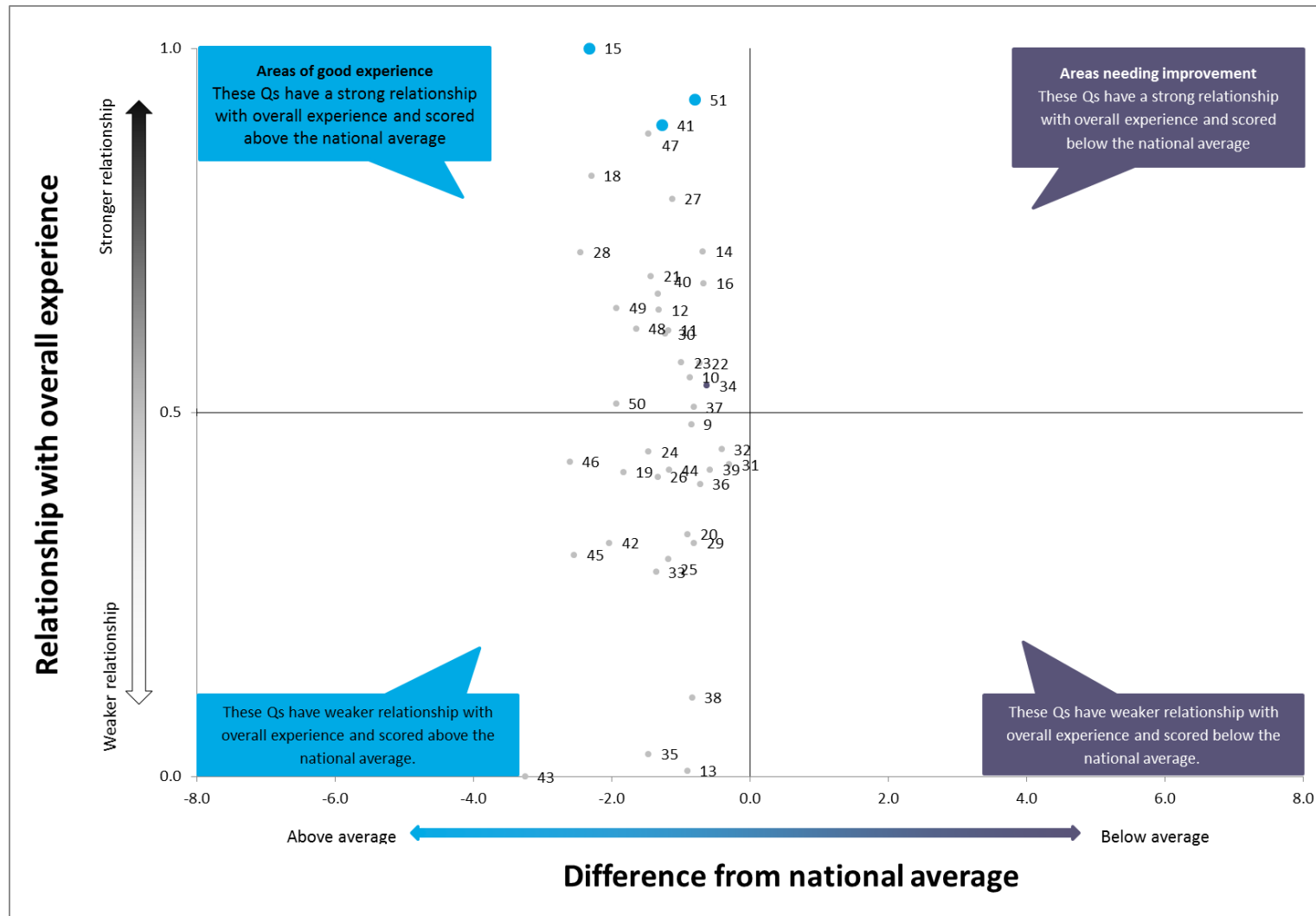
It is useful for hospitals to know which questions strongly relate to their patients' overall experience as these are the areas on which they should focus their improvement efforts.

In Figure 13, each dot shows a specific survey question for the Royal Victoria Eye and Ear Hospital. Questions at the top of the graph are strongly related to overall experience, while those at the bottom have a weaker relationship. Questions to the right of the graph scored below the national average, while those on the left scored above it.

Questions that scored significantly above average and had a stronger relationship with overall experience are areas of good experience. Questions that scored significantly below average and had a stronger relationship with overall experience are areas needing improvement.

The improvement map for each hospital is unique and gives specific information on where a hospital is doing well, and areas where improvements are needed. More information on the science behind the improvement map is available below. An interactive version of the improvement map is also available at <http://www.yourexperience.ie/>, along with instructions on how to interpret it.

**Figure 13 Improvement Map for Royal Victoria Eye and Ear Hospital**



## How the improvement map is constructed

The improvement map is constructed by charting the normalised correlation between each question and overall experience on the vertical axis, against the difference between the hospital average and national average for each question on the horizontal axis.

### What is correlation?

Correlation is a measure of the relationship between two variables. For example, in general there is a strong correlation between patients saying they were treated with respect and dignity, and patients giving a positive rating of their overall experience in hospital. It can thus be said that there is a strong correlation between respect and dignity, and overall experience. A 'correlation coefficient' is a number between 0 and 1 that represents the strength of a relationship, with 1 being the strongest possible relationship and 0 indicating that there is no relationship. Correlation does not tell us if a change in one variable is caused by a change in the other.

### How do we calculate the correlation coefficient?

The first step in calculating the correlation coefficient between two variables is to calculate their 'covariance'. Covariance is a simple measure of the relationship between two variables and is calculated using the formula below:

$$\text{COV}_{xy} = \frac{\sum (x_i - \bar{x})(y_i - \bar{y})}{n - 1}$$

While covariance does measure the relationship between variables, it does so in an unstandardised way, depending on the scale of measurement used. This makes comparing covariances measured on different scales problematic. In order to get around this issue, 'standardisation' must be carried out. In order to do this, the covariance for both variables must be divided by the product of the standard deviations for each variable. The formula below shows how standardisation is carried out, resulting in  $r$ , known as the 'Pearson correlation coefficient'.

$$r = \frac{\text{COV}_{xy}}{s_x s_y} = \frac{\sum (x_i - \bar{x})(y_i - \bar{y})}{(N - 1)s_x s_y}$$

The final step in the analysis is to normalise the correlation coefficients between 0 and 1 using the below formula:

$$r = \frac{r - r_{\min}}{r_{\max} - r_{\min}}$$

In Figure 16, we plot the correlation coefficients between each question and overall experience on the vertical axis. Each question's difference from the national average is plotted on the horizontal axis.

### How do we calculate difference from the national average?

Statistical tests were carried out to examine if there were significant differences between a hospital's score for each question and the national average for that question. A z-test was used to compare question scores at the 99% confidence level. A z-test is a statistical test used to examine whether two population mean scores are different. A statistically significant difference means it is very unlikely that results were obtained by chance alone if there was no real difference. Therefore, when a score is significantly 'higher than' or 'lower than' the national average, this is highly unlikely to have occurred by chance.