

The National Patient Experience Survey: Impacts on policy and practice

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Background

- Ireland's first inpatient experience survey carried out in 2017, repeated in 2018.
 - Move towards patient-centred care, policy and regulation
- Partnership between HSE, HIQA and Department of Health.
- Objective - Use patient feedback to make measurable positive impact on quality and safety of care, regulation and policy.



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What is patient experience?

- Patient Experience:
 - “The sum of all interactions, shaped by an organisation’s culture, that influence patient perceptions, across the continuum of care”¹
 - Focus on more objective elements of care experience rather than satisfaction with care.
- Patient experience surveys are routinely conducted in most developed health systems.
- Good indicator of quality, helps identify areas needing improvement²⁻⁵



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Developing the programme

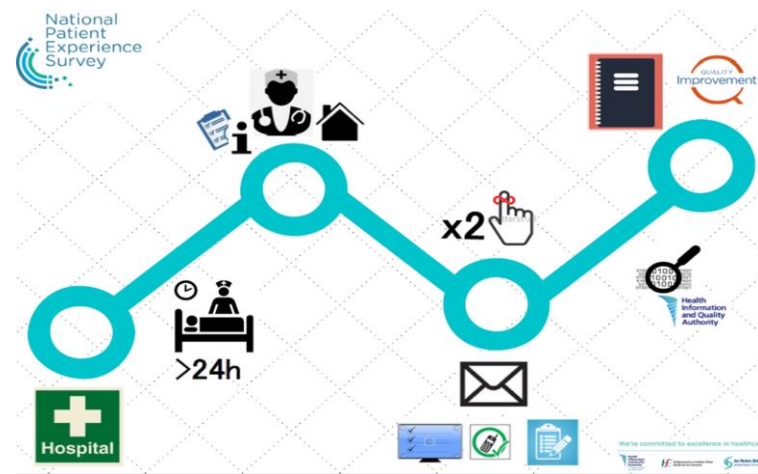
- International review informed approach and survey tool.
- Consultation with key local stakeholders.
 - Patients
 - Hospital staff
 - Administrators
 - Policy makers
- Robust governance structures

- 1 An [international review](#) identified that many other countries use pre-validated questions from the Picker Institute Europe.
- 2 Patient and data [focus groups](#) identified the most important question areas.
- 3 A [Delphi Study](#) identified 60 priority and 40 reserve questions.
- 4 [Picker Institute Europe](#) checked measurement and analytic quality of the questions.
- 5 Ten [cognitive interviews](#) took place with patients to correct any problems with the first National Patient Experience Survey questionnaire in 2017.
- 6 The National Patient Experience Survey governance groups finalised and approved the questionnaire for 2017.

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Methods

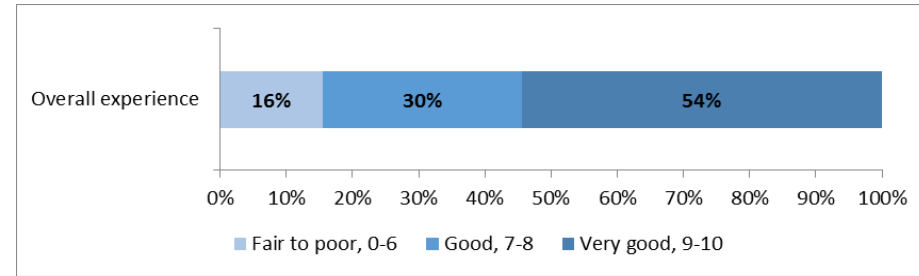
- Final questionnaire:
 - 61 internationally validated items, tailored to Irish context
 - Organised by 'stages of care'
- Analysis
 - Results weighted by age and admission status
 - Comparisons against national average at hospital and hospital group level.
- Reporting
 - Online 'dashboard' access for hospitals
 - National report and hospital reports
 - Health service published responses



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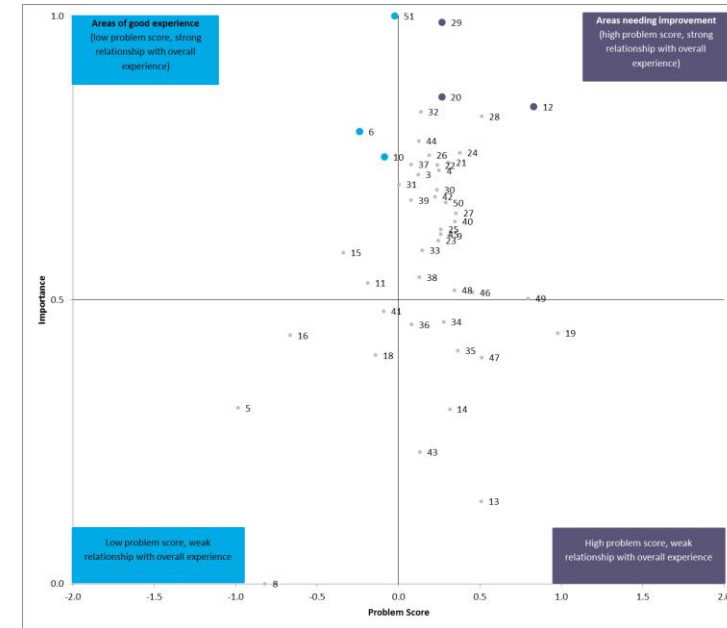
Key Findings

- 2017: 13,706 (51%) responded
- 2018: 13,404 (50%) responded
- Over 20,000 qualitative comments received each year.
- Discharge the poorest-rated stage of care
 - Significant improvement in 2018



Key Findings

- Identifying areas for improvement a key objective.
 - Each hospital received 'improvement map'
 - Difference from national average and strength of relationship with overall exp.
- Typical areas for improvement:
 - Respect and dignity, food and drink, discharge information, patient engagement, ED waiting times, etc.



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Qualitative responses

"The nursing staff were very attentive, helpful and caring — answered questions — never gave the impression that they were in a hurry despite being on a busy ward."

"I felt the surgeon communicated with me on a personal level, which gave me trust and built my confidence in facing surgery."

"The A&E section seemed to be very understaffed and very underequipped, as in not enough chairs and trolleys."



"Discharge doctor needs to spend a bit more time explaining condition and options available. Being discharged felt very rushed."

Response to Findings

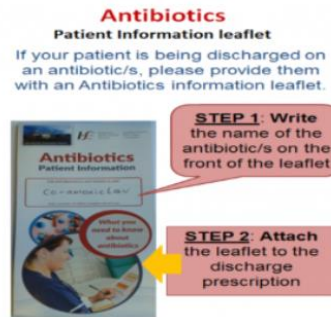
- HSE published national and hospital-level quality improvement plans.
- QI initiatives coordinated by national oversight group.
 - Avoiding fragmented approach



When am I going Home
Please feel free to answer these questions below and place in the box provided.

Patient: Does this poster capture the questions you have in relation to your stay and discharge from MUH? YES/NO
Comment:

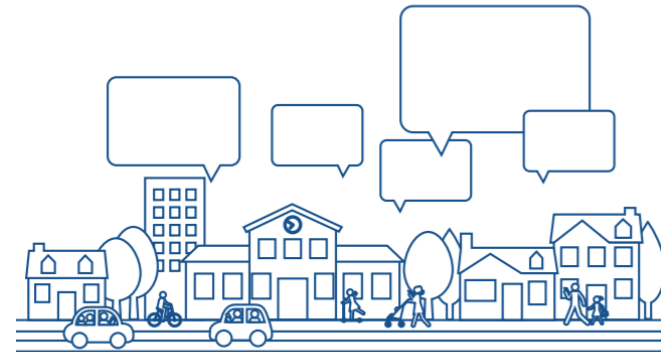
Staff: Are you aware of the answer to these 4 questions in relation to the patients under your care? YES/NO
Comment:



HSE ACUTE HOSPITAL SERVICES

Listening, Responding and Improving

The HSE response to the findings of the National Patient Experience Survey 2017



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Measuring Impact

- Key element, often overlooked.
- HIQA Knowledge Sharing and Impact Strategy under development
 - Multiple levels – outputs, reach, engagement, changes to practice
 - Development of resources, embedding analytics and bringing value to the community are key enablers.
 - Goal is to promote safety and quality in provision of health and social care services.



Rachel Flynn, @HIQA's Director of Health Information and Standards and @NPSurvey Director, Minister for Health @Simonvittita, and @HSElive's National Director of Acute Services Liam Woods launching the 2018 survey results.



Special report: National health survey 'the first real effort' to hear patients' voices

Patients in Limerick encouraged to take part in national survey

By Aisling Kelly · May 31, 2018

ISQUA18-1307
The Development, Implementation and Outcomes of a National Patient Experience Survey and Associated Quality Improvement Infrastructure: Lessons from Ireland

C. Foley, T. Hunt, T. O'Connell, R. Flynn
International Journal of Quality in Health Care, Volume 30, Issue suppl_1, 18 September 2018, Pages 38. <https://doi.org/10.1093/ijq/isy044.35>
Published: 18 September 2018 Article history

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Impact to date

- **Outputs:**
 - National report, 39 hospital reports, 6 hospital group reports, technical report, QIPs and interactive online reports published annually.
- **Reach**
 - Extensive media coverage, social media engagements, report downloads – 2018 national report 3,184 downloads in 1 week.
- **Engagement**
 - Hospital visits, national conference upcoming, national and international conference presentations, radio interviews, workshops.
- **Change**
 - National communications training programme, inclusion in Sláintecare, data informed nutrition policy, parking charges, regulation, etc.

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Impact going forward

- Strategy
 - National Care Experience Programme
 - Expansion to maternity care and two other areas by 2021
 - Competency centre – build capacity, provide resources, develop academic links, etc.
- Future impact assessment
 - Meaningful measurement will take time
 - Novel approach to measurement developed
 - Annual impact reports to be published from 2019 on.



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Conclusions

- Benefits of partnership approach
 - Reluctance within the system was addressed and overcome.
 - Implications for academic researchers
- Engagement and buy-in
 - Broad awareness of the survey and interest at all levels
 - Commitment to making improvements
- Strategic approach
 - Building impact assessment into the programme



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Thank you!

Visit patientexperience.ie for more info



Follow us @NPESurvey

References

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5. Coulter A, Fitzpatrick R, Cornwell J. The point of care - Measures of patients' experience in hospital: purpose, methods and uses. The King's Fund, 2009

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