

National Inpatient Experience Survey 2021

Experiences of discharge or transfer from hospital

Hospital discharge





40 hospitals took part



response rate

10,743 participants (eligible population of 25,346)

Planning and preparing for discharge from hospital





31%

(6,838) said they were given enough notice of their discharge.

(1,987) said that doctors or nurses did not give their family or someone close to them all the information they needed to help care for them.

One patient said: "No information provided to family, about the procedure or follow-up care."

Information about care at home after discharge



(7,614) said that before they left hospital, healthcare staff spent enough time explaining their health and care after they arrived at home.



(2,553) said that a member of staff did not tell them about any danger signals they should watch for at home.

One patient said: "Clear instructions/information should be given on discharge."

Medications

69%

(5,744) said that the purpose of medications was explained to them in a way that they understood.



One patient said: "Side effects of medication should be given and more medical information on possible further symptoms that may arise with your condition upon discharge."



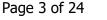
About the National Care Experience Programme

The National Care Experience Programme seeks to improve the quality of health and social care services in Ireland by asking people about their experiences of care and acting on their feedback. The National Care Experience Programme is a joint initiative by the Health Information and Quality Authority (HIQA), the Health Service Executive (HSE) and the Department of Health.

The National Care Experience Programme has a suite of surveys that capture the experiences of people using our services. The Programme implements the annual National Inpatient Experience Survey, the National Maternity Experience Survey and the National Nursing Home Experience Survey, and is currently developing the National Maternity Bereavement Experience Survey and National End of Life Survey.

The surveys aim to learn from people's feedback about the care received in health and social care services to find out what is working well, and what needs to be improved.

A National Care Experience Programme Survey Hub is available to provide support, guidance, information and resources to assist providers to develop, conduct and analyse their own surveys, and act upon the findings.











Structure and content of this report

About the National Care Experience Programme
Structure and content of this report4
About the National Inpatient Experience Survey 20215
About this report6
What were the main findings on discharge or transfer?
In brief: the National Inpatient Experience Survey 2021
Who was eligible to take the survey and when were patients given the survey?8
Who participated in the 2021 survey?9
Which hospitals participated?10
The stages of care along the patient journey10
Interpreting the results for discharge or transfer
Experiences of discharge or transfer from hospital
Planning and preparing for discharge from hospital
Information about care at home after discharge
Medications
Experiences of discharge or transfer in participating hospitals and the six hospital groups
Experiences of discharge or transfer by sex and age group
Highest and lowest-scoring questions on 'discharge or transfer'
Conclusion
References







About the National Inpatient Experience Survey 2021

The National Inpatient Experience Survey¹ 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 run on an annual basis between 2017 and 2019, but was cancelled in 2020 due to the impact of the COVID-19 pandemic. The survey was run again in 2021 and adapted to reflect the changed acute hospital care landscape during the pandemic. Due to the cyberattack on HSE IT systems, it was necessary to move the survey month from May to September. While the majority of the questions on the survey were unchanged from previous years, seven questions on COVID-19 were included.

Nationally, 25,346 people were invited to participate in the fourth National Inpatient Experience Survey. In total, 10,743 people responded, resulting in a response rate of 42%.

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, 2018 and 2019 survey results by producing detailed quality improvement plans at national, hospital group and hospital levels. The implementation of these plans is coordinated by an oversight group, and a wide range of initiatives have already been introduced across Ireland's public acute hospitals. Some examples of these initiatives can be seen at <u>www.yourexperience.ie/inpatient/hospital-initiatives/</u>. A decision was made by the survey's programme board to produce two in-depth thematic reports rather than individual hospital reports². The 2021 National Report, which includes some hospital-level results, as well as a thematic report on the *Experiences of Human Rights-based Care in Hospital*, are available at <u>www.yourexperience.ie</u>.





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

² Hospital-level survey results can still be accessed at www.yourexperience.ie.





The National Inpatient Experience Survey 2021 follows the patient's journey through hospital from admission to discharge. The survey questions are grouped into stages along the patients' journey: admissions; care on the ward; examinations, diagnosis and treatment; discharge or transfer; care during the pandemic and other aspects of care. Eleven survey questions ask about patients' experiences relating to discharge, including notice of discharge and provision of information.

'Discharge or transfer' has been the lowest-scoring stage of care since the National Inpatient Experience Survey began in 2017, with the greatest scope for improvement in patient experiences. Patients who are not sufficiently informed about their condition, their medication regime and how to care for themselves at home are at a higher risk of complications and being re-admitted to hospital.⁽¹⁻³⁾ Across the first three years of the survey (2017 to 2019), 11.0% of patients (n=3,360) said that the purpose of medicines they were to take at home were not explained to them in a way that they could understand, while 38.5% (n=10,291) reported that they were not told about medication side effects to watch for when they went home. In response to these findings, several hospitals introduced quality improvement plans aimed at improving patients' experiences of discharge, including discharge planning and the use of information leaflets. The HSE's Medicines A-Z resource (https://www2.hse.ie/conditions/medicines/), which launched in October 2021, was developed in collaboration with general practitioners, the Royal College of Surgeons in Ireland, SaferMeds and the Health Products Regulatory Authority (HPRA) in response to these findings.

This report focuses on patients' experiences of discharge or transfer from hospital.





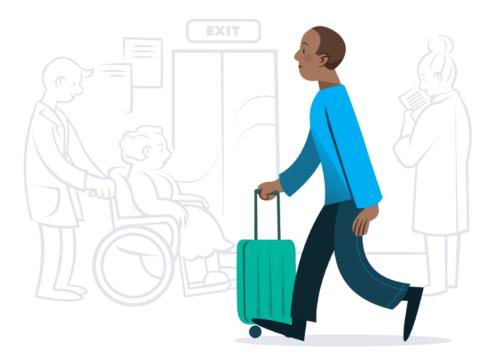
We're committed to excellence in healthcare



What were the main findings on discharge or transfer?

As in previous years, discharge or transfer was the lowest-rated stage of care again in 2021, with an average patient rating of 6.9 out of 10. Responses showed that patients did not always receive the information they needed when being discharged from hospital.

The highest-scoring question for this stage of care asked patients if staff clearly explained the purpose of medications, with 5,744 patients (68.9%) who responded to this question saying that the purpose of the medicines they were to take at home was explained in a way they could completely understand. The lowest-scoring question concerned information on the side effects of medication, with 2,644 patients (36.1%) who responded to this question saying that a member of staff did not tell them about medication side effects to watch for when they went home. Patients who were admitted to small and specialist elective hospitals tended to report more positive experiences of discharge or transfer than patients admitted to medium and large hospitals.



We're committed to excellence in healthcare







In brief: the National Inpatient Experience Survey 2021

Who was eligible to take the survey and when were patients given the survey?

Patients aged 16 years or older, who spent at least 24 hours in a public acute hospital and who were discharged from hospital during the month of September 2021 were eligible to participate in the survey. Maternity, day cases, paediatric, psychiatric and some other specialist (less than 24 hours stay) hospital services, as well as private hospitals, were not part of the survey on this occasion. Figure 1 summarises the eligibility criteria for participation in the National Inpatient Experience Survey 2021.

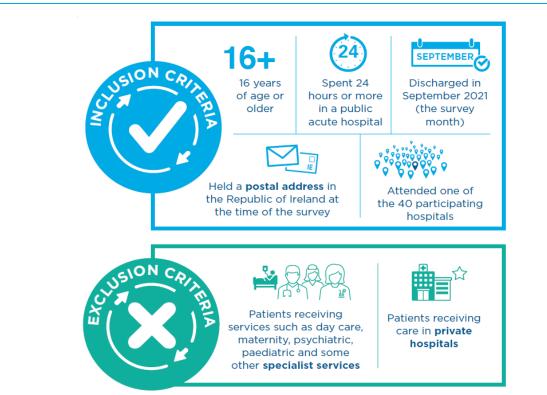


Figure 1. Inclusion and exclusion criteria

Eligible patients were sent a questionnaire in the post in October.³ Participants could also choose to complete the survey online. Two reminder letters were sent to people







³ In previous surveys, patients received their questionnaire in the post two weeks after discharge. However, this year all eligible patients were sent a survey pack at the same time, in order to reduce the demands on hospital administrative staff during the pandemic.



who were invited to participate but had not yet returned a survey. Internationally, the second reminder has been shown to increase response rates significantly.⁽⁴⁾

Participation in the survey was voluntary and confidential. Participants could also opt out of the survey either while they were still in hospital or after discharge. The administration and survey fieldwork was carried out by Behaviour & Attitudes⁴ on behalf of the partner organisations.

Who participated in the 2021 survey?

25,346 people discharged from a public acute hospital during the month of September 2021 were invited to participate in the survey. In total, 10,743 people (42%) returned a completed questionnaire.

In total, 5,338 males (49.7%) and 5,405 females (50.3%) participated in the survey. Of the participants, 8,670 (80.8%) were aged 51 years or older. Most people (78.5%) were admitted to hospital through the emergency department. Figure 2 shows the characteristics of people who participated in the 2021 survey. The National Inpatient Experience Survey 2021 National Report, available at <u>www.yourexperience.ie</u>, provides additional detail on those who took part.

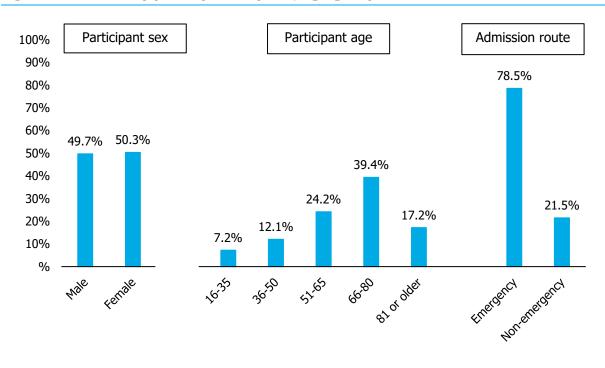


Figure 2. Survey participants by sex, age group and admission route



H-



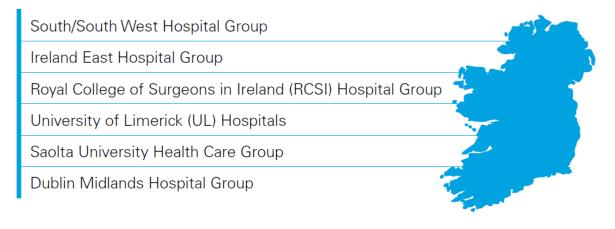


⁴ Behaviour & Attitudes is a market research agency. More information on the company can be found on their website <u>www.banda.ie</u>.



Which hospitals participated?

Forty public acute hospitals participated in the 2021 survey. Acute hospitals deliver emergency, non-emergency/elective and outpatient care to people who are ill or injured. Public hospitals in Ireland belong to one of six hospital groups:



The stages of care along the patient journey

The National Inpatient Experience Survey 2021 follows the patient journey through hospital from admission to discharge.

This report focuses on the experiences of discharge or transfer from hospital. Questions were grouped into three sections, reflecting different aspects of patients' experiences of discharge or transfer from hospital: 1) Planning and preparing for discharge from hospital, 2) Information about care at home after discharge, and 3) Medications. Results for the other stages of care can be found in the 2021 National Report, available at <u>www.yourexperience.ie</u>.

Interpreting the results for discharge or transfer

Scores out of 10 are given for each question belonging to the discharge or transfer stage of care, and to the stage as a whole. A score of 0 indicates a very negative experience and a score of 10 indicates a very positive experience. Throughout this report, quotations from patients are used to illustrate particular themes. Quotations from patients have been redacted to remove any information that could identify an individual.





We're committed to excellence in healthcare



Experiences of discharge or transfer from hospital

Planning and preparing for discharge from hospital

Four survey questions asked about planning and preparing for discharge from hospital. The highest-scoring question in this section concerned sufficient notice of discharge, with 6,838 patients (67.6%) saying that they were definitely given enough notice about when they were going to be discharged. The lowest-scoring question related to the provision of information to family members, with 1,987 patients (30.7%) saying that doctors or nurses did not give their family or someone close to them all the information they needed to help care for them.

Figure 3 shows the national scores for each of these questions. Figure 4 shows the percentage breakdown for each response option. Figure 5 shows examples of comments made by patients in response to the three open-ended questions.

Figure 3. Scores for questions on preparing for discharge from hospital (out of 10)

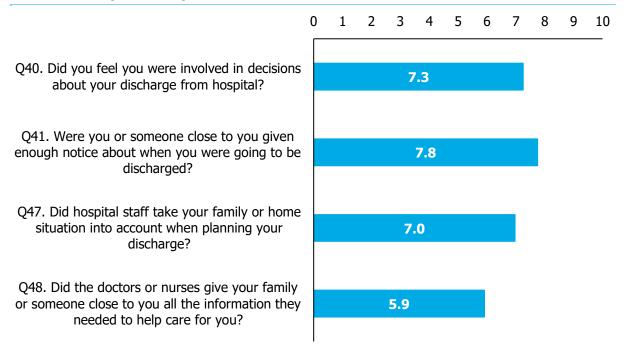








Figure 4. **Percentage breakdown for each response option**

0'	1%	20%	40%	60%	80%	100%
Q40. Did you feel you were involved in decisions about your discharge from hospital?		60.2% 25.2% 14.6 %				
Q41. Were you or someone close to you given enough notice about when you were going to be discharged?		67	.6%		20.3% 1	. <mark>2.0</mark> %
Q47. Did hospital staff take your family or home situation into account when planning your discharge?		59.9	9%	20	.4% 19.	7%
Q48. Did the doctors or nurses give your family or someone close to you all the information they needed to help care for you?		49.1%	6	20.1%	30.7%	/0
Yes, definitely/Yes, completely	y 🗖	Yes, to s	some ext	ent 🔳	No	

Figure 5. Sample comments

"On discharge, no help to dress so had to leave in night clothes. Difficult for family to get to talk to doctors on discharge."

"Family are not always contacted or can't get to speak to a doctor. Clear instructions/information should be given on discharge."

"Maybe a little more time could have been spent preparing for discharge. The nurses seemed under pressure/in charge of a lot of patients."

> "Admission and discharge planning very efficient."

> > We're committed to excellence in healthcare

H-







Information about care at home after discharge

Five questions asked about the information that patients received about their care at home after discharge. The highest-scoring question in this section concerned time spent explaining health and care at home, with 7,614 patients (75.4%) saying that before they left hospital, healthcare staff spent enough time explaining about their health and care after they arrived home. The lowest-scoring question concerned danger signals to watch out for, with 2,553 patients (32.1%) saying that a member of staff did not tell them about any danger signals they should watch for after they went home.

Figure 6 shows the national scores for these questions. Figure 7 shows the percentage breakdowns for each of the response options. Figure 8 shows examples of comments made by patients in response to the three open-ended questions.

0 1 2 3 4 5 6 7 8 9 10 Q42. Before you left hospital, did the healthcare staff spend enough time explaining about your 7.5 health and care after you arrived home? Q43. Before you left hospital, were you given any written or printed information about what 6.3 you should or should not do after leaving hospital? Q46. Did a member of staff tell you about any danger signals you should watch for after you 5.7 went home? Q49. Did hospital staff tell you who to contact if you were worried about your condition or 7.1 treatment after you left hospital? Q50. Do you feel that you received enough information from the hospital on how to manage 7.0 your condition after your discharge?

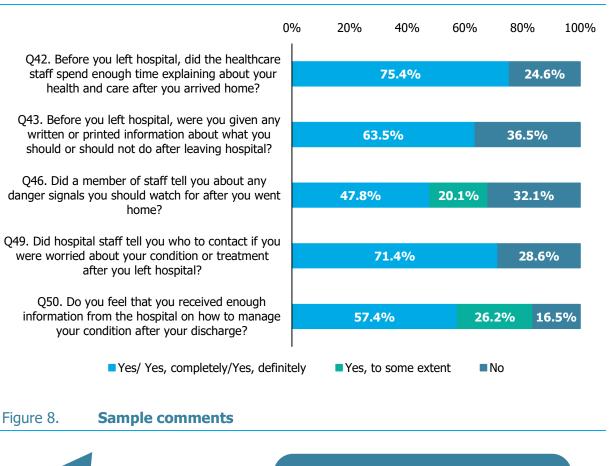
Figure 6. Scores for questions on information about care at home



An Roinn Sláinte Department of Healt



Figure 7. **Percentage breakdown for each response option**



"Confusion on discharge could have done with information on aftercare." "They were very pleasant but did not give me much information. I was discharged + did not know still what happened me. I am fine again now."

"I felt as though everyone knew my condition and was prepared. Everyone was professionally concerned but not overbearing. Advice was given in a supportive not forceful manner which meant I was more receptive."

"The information about after care and timeline of recovery was non-existent."

We're committed to excellence in healthcare

H-







Medications

Two questions asked about explanations of medicines and side effects to watch for at home. 5,744 patients (68.9%) said that the purpose of medications was explained to them in a way that they completely understood. On the other hand, 928 patients (11.1%) said that the purpose of medications was not explained to them in a way they could understand. 3,269 patients (44.6%) said that a member of staff told them about medication side effects to watch for when they went home; however, 2,644 patients (36.1%) said that they were not told about the side effects of medications.

Figure 9 shows the national scores for the questions on medications. Figure 10 shows the percentage breakdown for each response option. Figure 11 shows examples of comments made by patients in response to the three open-ended questions.

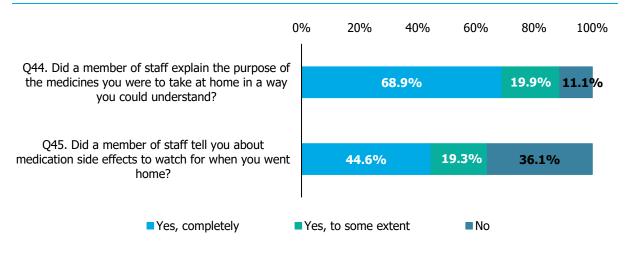
Figure 9. Scores for questions on medications

Q44. Did a member of staff explain the purpose of the medicines you were to take at home in a way you could understand?

Q45. Did a member of staff tell you about medication side effects to watch for when you went home?



Figure 10. **Percentage breakdown for each response option**



We're committed to excellence in healthcare







Figure 11. Sample comments

"There was no information given on my aftercare. No one explained the medication or the outpatient clinics I was to attend." "Discharge procedures - a little more information regarding changes to medication should be provided with the patient on discharge."

"They took great care in explaining the reason for the new medication." "Following discharge: Weekly appointment at out-patient clinic for follow up monitoring of effectiveness of medication prescribed. (Bloods taken/meeting with doctor to discuss results/review of medications/all questions dealt with). When course of medication ends, further review of health status planned, and appointments to be scheduled if/when deemed necessary. All very reassuring."







Experiences of discharge or transfer in participating hospitals and the six hospital groups

Nationally, the 'discharge or transfer' stage of the patient journey scored 6.9 out of 10. Figure 12 shows the scores for discharge or transfer for each of the six hospital groups. Figure 13 shows the scores for discharge or transfer for each hospital. Patients admitted as non-emergency cases gave more positive ratings than patients admitted through the emergency department. Patients admitted to specialist elective and small hospitals gave more positive ratings for discharge or transfer than those admitted to larger hospitals. Figure 14 shows the scores for discharge or transfer by admission type and hospital size.

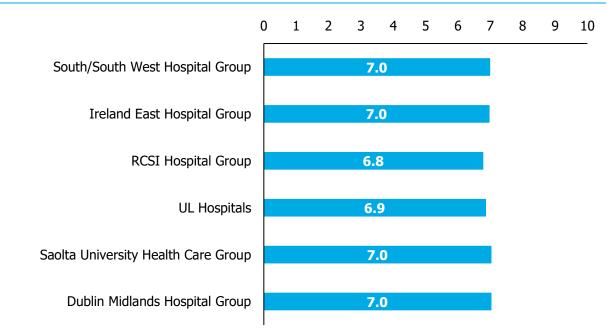


Figure 12. Scores for discharge or transfer by hospital group







Figure 13. Scores for discharge or transfer by hospital

	0 1 2 3 4 5 6 7 8 9 10
Mater Misericordiae University Hospital	7.0
St. Johns Hospital	8.0
Cork University Hospital	6.7
Sligo University Hospital	7.2
Cappagh National Orthopaedic Hospital	8.6
Bantry General Hospital	8.0
Connolly Hospital	6.9
Croom Orthopaedic Hospital	8.1
University Hospital Waterford	6.5
Lourdes Orthopaedic Hospital Kilcreene	8.7
Letterkenny University Hospital	7.0
Mallow General Hospital	8.4
Midland Regional Hospital Portlaoise	7.1
Midland Regional Hospital Tullamore	7.4
Mercy University Hospital	7.3
Naas General Hospital	6.5
Cavan and Monaghan Hospital	6.9
Our Lady of Lourdes Hospital	6.9
Our Ladys Hospital Navan	7.9
Portiuncula University Hospital	6.4
Royal Victoria Eye and Ear Hospital	8.6
St. Columcilles Hospital	7.1
South Infirmary Victoria University Hospital	8.6
St James Hospital	7.2
St Lukes General Hospital	6.6
St Michaels Hospital	7.9
South Tipperary General Hospital	7.2
Mayo University Hospital	7.0
St. Vincents University Hospital	6.6
Tallaght University Hospital	6.8
University Hospital Kerry	6.5
University Hospital Limerick	6.7
Ennis Hospital	6.7
Nenagh Hospital	7.4
Wexford General Hospital	6.8
Midland Regional Hospital Mullingar	6.6
Beaumont Hospital	6.6
Roscommon University Hospital	7.7
Galway University Hospitals	7.1

Page 18 of 24

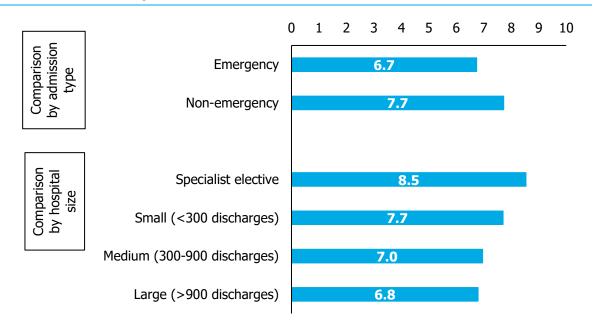
We're committed to excellence in healthcare

Æ



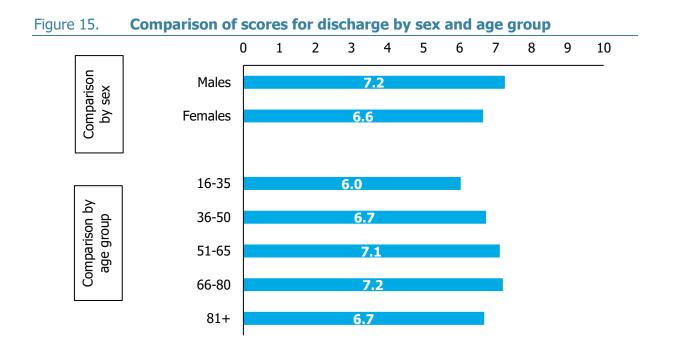


Figure 14. Comparison of scores for discharge or transfer by admission type and hospital size



Experiences of discharge or transfer by sex and age group

Male participants gave more positive ratings than female participants. Some differences were also found between people of different ages. Participants aged 16-35 years gave below-average ratings for this stage of care, while people aged 66-80 years gave the highest average score (7.2 out of 10). Figure 15 shows the scores for discharge or transfer by sex and age group.



We're committed to excellence in healthcare





10

Highest and lowest-scoring questions on 'discharge or transfer'

The highest-scoring question on 'discharge or transfer' related to the explanation of the purpose of medications (Q44), with a national average of 7.8 out of 10. Figure 16 shows the scores for Q44 for each hospital. The lowest-scoring question concerned information on the side effects of medication (Q45), with a national average of 5.4 out of 10. Figure 17 shows the scores for Q45 for each hospital.

Figure 16. Scores for 'explanation of the purpose of medications' by hospital

Mater Misericordiae University Hospita St. Johns Hospita Cork University Hospita Sligo University Hospita Cappagh National Orthopaedic Hospita Bantry General Hospita Connolly Hospita Croom Orthopaedic Hospita University Hospital Waterford Lourdes Orthopaedic Hospital Kilcreene Letterkenny University Hospita Mallow General Hospita Midland Regional Hospital Portlaoise Midland Regional Hospital Tullamore Mercy University Hospita Naas General Hospita Cavan and Monaghan Hospita Our Lady of Lourdes Hospita Our Ladys Hospital Navar Portiuncula University Hospita Royal Victoria Eye and Ear Hospita St. Columcilles Hospita South Infirmary Victoria University Hospita St James Hospita St Lukes General Hospita St Michaels Hospita South Tipperary General Hospita Mayo University Hospita St. Vincents University Hospita Tallaght University Hospita University Hospital Kerry University Hospital Limerick Ennis Hospita Nenagh Hospita Wexford General Hospita Midland Regional Hospital Mullinga Beaumont Hospita Roscommon University Hospita Galway University Hospital

								-	-	
0	1	2	3	4	5	6	7	8	9	
al ⊨				7.7						
al ⊨				9	.2					
al ⊨				7.4						
al ⊨				8.4						
al ⊨					9.4					
al ⊨				8.	7					
al ⊨				8.1						
al ⊨				8.	7					
d 🗖				7.7						
e 🗖					9.9					
al ⊨				7.7						
al ⊨					9.4					
e 🗖				8.4						
e 🗖				8.3						
al ⊨				8.0						
al ⊨				7.7						
al 🗖				7.4						
al ⊨				7.7						
n ⊨				8.6	5					
al ⊨			7	.2						
al ⊨				9	.0					
al 🗖				7.9						
al 🗖				ç).2					
al 🗖				7.8						
al 🗖				7.3						
al 🗖				8.4						
al 🗖				8.0						
al 🗖				7.6						
al 🗖				7.5						
al 🗖				8.0						
у 🗖				.0						
:k 📕				7.6						
al 🗖				7.5						
al 🗖				7.5				1		
al 🗖				7.7						
ar 🗖				8.2						
al 🗖				7.5						
al 🗖				7.6						
ls				8.1						

We're committed to excellence in healthcare

H-



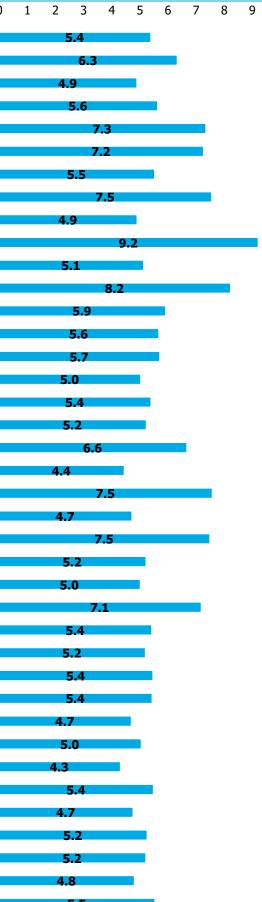




10

Figure 17. Scores for 'information on the side effects of medication' by hospital

the side ene	
0 1 2 3	
5.4	Mater Misericordiae University Hospital
6.	St. Johns Hospital
4.9	Cork University Hospital
5.6	Sligo University Hospital
	Cappagh National Orthopaedic Hospital
	Bantry General Hospital
5.5	Connolly Hospital
	Croom Orthopaedic Hospital
4.9	University Hospital Waterford
	Lourdes Orthopaedic Hospital Kilcreene
5.1	Letterkenny University Hospital
	Mallow General Hospital
5.9	Midland Regional Hospital Portlaoise
5.6	Midland Regional Hospital Tullamore
5.7	Mercy University Hospital
5.0	Naas General Hospital
5.4	Cavan and Monaghan Hospital
5.2	Our Lady of Lourdes Hospital
6	Our Ladys Hospital Navan
4.4	Portiuncula University Hospital
	Royal Victoria Eye and Ear Hospital
4.7	St. Columcilles Hospital
	South Infirmary Victoria University Hospital
5.2	St James Hospital
5.0	St Lukes General Hospital
	St Michaels Hospital
5.4	South Tipperary General Hospital
5.2	Mayo University Hospital
5.4	St. Vincents University Hospital
5.4	Tallaght University Hospital
4.7	University Hospital Kerry
5.0	University Hospital Limerick
4.3	Ennis Hospital
5.4	Nenagh Hospital
4.7	Wexford General Hospital
5.2	Midland Regional Hospital Mullingar
5.2	Beaumont Hospital
4.8	Roscommon University Hospital
5.5	Galway University Hospitals



We're committed to excellence in healthcare

HE





Conclusion

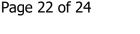
Since the National Inpatient Experience Survey commenced in 2017, 'discharge or transfer' has remained the lowest-rated stage of care. However, given the significant changes in care provision as a result of the COVID-19 pandemic, comparisons with previous survey scores were not made.

In 2021, the average rating for discharge or transfer was 6.9 out of 10. The highestscoring questions for this stage of care related to sufficient notice of discharge and explanations of the purpose of medications. Most participants (68%) said that they were definitely given enough notice of their discharge, and that a member of staff explained the purpose of the medicines they were to take at home in a way they could completely understand (69%). The lowest-scoring questions for discharge or transfer concerned information on the side effects of medication and danger signals to watch out for, with 36% of patients saying that they were not told about medication side effects to watch for when they went home. Similarly, 32% of participants said that they were not told about any danger signals they should watch for after they went home. Patients who were admitted to small and specialist elective hospitals tended to report more positive experiences of discharge or transfer than patients admitted to medium and large hospitals.

The findings of the 2021 survey show that most patients had positive experiences of discharge or transfer. However, it remains the lowest-rated stage of care, with room for improvement particularly in relation to information on medication side effects and danger signals to watch for after discharge. The HSE will continue to use the survey results to inform the development of quality improvement plans, which will be available at <u>www.yourexperience.ie</u> in April 2022.









References

1. Forster AJ, Murff HJ, Peterson JF, Gandhi TK, Bates DW. The incidence and severity of adverse events affecting patients after discharge from the hospital. Annals of Internal Medicine. 2003;138(3):161-7.

2. McMurray A, Johnson P, Wallis M, Patterson E, Griffiths S. General surgical patients' perspectives of the adequacy and appropriateness of discharge planning to facilitate health decision-making at home. Journal of Clinical Nursing. 2007;16(9):1602-9.

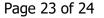
3. Naylor MD, Aiken LH, Kurtzman ET, Olds DM, Hirschman KB. The care span: The importance of transitional care in achieving health reform. Health Aff (Millwood). 2011;30(4):746-54.

4. Health Information and Quality Authority. International Review on Patient Experience Surveys. <u>https://yourexperience.ie/wp-</u>

content/uploads/2019/09/International-review-on-the-use-of-patient-experiencesurveys-in-the-acute-sector.pdf; 2016.



An Roinn Sláinte Department of Health







HĨ



An Roinn Sláinte Department of Health