



## **Review of Processes for the 2024 National Inpatient Experience Survey**

## 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. Patient and service user representatives and advocates are also involved at all levels of the programme's governance structures.

The National Care Experience Programme has a suite of surveys that capture the experiences of people using these services. The programme implements the National Inpatient Experience Survey, the National Maternity Experience Survey, the National Nursing Home Experience Survey, the National Maternity Bereavement Experience Survey and the National End of Life Survey. There are two additional surveys under development; the National Mental Health Experience Survey and the National Cancer Care Experience 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. Our Research and Analysis team publishes survey findings and data, engages in academic research, and develops educational material to help people understand care experience surveys.

Find out more at [www.yourexperience.ie](http://www.yourexperience.ie)

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## **1. Background information**

The National Inpatient Experience Survey is a nationwide survey that offers patients the opportunity to describe their experiences of public acute healthcare in Ireland. The survey is part of the National Care Experience Programme and has been conducted six times since 2017. In 2023, a review of the survey model and methodology was conducted to inform improvements to the survey. The sixth National Inpatient Experience Survey was implemented in May 2024 and the recommendations arising from the review were reflected in this iteration of the survey. The aim of the survey was to learn about patients' experiences in public acute hospitals and to use their feedback to identify areas of good experience, and areas needing improvement.

### **Why are process reviews conducted?**

The National Care Experience Programme is committed to continuously improving care in Ireland and therefore conducts a review of processes after each survey cycle. During these reviews, key stakeholders identify which processes work well and which processes are in need of improvement, through a targeted consultation.

The National Care Experience Programme will utilise the findings from the review of processes to improve the planning and implementation of future survey cycles, by repeating processes that received positive feedback and developing areas that were identified as needing improvement. Stakeholder feedback from reviews of processes of previous surveys have been used to inform survey promotion strategies, reporting of findings and potential stakeholder training for survey implementation.

## **2. Purpose**

The purpose of this report is to give an overview of the feedback received from stakeholders in the review of processes regarding the planning, implementation, and outputs of the National Inpatient Experience Survey 2024. This document provides an overview of the evaluation process and recommendations for the administration of future survey cycles.

### 3. Scope

This document will review participants' feedback on:

- communication around the survey and survey findings
- survey processes
- survey questionnaire
- reporting the findings
- use of survey findings

### 4. Evaluation process

An invitation to participate in the evaluation questionnaire was distributed by email to all key stakeholders. This included participating hospitals, partner organisations, regional and national HSE staff, advocacy groups and other representative bodies.

The evaluation questionnaire can be found in **Appendix 1**.

### 5. Overview of the responses received

The questionnaire received a total of 74 responses. The majority of responses (63%) were from those working in participating hospitals; of those who provided information on their roles,

- 39% worked in quality and patient safety
- 31% were nursing grades
- 17% worked in patient engagement or patient experience roles
- 13% were in various other management or clinical roles.

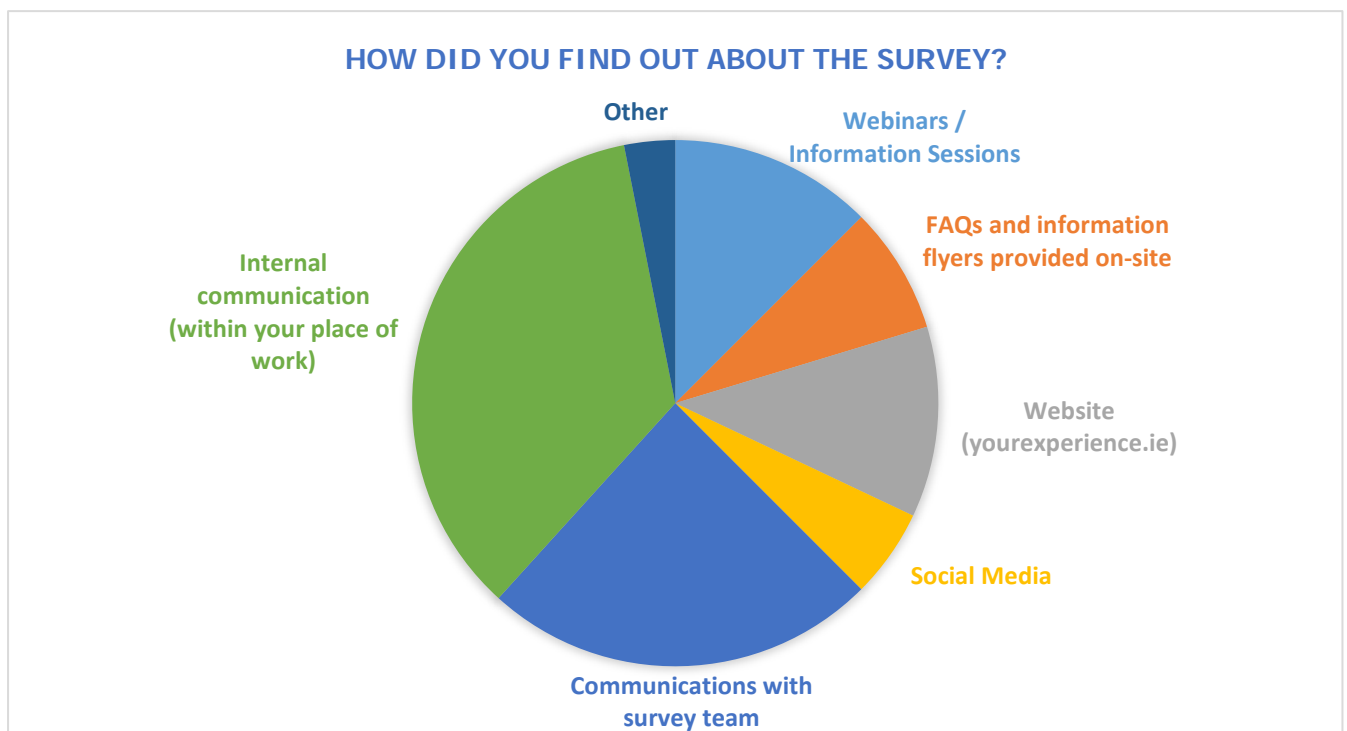
The National Inpatient Experience Survey was conducted for the sixth time in 2024, and so participating hospitals are quite familiar with this survey's processes and methodology. However, it is important to capture feedback on the processes and methodologies for each iteration as stakeholder needs and preferences may change over time.

#### 5.1 Communication and engagement

Promotional materials such as FAQ leaflets, posters and napkins were distributed to participating hospitals. The survey team also engaged directly with participating hospitals and other stakeholders through online information sessions and training on use of the dashboard.

Stakeholders who took part in the evaluation were asked how they were informed/found out about the survey, allowing for more than one selection if required, see Figure 1 below. 68% of respondents said they were informed through internal communications channels, while 47% said they got their information from the survey team.

In addition to the above, many free-text replies referenced communication and engagement, with feedback such as “Good communication and support from survey team. Easy for follow information and support documents / informatics for staff and patients”, “Easy to read and understand” and “More communication before the survey”.



*Figure 1: How Respondents found out about NIES*

## Key Findings

- The importance of engagement prior to survey implementation was highlighted, and to include what has improved on foot of previous Quality Improvement Plans and the impact of the previous survey.
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- Respondents felt that promotional materials such as posters and napkins worked well to promote the survey, but that it would have been helpful if they could be provided at an earlier stage.
- Engagement at local level from the hospital's quality team was noted as effective for disseminating information to staff and raising awareness.

- Respondents suggested increased media advertisement and visibility around the survey period to increase participation.
- Several respondents referenced communication with the national survey team as a survey process which worked well.

## 5.2 Questionnaire and Methodology

The 2024 National Inpatient Experience Survey included a total of 52 questions, 49 of these were structured, tick-box questions and three were open-ended (free-flow) questions. The survey covered many topics such as admission to hospital, care and treatment on the ward, trust in hospital staff, respect and dignity and discharge from hospital.

Following the review of National Inpatient Experience Survey in 2023, it was decided to increase the promotion of online responses to the survey in future, to reduce postal costs and improve data quality. For the 2024 survey, eligible patients were sent an invitation letter by post in June. The invitation letter contained a QR (quick-response) code, which participants could scan with a mobile phone to access the survey online. The invitation letter also contained the web address for the online survey, so that participants could access the survey using other devices. Participants were also offered the choice of completing a paper questionnaire if preferred.

### Key Findings

- Several respondents provided positive feedback on the 2024 questionnaire, in particular the survey length, with respondents noting for example: “the improved shortened questionnaire was good” and “questions were not over complicated”.
- The new questions included in this survey iteration received mixed feedback, with questions relating to patient safety incidents and disability status welcomed, however concern was raised about patients’ understanding of patient safety incidents which could potentially skew findings. There was also a suggestion to capture patient neuro divergence in addition to disability indicators, as this would be useful to improve their experiences in acute settings.
- Respondents felt the survey questions were easy to follow and understand. The continued inclusion of open ended (free-text) questions was also welcomed by respondents.
- Respondents commented positively on the wide range of patient experience themes captured in the survey.

- A number of respondents found that some of the questions were confusing, not helpful or applicable to their hospital. For example, hospitals who receive admissions via transfer from another hospital or hospitals without an emergency department commented on the relevance of questions relating to admission to hospital and the emergency department for their place of work.
- There were also suggestions for improvement, such as further reducing the survey length and promoting a more inclusive survey distribution by offering large print and audio versions, more variety in language options and promotion of the paper-based survey option if preferred.
- There was mixed feedback on the timing of the survey distribution, as some respondents felt that it should be given to patients on the day of discharge, while others felt allowing time between discharge and survey invitation better served patients.

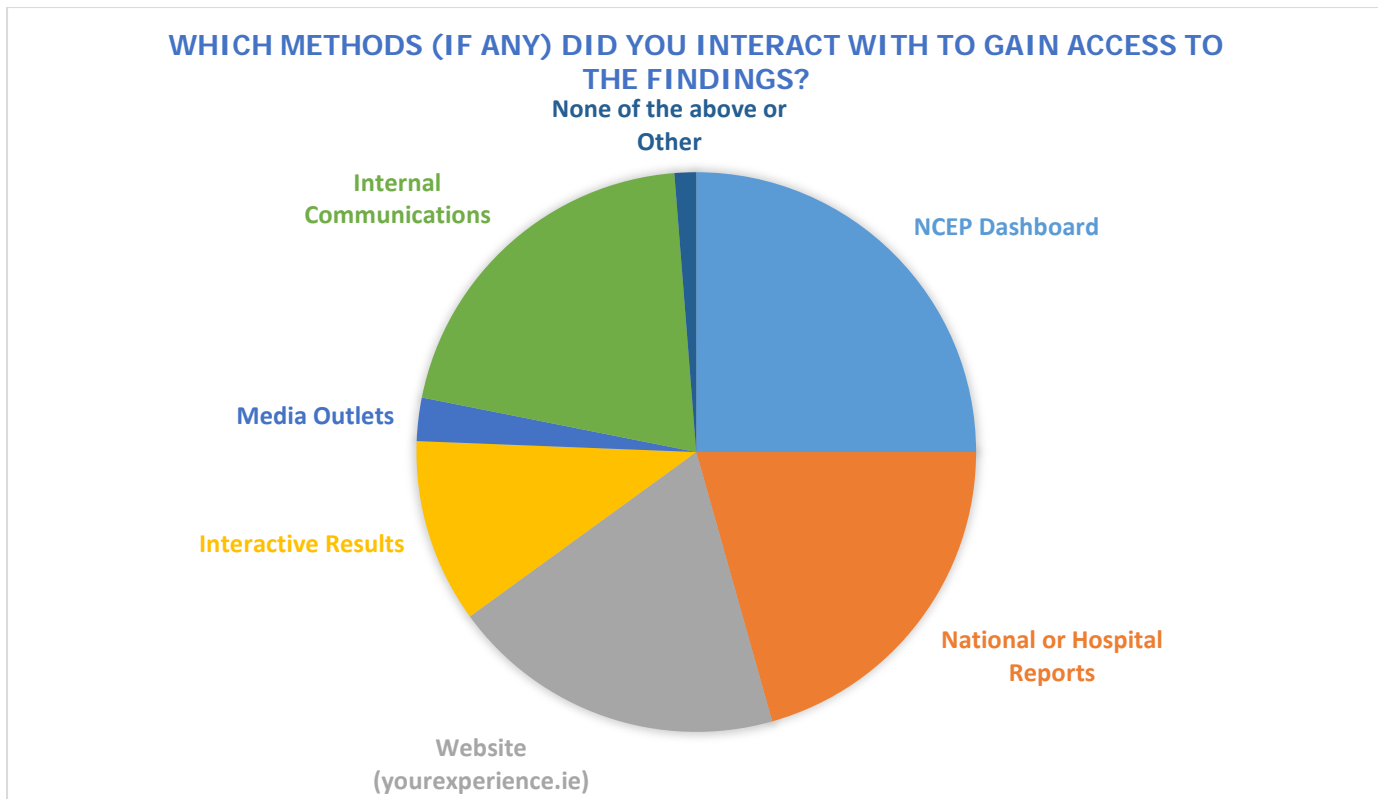
### 5.3 Reporting

The survey findings were published on [www.yourexperience.ie](http://www.yourexperience.ie). National and individual hospital reports were published in December 2024. Nominated stakeholders were granted access to a dashboard, which allowed them to see data for their service, as close as possible to the point of collection.

Publically available interactive results were also published via Tableau here: [NIES Tableau Report 2024 | Tableau Public](#)

Figure 2 below presents the findings on how participants accessed information on the survey findings.





*Figure 2: How Data Users gained access to the findings*

Almost two thirds (63%) of respondents to this question interacted with the NCEP dashboard to gain access to the survey findings, with significant engagement (49% – 52%) also recorded for the published reports, website and internal communications.

### Key Findings

- The dashboard is an important tool for stakeholders in accessing and filtering information for survey findings. This was evident in the responses to Question 6, and also in the open ended questions.
- Respondents commented on the usefulness of the dashboard in breaking down the data and comparing findings to previous years. Respondents generally found the dashboard to be user friendly, and that the training provided by the survey team was effective and helped inform and guide quality improvement initiatives.
- The availability of the survey team to answer questions on the findings and informatics was also noted as positive feedback by a number of respondents.
- There were some suggestions made to improve staff experience of the reporting tools, such as enhanced training, additional dashboard functionality, and clearer labelling of graphics.

## 5.4 Use of Survey Findings

The National Care Experience Programme offers training and guidance for healthcare staff on data extraction and submission for the conduct and promotion of the survey and for survey response interpretation. The HSE and individual hospitals respond to the survey results by developing hospital initiatives to improve care for patients and identify quality improvement priorities.

The majority (94%) of respondents who took part in the evaluation questionnaire felt that the NIES 2024 findings provided them with useful insights relevant to their roles. Further feedback on the use of survey findings was captured in the free-text responses, with particular reference made to the insights provided by patient perspectives.

Respondents also valued feedback in non-clinical aspects of care, for example, "...the worries and fears in patients and being able to find a staff member to discuss these with has greatly increased my insight into how patients may be struggling, quietly with information received, diagnosis and further decisions that may have to be made, following an admission to an acute hospital" and "gave us a window into the patient's viewpoint".

### Key Findings

- Respondents valued the survey as a process to gather feedback on patient experiences and noted that it contributes to a culture of quality improvement, as the survey data is the source of many quality initiatives undertaken in participating hospitals. Respondents indicated they appreciate the repetition of the survey, as it allows them to compare findings with previous iterations and stay informed with the most current data.
- Some respondents felt that hospitals had limited flexibility in identifying areas for improvement, due to the level of data available for individual hospitals, or the focus on national quality improvement priorities.
- There were also internal quality improvement projects undertaken in participating hospitals on foot of the survey findings.

## 6. Conclusion

As the survey has been implemented six times, several respondents said they felt familiar with the survey processes and the dashboard. However, any changes in future survey rounds need to be communicated to stakeholders.

- The majority of respondents relied on internal communication within their place of work; this finding emphasises the importance of the information provided to contact persons in participating hospitals.
- Stakeholders who interacted with the dashboard as part of their role were very appreciative of the training and support provided to them by the survey team.
- Frontline staff can feel disconnected from the survey findings and suggestions were made to promote the impact of the survey findings and showcase quality improvement work undertaken by staff since the previous iteration.

## 7. Next steps

The National Care Experience Programme Steering Group will review the recommendations outlined in this document and will use this information to inform and improve the future planning and delivery of the National Inpatient Experience Survey. The Review of Processes for the National Inpatient Experience Survey 2024 will be published on [www.yourexperience.ie](http://www.yourexperience.ie)

## Appendix 1: Questionnaire

### **1. What area do you work in?**

- Health Service Executive (HSE) - Participating Hospital
- Health Service Executive (HSE) - Health Region
- Health Service Executive (HSE) - National
- Department of Health
- Health Information and Quality Authority (HIQA)
- Advocacy Group
- Representative Body
- Other – Please Specify

### **2. What is your role? (E.g. Director of Nursing, Nurse, PALS (Patient Advice and Liaison Service) Officer, etc.)**

### **3. How did you find out about the survey? (Please select more than one if appropriate)**

- Webinars / Information Sessions
- FAQs and information flyers provided on-site
- Website (yourexperience.ie)
- Social Media
- Communications with survey team
- Internal communication within your place of work)
- Other (please explain)

### **4. From your experience, what was good about the survey process (e.g. questionnaire, distribution, dashboard, reports, survey communications – both implementation and reporting etc.)?**

### **5. From your experience, what could be improved about the survey process (e.g. questionnaire, distribution, dashboard, reports, survey communications – both implementation and reporting etc.)?**

**6. From the list below, which methods (if any) did you interact with to gain access to the findings?**

- NCEP Dashboard
- National or Hospital Reports
- Website (yourexperience.ie)
- Interactive Results
- Media Outlets
- Internal Communications
- None of the above or Other – Please explain

**7. Do you feel that the findings provided you with useful insights (relevant to your role)? Please explain**

- Yes
- No

