

# Waitaha Canterbury

## Inpatient Experience Survey

### Te Rūri Wheako- ā-Tūroro



## INPATIENT ADULT SURVEY RESULTS

### January – March 2023

3569 comments were moderated and published for the January-

Evidence tells us that patient experience is a good indicator of the quality of our health services. Better experience, stronger partnerships with consumers, patient and family-centred care have been linked to improved health, clinical, financial, service and satisfaction outcomes. Teams use patient feedback to monitor and improve the care we provide. Understanding how people experience healthcare gives us valuable insight and an opportunity to celebrate our success, do more of what we are doing well and to find ways of how we can do better.


Every fortnight we invite patients who have spent at least one night in hospital to participate in our patient experience survey. An invitation to participate in the survey is delivered via email or a link in a text message. Taking part is voluntary. The survey asks patients to rate and comment on their experiences in four domain areas: communication, partnership, co-ordination, and physical/emotional needs.

Responses are completely anonymous. Comments are reviewed to ensure staff and patient confidentiality. Feedback is verbatim, and comments are published as submitted (including spelling and grammatical errors). All staff have access to the Inpatient survey results.


### INPATIENT DOMAIN SCORES FOR JANUARY- MARCH 2023

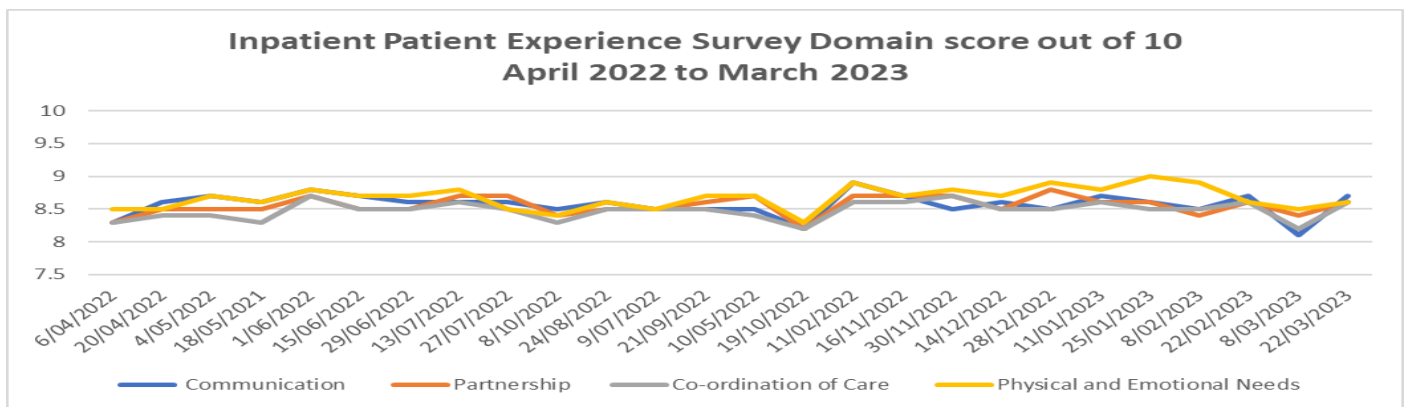
\* All responders are asked to rate their experiences in these 4 domains

 **Communication** **8.5/10**

 **Coordination of Care** **8.5/10**

 **Partnership** **8.5/10**

 **Personal Needs** **8.7/10**



- The Consumer Engagement Marker Framework is under review. This framework is used by Te Whatu Ora Districts to report how they are working with consumers in partnership to ensure we are engaging, responding, and acting on patient experiences to enhance care delivery by patient or whanau suggestions or improve where we can. The Patient Experience Survey assists us with this.
- Shuttle – Park to ride patient experience comments have been a theme late 2022 2023 and these comments have been followed up to ensure concerns are addressed. See page 4 of the report.
- Deteriorating Patient Programme Workstreams continue to be worked on with Korero mai and Shared Goals of Care roll outs planned for this year.

**Ask what matters**  
**Listen to what matters**  
**Do what matters**

## WHAT ARE OUR CONSUMERS SAYING?

\* Respondents who answered 'Yes, definitely' or 'Yes, to some extent' are counted in the overall percentage score

### HIGHEST RATED QUESTIONS

Did the staff treat you with respect? <b>Doctors</b>	<b>95%</b>
Was your name pronounced properly by those providing your care?	<b>95%</b>
Did the staff treat you with respect? <b>Nurses</b>	<b>96%</b>

### LOWEST RATED QUESTIONS

Was your information on the bedside board discussed with you?	<b>52%</b>
If unable to walk unattended to the hand basin when you needed to clean your hands, were you provided with a suitable alternative?	<b>73%</b>
Were you told the possible side effects of the medicine (or prescription for medicine) you left hospital with; in a way you could understand?	<b>73%</b>



### What our Māori Consumers saying:



### HIGHEST RATED QUESTIONS

Did the staff treat you with respect? <b>Nurses</b>	<b>94%</b>
Was your name pronounced properly by those providing your care?	<b>95%</b>
Did the staff treat you with respect? <b>Doctors</b> bedpan as soon as you wanted?	<b>96%</b>

### LOWEST RATED QUESTIONS

Was your information on your bedside board discussed with you?	<b>60%</b>
Were you told the possible side effects of the medicine (or prescription for medicine) you left hospital with; in a way you could understand?	<b>72%</b>
Did the hospital staff include your family/whānau or someone close to you in discussions about your care?	<b>75%</b>

### What are our Pasifika Consumers saying?

### HIGHEST RATED QUESTIONS

Was your name pronounced properly by those providing your care?	<b>89%</b>
Did the staff treat you with respect? <b>Nurses</b>	<b>90%</b>
Did the staff treat you with respect? <b>Doctors?</b>	<b>100%</b>

### LOWEST RATED QUESTIONS

Was your information on the bedside board discussed with you?	<b>75%</b>
Did the hospital staff include your family/whānau or someone close to you in discussions about your care?	<b>82%</b>
Were you told the possible side effects of the medicine (or prescription for medicine) you left hospital with; in a way you could understand?	<b>88%</b>

From January to March 2023, **6,987** invitations to participate in the survey were sent via email or SMS. **1,188** were completed a response rate of **17%** Inclusive of this number, **620** Māori consumers were invited to participate in the survey via email or SMS  
**129** were completed – a response rate of **10.9%**  
 Inclusive of this number, **217** Pasifika consumers were invited to participate in the survey via email or SMS  
**21** were completed – a response rate of **9.6%**

### What can we do to improve response rate and get more comments?

- Ensure email, SMS details up to date.
- Teams promote the survey by posters and voice.

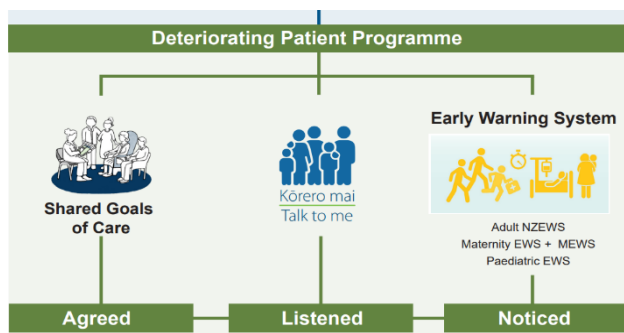
## Communication

- 😊 Staff just displayed care and empathy for my situation even to the point one of the nurses who had come on came over and gave me a big hug when she saw I was upset with the news the Oncologist gave me.
- 😊 The medical team in Woman's hospital was just superb. They were so informative and gives you time in a way that you could understand what was going on.
- 😊 All staff explained everything in a clear manner which I could understand. My husband is a [doctor] but staff still explained everything very clearly to me in a way that I could understand. This made me feel very respected as they didn't assume I would already know just because he works in the medical area.
- 😞 It felt like everyone was too busy to explain things properly to me so it left me feeling powerless in my own care.
- 😞 Would have been nice to see the surgeon after surgery to ask questions about the operation
- 😞 😊 Drs and Registrars tend to talk in medical terms to other members of their team. It's often difficult to break into that talk as a patient. If you can get one of them on their own, they are usually much more communicative in-patient language. Nurses were 99% focussed on patient care and communication.

You said

## Partnership

- 😊 The surgical process/pathway options were presented and explained well with me being able to choose being fully informed of outcomes. Throughout my hospital stay I was able to decide on my care based on the information given to me. Able to choose pain relief to suit the level of pain I'm in.
- 😊 Dr left no stone unturned with tire-less investigative research inclusive of my feedback. I felt included and responded to as with Nicole regarding some minor bleeding resolved professionally post-surgery. Huge respect for "Florence Nightingale" the lady with the lamp on midnight shift- one very capable and very wise woman. Sorry cannot remember her name- a very experienced Nurse...
- 😊 My wife and I were involved in decisions about my care. All levels of staff communicated me and my wife.
- 😞 I felt at times that there were options which were discussed but not with me or my wife. I know I was not in a great state and the unknown was some-what disturbing.
- 😞 Our discharge medication was not explained to my husband or myself well at all. I had to ask for this information myself, which we were given on a post it note. I had to really fight to be heard during my stay.
- 😞 I didn't always feel involved.



## The Deteriorating Patient Programme

The Te Tāhū Hauora | Health Quality & Safety Commission (HQSC) Deteriorating Patient Programme, a five-year programme was commenced in 2018 to reduce harm from failures and to recognise and respond to acute physical deterioration in adults admitted to Aotearoa New Zealand Hospitals. It has three workstreams; Shared Goals of Care (SGoC), Kōrero mai, and Early Warnings Sc (EWS). The workstreams centre on improved clinical communication systems, working in partnership with patient and families, involving and listening to them and making shared decisions together. Comments above reflect where we are doing this well and where we can improve. Adult NZEWS has been live since 2017 and electronic; Maternity use the MEWS (paper), Paediatrics has a local PEWS (paper). A National PEWS is underway. A Neonatal scoring system is in place that alerts clinicians to signs of deterioration via vital sign recordings. The [Kōrero mai \(talk to me\)](#) programme is rolling out to Christchurch and Burwood campuses in July 2023. This programme is a communication process for use by patients and whānau/families for escalation of serious concerns. [Shared Goals of Care](#) is planned for roll out late August early September. This programme supports clinicians and patients and whānau to explore patients' values, the care, and the treatment options available and agree the goal of care for the current admission if the patient deteriorates.

Coordination of Care	Personal Needs
<p>😊 Every specialist and care provider seemed to co-ordinate in a seamless manner from organising an orderly to having an X-ray or ECG. The day of my surgery was like clockwork it was most comforting and reassuring that everyone was working in unison.</p> <p>😊 The staff worked very well as a team when a patient in my room had a seizure late in the evening, I was very impressed by their great teamwork</p> <p>😊 We did receive some mixed information in relation to breastfeeding and so more consistency in that area would have been helpful</p> <p>😊 Quite a few mix ups with my surgery Fasting and admittance</p> <p>😊 I was left in waiting room for 5 hrs then moved to acute care then moved to another part of hospital then moved to downstairs</p> <p>😊 They said at first, I didn't have [condition] and backed it up with lab reports that I don't have one. Then at the end of my stay they were saying I do have [condition] even though all my lab reports are negative...</p>	<p>😊 The nurses and doctors on the Gynaecology unit were absolutely amazing and supportive to me and my partner and made everything much more manageable</p> <p>😊 I was spoken to clearly (partially deaf) My wife was consulted all the time I was asked if I need spiritual or cultural support I was asked if I had any physical issues</p> <p>😊 Good information was always forthcoming. Car parking is not good. But the shuttle bus really helped my wife when visiting.</p> <p>😊 i was very worried and they allowed my husband to sleep in the room and keep me company</p> <p>😊 Better parking please No parking 🗨️ very difficult if one has to drive to hospital on my own.</p> <p>😊 Better parking for dropping off and picking up 😊</p> <p>😊 Readily available and reasonably priced parking</p> <p>😊 After surgery I had to ask 3 different people for pain relief, I finally got it over an hour later.</p> <p>😊 When I left, I was still in a lot of pain and not happy that the problem was resolved no one came to talk to me about this</p>

**You said**

**What we are working on**

### Access

#### Transport from Park and ride

We have been scanning comments over the last year on what patients and whānau think about transport and parking, see comment above. Transport is a challenge for everyone and especially when visiting a hospital. Winter months are harder. In March, our 4 shuttle buses (operating between 7am – 8:30pm weekdays and 11am-8pm weekends) clocked up their largest month ever post-Covid transporting over 23,000 people. There have also been concerning wheelchair access and child seats for park and ride. We followed up.

#### Wheelchair access.

A limited-service trial was conducted to support wheelchair users within the shuttle bus. Sadly, it was found even after heavy promotion that the demand was not there to support an ongoing service.

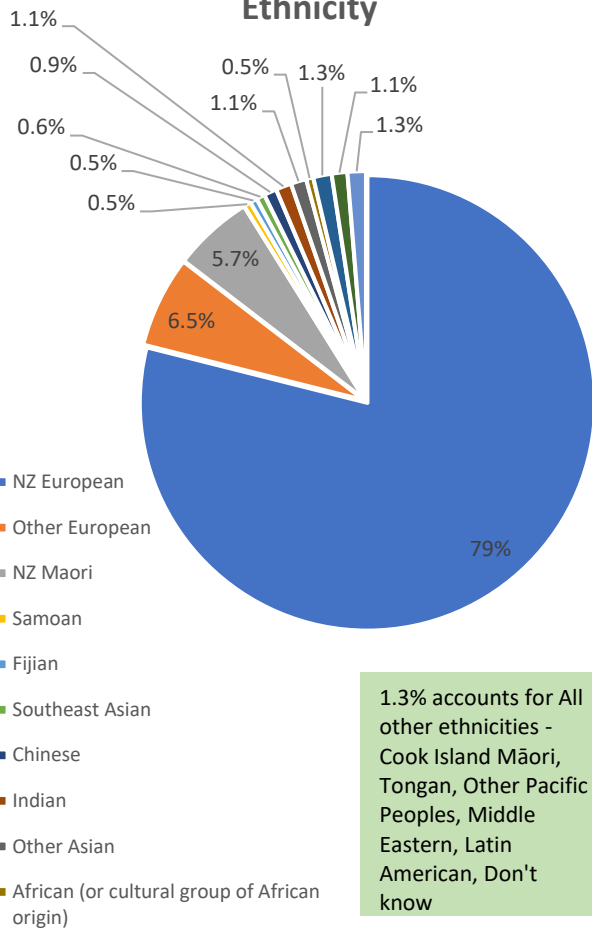
#### Child seats or lack thereof, have also been commented upon.

It's very important to ensure that your child travels in the appropriate child restraint and that the child seat is suitable for your child's weight and size. The practicality of stocking and always having available (and for all shuttle buses) the appropriate seat for your child has become an impractical solution, when the safest option is to use your child's own seat. For infection prevention control it is also safer and more practical when your child uses their own seat. So, the message is bring your own car seats.

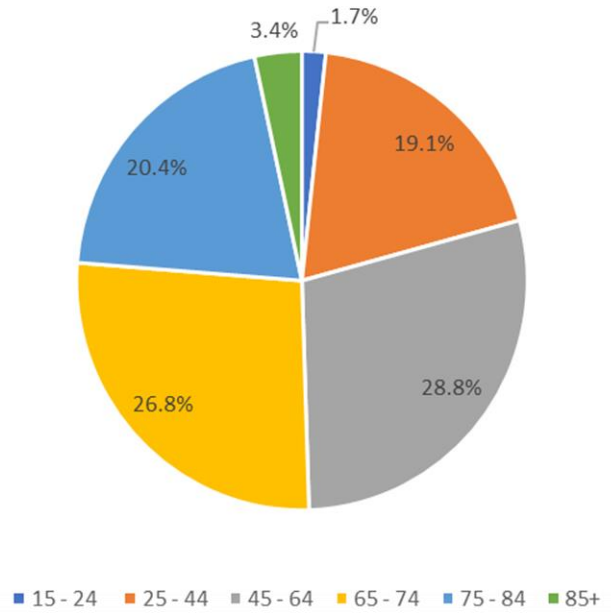
Thank you for your feedback - again, we have taken your comments on board and focussed on how best to look after our patients and caregivers, sometimes we don't have perfect solution, but we learn a lot along the way. Please continue to provide feedback.

# Demographics

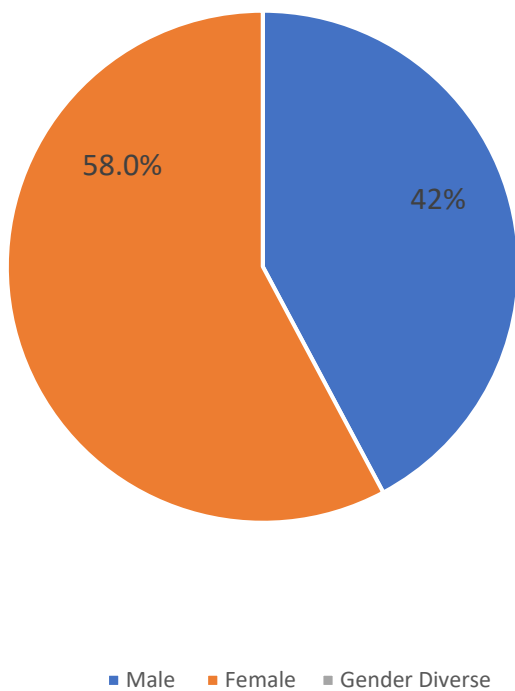
## Ethnicity



## Age



## Gender



## Patients that self identify as having a disability

