

Waitaha Canterbury

Inpatient Experience Survey

Te Rūri Wheako- ā-Tūroro



PUBLIC REPORT - INPATIENT ADULT SURVEY RESULTS

April - June 2022

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. Patient feedback is used by teams 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.

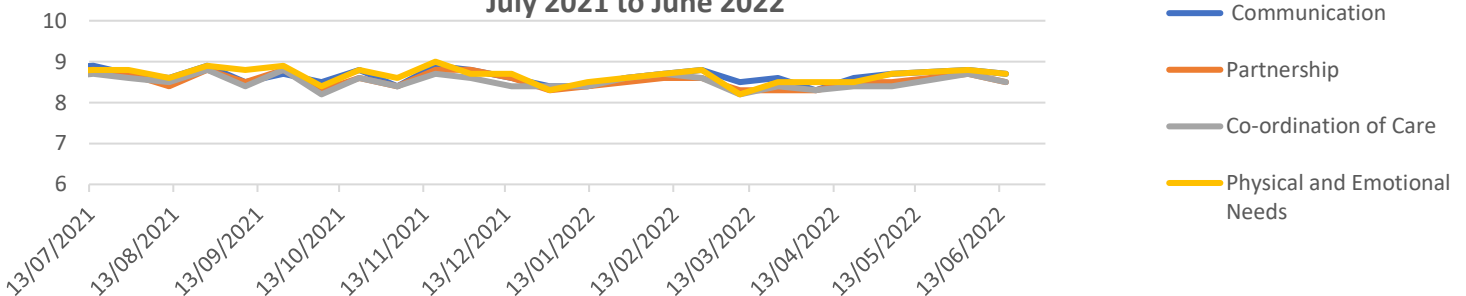
Responses are completely anonymous. Comments are reviewed to ensure staff and patient confidentiality. Feedback is verbatim, and comments are published as submitted (including spelling and grammatical errors). All staff have access to the Inpatient, Outpatient, Child and Parent and SMHS survey results.

INPATIENT DOMAIN SCORES FOR APRIL – JUNE 2022

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



Inpatient Patient Experience Survey Domain score out of 10
July 2021 to June 2022



- The domain 1-10 scores and quantitative questions continue to inform us and help us understand the patients lived experience. We know that Covid and increased Covid restrictions has had an impact across all domains and we have been asking the right questions and listening to what matters. See below activity on how we acted on feedback received related to hand hygiene for patients and ensuring we involve patients and whānau in care by creating a new information booklet and we are doing with Bedside Boards and ensuring we ask the 5 questions in General Medicine Wards.
- [Visit our Waitaha Canterbury Web page to watch the 2 min Health Quality and Safety Commission Patient Safety Video](#)

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

Before the operation did staff explain the risks and benefits in a way you could understand?	94%
Overall, did you feel staff treated you with kindness and understanding while you were in the hospital?	93%
Did you have confidence and trust in the staff treating you? <i>Doctors</i>	92%

LOWEST RATED QUESTIONS

Was your information on the bedside board discussed with you?	49%
Did the hospital staff include your family/whānau or someone close to you in discussions about your care?	63%
Did a member of staff tell you about medication side effects to watch for when you went home?	67%



WHAT OUR MĀORI CONSUMERS ARE SAYING:



HIGHEST RATED QUESTIONS

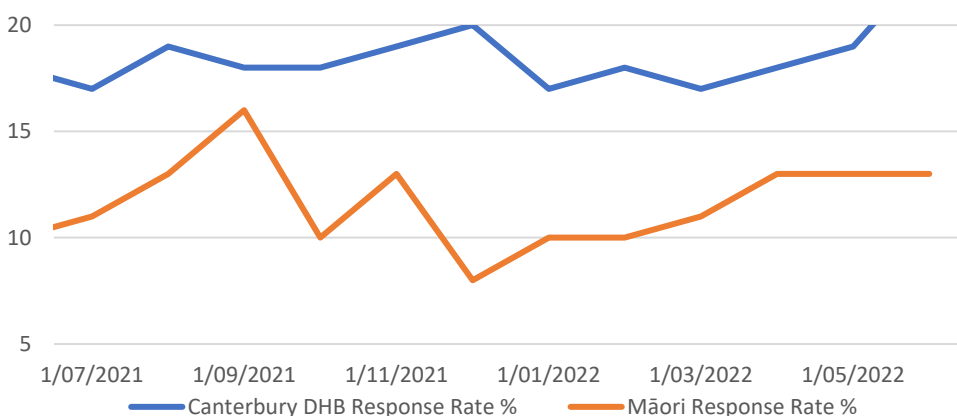
Before the operation did staff explain the risks and benefits in a way you could understand?	96%
Did staff tell you how the operation went in a way you could understand?	90%
Did you have confidence and trust in the staff treating you? <i>Nurses</i>	90%

LOWEST RATED QUESTIONS

Was your information on your bedside board discussed with you?	50%
Did the hospital staff include your family/whānau or someone close to you in discussions about your care?	63%
Did a member of staff tell you about medication side effects to watch for when you went home?	68%

INPATIENT SURVEY RESPONSE RATES

Monthly comparison for the last 12 months (percentages)



What are we doing about our low response rate to the survey?

- **CHECKING** patients details are correct on admission and **COLLECTING** email and mobile phone **NUMBERS** so patients get a survey link.
- **ENCOURAGING** patients to take our survey so that we can get a better sense of how we are providing services for them.
- **REFRESHING** our posters in ward areas to promote the survey.
- **ENGAGING** with our Māori and Pasifika health workers to promote the survey.
- **REVIEWING** survey invite inclusivity.

From April to June 2022, **6,891** invitations to participate in the survey were sent via email or SMS.
1267 were completed a response rate of **18.3%**
 Inclusive of this number, **698** Māori consumers were invited to participate in the survey via email or SMS
77 were completed – a response rate of **11%**

You said

Communication

- 😊 Always knew what was happening.
- 😊 Communication, especially from the nurses was absolutely.
- 😊 Staff listened to my questions and explained everything clearly.
- 😊 I felt that what I said regarding how I was feeling was taken seriously.
- 😞 I didn't know what was wrong with me until I went to my doctor 4 days later where she explained everything.
- 😞 Seen 3 doctors and told different prognosis by all 3. Family meeting arranged by hospital, so we travelled a distance to be there, but no one seemed to know about it when we got there, and we were told by dr that we only had very limited time as he had other things to do
- 😞 **My son was not told anything. He is my next of kin so should have been a bit more involved. I had a fall and he was not informed (family/whānau involvement)**

Coordination of care

- 😊 I felt that the staff wanted the best outcome for me.
- 😊 If my husband or children were there then medical staff would answer any of their questions and my family appreciated that and it gave them reassurance. It also allowed them to let people in my wider family know what was happening to me and that I was going to be ok.
- 😊 I had options presented to me for consideration. Though as the only real option for me was surgery (gangrenous appendicitis), I was very happy with how the teams helped me with decision making.
- 😞 **I was not aware of there being a bedside board.**
- 😞 I felt so out of the loop of my own treatment and very alone.
- 😞 Different people saying different things. I felt like a hypochondriac.

Family Whānau Involvement Contact

We did

During the recent Covid Outbreak overall experience ratings remained high. With the restricted visiting hours there was a low result about if *they were able to contact their family/ whānau when they wanted to*, and if they *felt safe in hospital*.

Families were often not present and could not ask questions and patients then forgot what they had wanted to ask. Teams could not provide a specific time that they would do ward rounds.

In response a new patient booklet setting expectations for the General Medicine Journey was developed. This booklet has a space for patient and their family to write questions, so they are prepared when the medical team visits. It also contains other information about preparing for discharge.

Bedside Boards

We are working on....

Patient experience results are indicating that many patients are not aware of what the Bedside Board is.

A bedside board is board near your bed that is regularly updated to show your needs, (e.g. assistance with moving, hearing, sight aids or a special diet). There is a space on the board or you or your family to ask questions. Medical and Surgical services at Christchurch Hospital view the Bedside Boards as a valuable safety communication tool for patients whānau, clinicians, and support staff.



The boards promote safe and efficient coordination of care. Thus, we are promoting Bedside Board use and ensuring explanations are given to patients and family of the boards purpose, so they can be involved and assist our busy teams. If you or a loved one is in hospital and you think the Bed Board may be incomplete. **PLEASE LET US KNOW** 😊

You said

Personal Needs

- 😊 Staff made me feel safe.
- 😊 Because I live on my own my family was told of ongoing care needed. All new medications were explained fully and the side effects.
- 😊 I was taken from me bed in a commode chair for the bathroom and when ready the nurse or nurse aide would return and take me to the sink for hand washing before helping me back to bed.
- 😊 I did need to wash my hands very often and I could reach the sanitiser (enabling Hand Hygiene).
- 😞 I was in a room shared with others and a curtain up. They could hear everything...

Enabling Hand Hygiene for Patients

We did

As part of the Covid-19 pandemic response and following low rating for the question in the Inpatient Experience Survey "If unable to walk unattended to the hand basin when you needed to clean your hands, were you provided with a suitable alternative?" an improvement project was undertaken.

Hygiene methods tested were providing a flannel, moist hand towel, wet wipes, different size hand gel product and holders. All these options were provided for patients within the bed space through to the patient's immediate bedside.

Patient experience feedback results are encouraging with a slight increase for June 2022 at 72.8% an increase of 3% pre-roll out for all patients responding "yes" to the above question.

Feedback included comments such as:

- Even though I could get to the sink this allows me to clean my hands when my meal arrives. The table top holder has now been rolled out to all the Burwood Inpatient areas except for our Older Persons Mental Health service as well as to Christchurch Campus and Ashburton Hospitals.



Partnership

- 😊 A social worker visited to ensure I would cope at home.
- 😊 I moved from Surgical Acute Assessment & Review Area (SARA) to a surgical ward and from the ward to a theatre. Everyone between departments knew what was happening and everything was seamless.
- 😊 Overall good, but it's such an overwhelming process, and you're sleep deprived that it's hard to remember, or make decisions, especially with lots of information coming at you.
- 😞 Discharge was slow and frustrating with arranging time to be picked up at front entrance.
- 😞 It seemed as though on the last day others were involved, and other conditions were ignored e.g. a dressing that District Nurse were changed was ignored and on the 5th day we had to address why they weren't changing the dressing which ended in infection He had a fall in Hospital on Friday night and (family Enduring Power of Attorney) were not told and learnt it at the family meeting the Tuesday after.

We have started this

The 5 Questions – The 5Q's

General Medicine has introduced the 5 Q's to both patient and staff, so patients and their whānau feel more informed about their hospital stay and understand when and what to expect when they are discharged and ensure important questions that matter to patients are answered.

Stay informed about your health

Patients and whānau who are informed about their health are likely to feel more satisfied with their hospital stay.

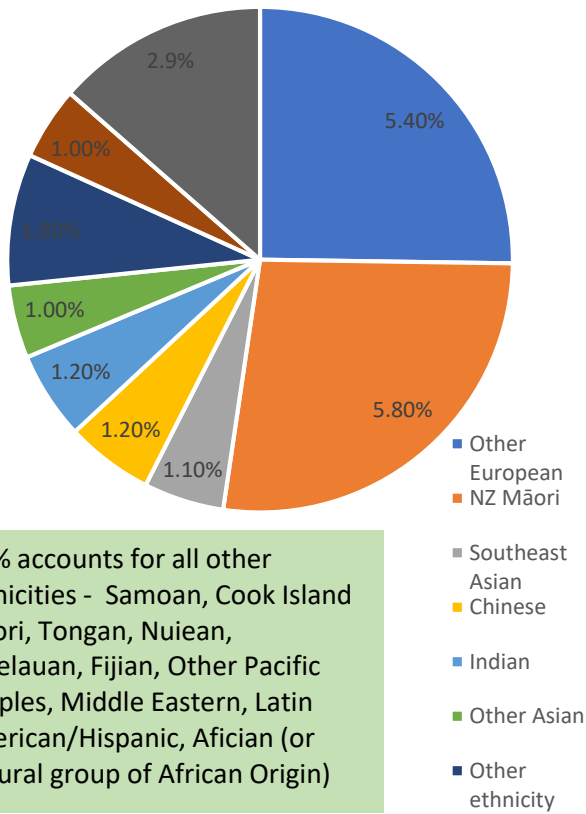
Stay informed by asking your health care team these questions:



What matters to ME

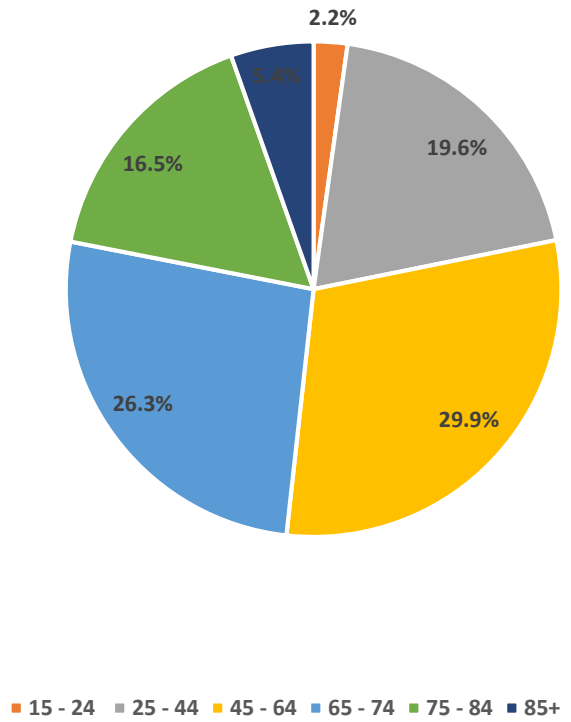
Demographics

Ethnicity % April - June 2022

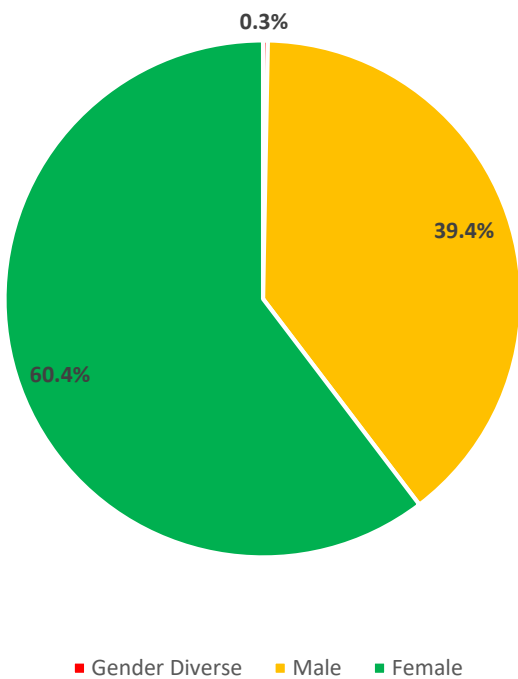


2.9% accounts for all other ethnicities - Samoan, Cook Island Māori, Tongan, Nuian, Tokelauan, Fijian, Other Pacific Peoples, Middle Eastern, Latin American/Hispanic, Afician (or cultural group of African Origin)

Age



Gender



Patients that self identify as having a disability

