

Canterbury DHB

Patient Experience Survey

Te Rūri Wheako-ā-Tūroro



INPATIENT GYNAECOLOGY SURVEY RESULTS – APRIL TO AUGUST 2021

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. Feedback is used by teams to monitor and improve care provided. 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.

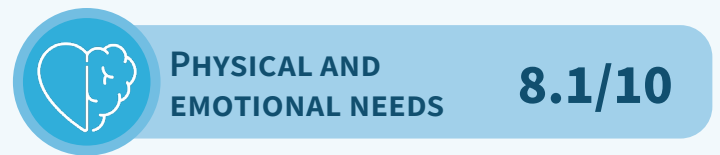
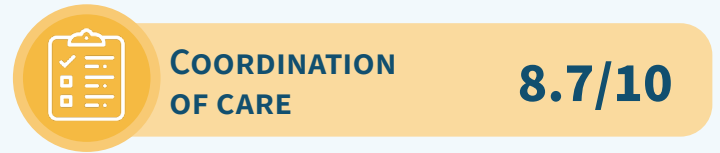
Taking part is voluntary. The survey asks patients to rate and comment on their experiences in four domain areas: communication, partnership, co-ordination and physical/emotional needs.

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).

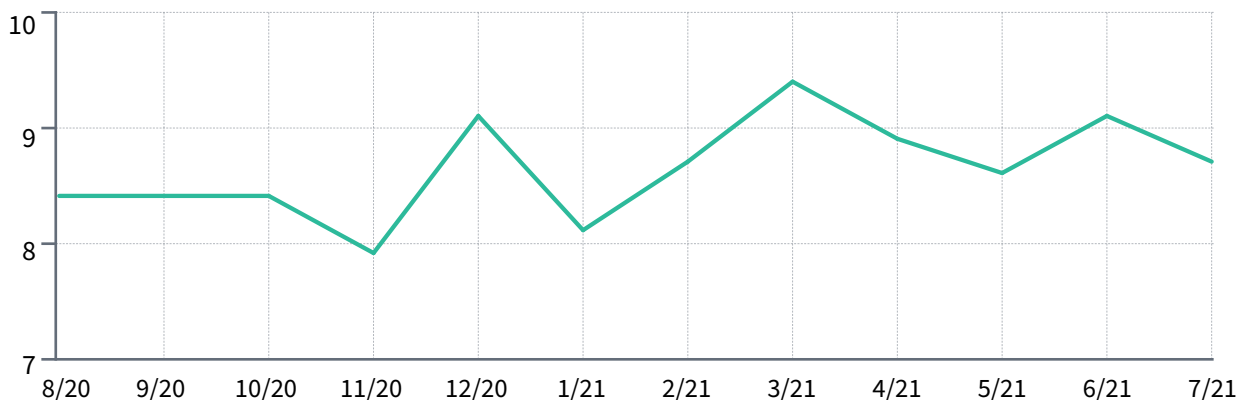
The results of the surveys are available on the intranet for all staff to view on Seeing our System in the [patient experience portal](#). All staff have access to both inpatient and outpatient feedback.

INPATIENT DOMAIN SCORES FROM APRIL TO AUGUST 2021

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



Inpatient Experience Survey – Average domain scores out of 10 | Monthly comparison for the last 12 months



Additional questions were added to the inpatient survey 25 March 2020 to monitor patient experiences of the COVID-19 pandemic. The additional questions related to the ability to contact family/whānau during admission and staff cleaning hands when touching or examining.

- 93.6% reported they were able to contact family/whānau when they wanted to.
- 81.1% reported staff always used hand sanitiser and washed their hands before being touched or examined – a decrease from 95.7% in July 2021.

Ask what matters
Listen to what matters
Do what matters

WHAT WE ARE DOING WELL, AND WHAT WE COULD DO BETTER

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

HIGHEST RATED QUESTIONS

| | |
|--|------------|
| Overall, did you feel staff treated you with respect and dignity while you were in the hospital? | 97% |
| Before the operation did staff explain the risks and benefits in a way you could understand? | 96% |
| If you needed help from the staff getting to the toilet or using a bedpan, did you get it in time? | 95% |

LOWEST RATED QUESTIONS

| | |
|---|------------|
| Was your information on the bedside board discussed with you? | 40% |
| Did a member of staff tell you about medication side effects to watch for when you went home? | 64% |
| Did the hospital staff include your family/whānau or someone close to you in discussions about your care? | 69% |

WHAT ARE OUR MĀORI CONSUMERS SAYING?

HIGHEST RATED QUESTIONS

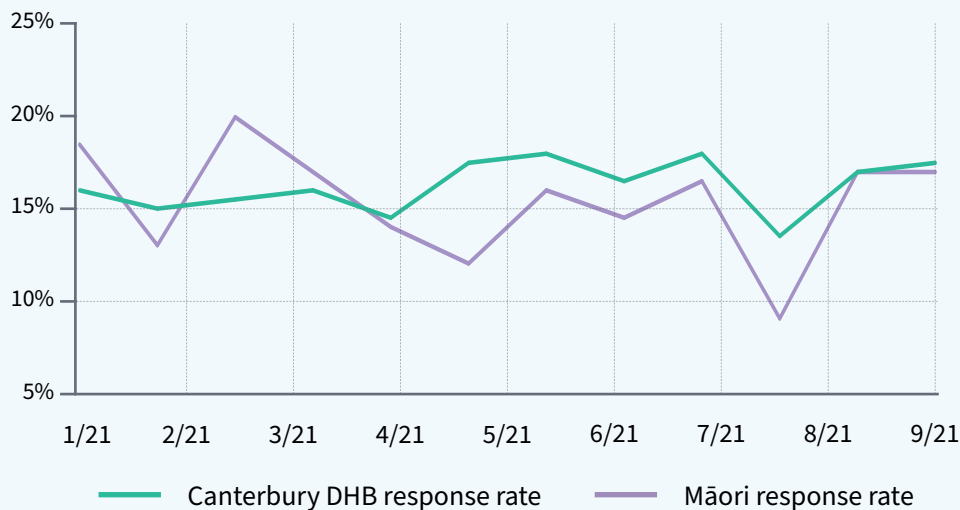
| | |
|---|------------|
| Before the operation did staff explain the risks and benefits in a way you could understand? | 88% |
| Overall, did you feel staff treated with you with respect and dignity while you were in the hospital? | 93% |
| If you needed help from the staff getting to the toilet or using a bedpan, did you get it in time? | 80% |

LOWEST RATED QUESTIONS

| | |
|---|------------|
| Was your information on the bedside board discussed with you? | 49% |
| Did a member of staff tell you about medication side effects to watch for when you went home? | 70% |
| Did the hospital staff include your family/whānau or someone close to you in discussions about your care? | 71% |

INPATIENT SURVEY RESPONSE RATES

Monthly comparison for the last 12 months (percentages)



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

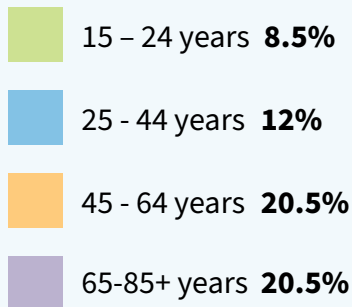
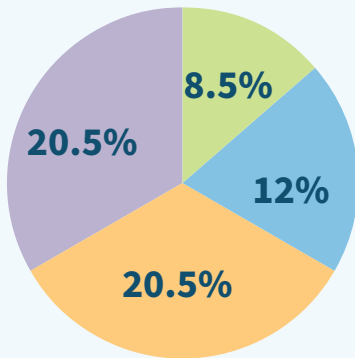
- Prompting our Wāhine to keep their details up to date when they come in to hospital so they get an invitation to participate in the survey
- Encouraging patients to take our survey so that we can get a better sense of how we are providing services for them
- Refreshing our posters in inpatient areas to promote the survey
- Engaging with our Māori and Pasifika Health Workers to promote the survey to the Wāhine they engage with.

During April to August 2021, **578** invitations to participate in the survey were sent. **114** were completed – a response rate of **17.5%**.

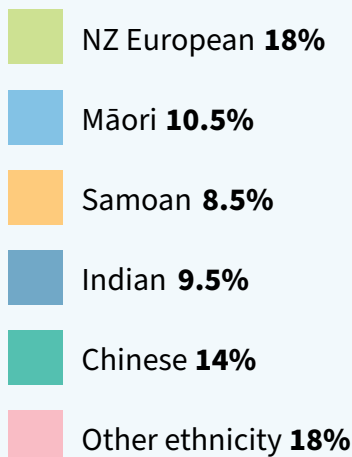
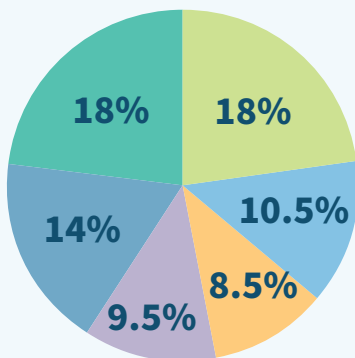
SURVEY DEMOGRAPHICS



Age groups



Ethnicity



IN THE LAST 12 MONTHS:

1,087 comments were published

52

consumers commented specifically about **discharge**

198

consumers commented specifically about **nursing staff**

47

consumers commented specifically about **communication in hospital**

WHAT ARE OUR CONSUMERS SAYING?

"No question was too silly to answer and always given in layman's terms so that I could understand everything said to me"

"I wanted to thank all the staff for an amazing job they did. The Surgery went very well, all the staff introduced themselves to me. It was very professional and also comforting."

"Everyone always claims the public health system is slow and clunky, my time spent there was efficient and flowed smoothly through each step."

"I felt that the primary focus by some doctors and nurses was on the fact that I was pregnant and not on me as the patient. Of course I care about the well-being of my unborn child but it felt at times like this was at the detriment to my own well-being."

"I was seen by two different departments in the hospital. There were significant delays in information being communicated by the two departments. I was also given highly conflicting information at times on what medications were safe to take during pregnancy."

"I did not receive a visit from a doctor on day of my discharge. The nurse was very good and tried to achieve a visit from doctors, but I was allowed to leave without my discharge papers - my family had travelled a considerable distance to pick me up, had waited, but I didn't want to delay them any longer."

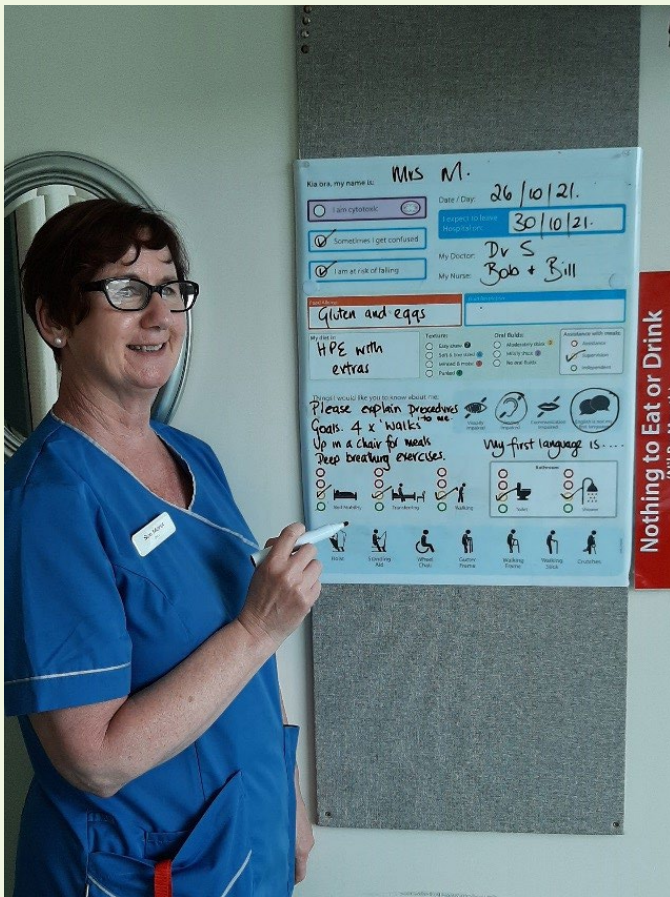
"Generally the experience was good, but due to the outcome I will never again consent to having surgery from a doctor who hasn't physically assessed me first."

"Lockdown made it hard for hospital to communicate whether my surgery was going ahead I know there are a lot of people to communicate with but was very stressful not knowing before the surgery - just a call saying we are unsure would have been helpful just something I found hard"

GYNAE GETS BEDSIDE BOARDS AT LAST!

Partnering with patients continues to be an important part of our safe hospital strategy. Bedside handover and the use of Bedside Boards are one way of encouraging and enabling opportunities for patients and their whānau to be more involved in their care. The boards, which usually sit bedside the woman's bed, have several alerts that give staff useful information 'at a glance' to aid communication and patient safety.

The Bedside Boards highlight and initiate discussions around the woman's potential risks during her stay as well as providing wāhine with a tool to communicate with the team their needs and wishes.



Sue standing by a completed bedside board

Clinical Nurse Specialist Sue Morel says "The new bedside boards provide an opportunity to discuss risk and promote patient safety and to talk about a plan of care in partnership with the patient and whānau. It's also an opportunity to identify and clarify negotiated goals focused on progress toward discharge".

The Gynaecology Ward have started using PowerPoint slide presentations in the main office that are on a continuous loop. Topics of interest or importance are featured and refreshed every couple of weeks. Bedside Boards became a focus when the old laminated Bedside Boards were replaced with the current bigger whiteboard version. The patient experience survey results were poor in August with only 30% of patients saying the information on the board was discussed with them.

"No one said anything about the beside board"

"Not discussed but it is self-explanatory"

"I don't know what the bedside board is"

"Didn't know there was a bedside board"

The changeover to the bigger whiteboards occurred whilst the Gynae Ward was temporarily relocated to a neighbouring ward when Christchurch was in Level 4 COVID-19 Restrictions this year.

Rebecca Bell, Clinical Nurse Educator says "It's great we finally have bigger, permanent boards. They are an effective way of alerting the team to the care required to keep our women safe when they are with us. The Gynaecology Ward is a diverse area that is a predominantly surgical environment. It is important that these boards are up to date and accurate, easily read and visible, reflecting the patient's needs and goals. Keeping these boards up to date is something that we are striving to improve on. The Patient experience survey results help us track improvement. August results are already tracking an improvement with 42% of patients saying the information on the boards has been discussed with them"

If you want to feature your story or share some of the awesome things you are doing with the feedback you are getting from the patient experience survey, please email Quality@cdhb.health.nz

ACTION STATION

Our patients appreciate it when:

We tell them they will receive an invitation to participate in the survey

How might we improve?

Talk to your patients about how they can help us improve the way we do things by taking the survey!

Ask what matters
Listen to what matters
Do what matters